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House of Representatives

The House met at 10 a.m. and was called to order by the Speaker pro tempore (Mr. FORTENBERRY).

DESIGNATION OF SPEAKER PRO TEMPORE

The SPEAKER pro tempore laid before the House the following communication from the Speaker:

WASHINGTON, DC,
May 11, 2016.

I hereby appoint the Honorable JEFF FORTENBERRY to act as Speaker pro tempore on this day.

PAUL D. RYAN,
Speaker of the House of Representatives.

MORNING-HOUR DEBATE

The SPEAKER pro tempore. Pursuant to the order of the House of January 5, 2016, the Chair will now recognize Members from lists submitted by the majority and minority leaders for morning-hour debate.

The Chair will alternate recognition between the parties, with each party limited to 1 hour and each Member other than the majority and minority leaders and the minority whip limited to 5 minutes, but in no event shall debate continue beyond 11:50 a.m.

THE COST OF FEDERAL REGULATIONS

The SPEAKER pro tempore. The Chair recognizes the gentlewoman from North Carolina (Ms. FOXX) for 5 minutes.

Ms. FOXX. Mr. Speaker, we talk a lot in this Chamber about the burdensome regulations that Federal agencies frequently place on the American public. Last week the Competitive Enterprise Institute released a report that puts a price tag on the rules implemented by the Federal bureaucracy, saying that Federal regulation and intervention cost American consumers and busi-

nesses nearly \$2 trillion in lost economic productivity and higher prices in 2014. That is simply unacceptable.

Many of these rules hinder innovation and job creation and are costly to businesses and consumers. As a former small-business owner, I know firsthand how the government can make it more difficult for a business to be successful. I recognize the true costs of overregulation, such as lost productivity, increased expenses, and new financial and legal liabilities, which many policymakers often forget about.

Just last month, the House approved a disapproval resolution to stop the Obama administration from implementing its flawed fiduciary rule, which will significantly impact the ability of Americans to receive advice on how to save for retirement and make it more difficult for businesses—in particular, small businesses—to establish retirement plans. The rule, which contains more than 1,000 pages of new regulations, makes it cost prohibitive to offer advice or services to low- and middle-income Americans by increasing compliance costs and the risk of litigation.

The Department of Education is constantly putting obstacles in the path of innovation, and these unnecessary regulations are stifling pioneering higher education institutions at a time when forward-thinking solutions are desperately needed. More redtape and hoops to jump through are not going to promote diverse choices for students. In fact, they often add administrative costs on schools—costs that are typically passed on to students in the form of higher fees and tuition. That is why I have introduced legislation to reduce Federal intrusion and limit the costly regulatory burden on colleges and universities.

As my colleagues and constituents know, the issue of unfunded mandates has been a particular interest of mine for a long time. It is frequently over-

looked in the debates about reforming our regulatory system and carrying out Federal policies. It is all too easy for Washington bureaucrats to write off concerns expressed by a handful of local governments or a small subset of private businesses. But these decisions have real costs and real effects on the individuals, families, and communities we each represent.

My legislation, the Unfunded Mandates Information and Transparency Act, does not seek to prevent the Federal Government from regulating; rather, it seeks to ensure that its regulations are deliberative and economically defensible. Asking regulators to consider thoroughly and understand the cost of a rule in addition to its benefits should not be controversial.

Republicans are often accused of opposing all regulations, but that is just not true. We are in favor of common-sense rules, and we believe it is possible to alleviate the regulatory burden on small businesses and other job creators while balancing public safety and consumer interests.

Regulation by bureaucratic fiat is not what the Founding Fathers had in mind when they created our government. I applaud Speaker RYAN for creating the Task Force on Reducing Regulatory Burdens and look forward to seeing its suggestions for a modern and transparent regulatory system that makes it easier to invest, produce, and build in America.

ISRAEL INDEPENDENCE DAY/DAY OF REMEMBRANCE

The SPEAKER pro tempore. The Chair recognizes the gentleman from Rhode Island (Mr. CICILLINE) for 5 minutes.

Mr. CICILLINE. Mr. Speaker, tomorrow is Yom Ha'atzmaut, the commemoration of the Israeli Declaration of

□ This symbol represents the time of day during the House proceedings, e.g., □ 1407 is 2:07 p.m.

Matter set in this typeface indicates words inserted or appended, rather than spoken, by a Member of the House on the floor.



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Independence in 1948. This day of celebration is always immediately preceded by Yom Hazikaron, Israel's Memorial Day.

This timing is no accident. The people of Israel know that their freedom comes at a high price. Today I am humbled to join them in remembering more than 23,000 soldiers and victims of terrorist attacks who have paid this price, including 68 soldiers and police officers and 32 civilians over the past year alone.

The strong relationship between the United States and Israel dates back more than six decades. On May 14, 1948, just 11 minutes after the provisional government of Israel, led by Prime Minister David Ben-Gurion, proclaimed a new state, President Harry S. Truman announced: "This government has been informed that a Jewish state has been proclaimed in Palestine, and recognition has been requested by the provisional government thereof. The United States recognizes the provisional government as the de facto authority of the new State of Israel."

This year, Israelis will celebrate their independence as they always have, gathering for public shows, performing Israeli folk dances, singing Israeli songs, and spending the day with families at picnics or on hikes. The holiday will conclude with the awarding of the Israeli Prize to men and women who have made unique contributions to culture, science, the arts, and humanities.

For American Jews, the celebration of Israel's independence has always been a way to express solidarity with the State of Israel. In many communities, it is a special occasion for Jewish organizations and synagogues of different denominations to come together for a single, united celebration of Israel's creation and existence, both of which have defied great odds.

Just one day after President Truman recognized the new Jewish state's existence, five neighboring Arab countries amassed their armies and invaded, determined to remove the dream of Israel from the pages of history. But after months of fighting, Israel emerged stronger than it was before, with more territory under its control.

Since then, the people of Israel have lived under the threat of violence for nearly seven decades. They survived the Six-Day War in 1967, the Yom Kippur War in 1973, and insurgencies that targeted soldiers and civilians alike. Through it all, the friendship between the United States and Israel has remained strong. We stood together to oppose Soviet aggression during the cold war, and we continue to stand together today, united in the fight against terrorism and global extremism.

This friendship is rooted in much more than strategic interests. The United States and Israel have always shared common values. As the most stable and successful democracy in the

Middle East, Israel is committed to the values of equality and freedom, including a free press, freedom of religion, and the right to self-determination through democratic elections.

Today, at a pivotal moment in the history of the world, it is more important than ever for the United States to stand with the people of Israel. I have been proud to work with my colleagues on both sides of the aisle on legislation to strengthen the ties between our two countries. The United States-Israel Cybersecurity Cooperation Act, which I introduced earlier this year, will establish a joint Cybersecurity Center of Excellence where the leaders from our two countries can work together on cybersecurity and the protection of critical infrastructure. In the House Foreign Affairs Committee, we have worked to advance legislation that condemns efforts to inflame anti-Semitic sentiments by the Palestinian Authority. These are critical issues we must continue to work on in the pursuit of our common objectives and our shared values.

I congratulate the State of Israel on the anniversary of its independence, and I look forward to continuing to work to strengthen the relationship between our two countries even further.

THE REPUBLIC OF GEORGIA: A DEMOCRACY IN A ROUGH NEIGHBORHOOD

The SPEAKER pro tempore. The Chair recognizes the gentleman from Texas (Mr. POE) for 5 minutes.

Mr. POE of Texas. Mr. Speaker, as the world leader in freedom and democracy, it is in our national interest to see the same freedoms we enjoy spread to people throughout the world.

The Republic of Georgia is a small and young democracy in an area that is more known for its authoritarian rule than freedom. Georgia formally declared its independence in 1918, but 4 years later, the Soviet bear invaded and declared Georgia a Soviet Socialist Republic. But the Georgian people are resilient, and with the fall of the Soviet Union in 1991, Georgia again declared its independence from Russia.

Over the past 25 years, Georgia has become the freest country in its region. It sets up a stark contrast to the dictatorship of Putin in the north. However, the Russians never gave up on their ambitions to control Georgia.

I was in Georgia in 2008 when Russian troops invaded and took one-third of Georgia. I saw the Russian tanks up on the hill. And, Mr. Speaker, the Russians still illegally occupy one-third of the nation of Georgia.

The Russians want to impose tyranny upon Georgia precisely because of Georgia's quest for democracy and liberty. Georgia has made good governance a cornerstone of its reforms, grown the economy, and made significant progress toward creating a democratic society.

The world witnessed Georgia's first peaceful democratic transition of

power from one party to another in 2013, and it has improved media freedom for 4 consecutive years, according to Reporters Without Borders. In fact, Freedom House ranks Georgia number one in the region for its freedom of the press.

Georgia has also made significant strides when it comes to corruption. It even ranks higher than some European Union countries and other U.S. allies according to Transparency International.

When it comes to business and free markets, Georgia makes it to the top of the pack. The World Bank ranked Georgia among the top 25 countries easiest to do business in.

The fact is that the Georgian people and their government share our Western values. A recent poll found that more than three-quarters of the Georgian people support their government's goal to join the European Union. Nearly 70 percent of Georgians also support Georgia's joining NATO. The United States should be vocal and support Georgia's quest to be in NATO.

For the past 25 years of independence, Georgia has been a valuable ally of the United States. Due to Georgia's free market system, low corruption, and simplified tax system, many American companies have invested in Georgia, especially in the energy sector.

The U.S. should negotiate a free trade agreement with Georgia to add jobs to both of our economies and send a message that Georgia is an important friend of the United States.

Georgia is also a vital partner in the battle against international terrorism. It has provided more troops to the effort in Afghanistan than any other non-NATO member. Thirty-three Georgian troops have fought and died on the battlefield with American troops, and 900 Georgian troops still remain in Afghanistan.

The Georgians are now preparing to hold elections in October. To ensure that these parliamentary elections are free and fair, the Georgians have invited international, independent election observers to monitor those elections in October.

The United States and our NATO allies must remain firm in our support for Georgia. Georgia is a sovereign country whose boundaries should be respected—even by Putin. Russia knows Georgia is a symbol of democracy in the region. That is why Putin continues to rattle his sabres in the entire neighborhood. Dictator Putin knows if Georgia is a successful democracy, then Georgia's neighbors are going to want to follow that lead and become more democratic. It is in our national interest to support Georgia and their democratic aspirations in their journey for liberty.

Fifty years ago, our President John F. Kennedy talked about liberty. He stated what the American policy is regarding liberty. I hope and believe it is still our policy today. Here is what he said, Mr. Speaker: "Let every nation

know, whether it wishes us well or ill, that we shall pay any price, bear any burden, meet any hardship, support any friend, oppose any foe to assure the survival and the success of liberty.”

That applies to Georgia, Mr. Speaker. And that is just the way it is.

EPIDEMIC OF OVERDOSE DEATHS

The SPEAKER pro tempore. The Chair recognizes the gentleman from Connecticut (Mr. COURTNEY) for 5 minutes.

Mr. COURTNEY. Mr. Speaker, next to me is a map of the United States which shows the sickening increase in overdose deaths in this country due to heroin and opioid use over the last decade or so.

The first map is a map from the Centers for Disease Control statistics in 2004, when roughly 7,000 Americans lost their lives to opioid overdose. Again, the red color shows the intensity of regions where deaths occurred in excess of 20 per 100,000. The blue is 10 per 100,000 or less.

□ 1015

In 2014, over 28,000 Americans lost their lives to heroin and opioid overdose deaths. As you can see, the red portions of the country are increasing at an alarming rate. We have not gotten the 2015 statistics yet from the Centers for Disease Control, but by all indication from State numbers that are coming out, this map is actually going to get worse for the 2015 numbers.

Mr. Speaker, we have an epidemic in this country which far surpasses any challenge that is presented by any natural disaster. If we had an attack on the homeland that took the number of lives that these maps represent, this Congress would be on fire in terms of trying to move resources and help to communities all across the country.

Again, it is indiscriminate. It hits rural America, it hits suburban America, it hits urban America, and it hits age groups and ethnic groups across the board.

Today we are going to be taking up some legislation, H.R. 4641 and H.R. 5046. The first bill has 2 cosponsors; the second has 10 cosponsors. The first provides for establishment of an interagency task force to talk about pain medication, and the second is to authorize, not appropriate, different programs for heroin and opioid reduction. They are benign bills. It would be impossible for anyone to object to them.

But to be very clear, there is not a penny in either of these measures to help law enforcement. The police and fire who are responding to these crises day in and day out back home in eastern Connecticut are burning out because of the frequency of these calls. There is not a penny in these measures for treatment beds, for detox, or for long-term care treatment. In the State of Connecticut, it takes 4 to 6 months to get treatment.

These are addicts who are at points in their lives where to talk about a 4-

to 6-month time span is to talk about an eternity. If you talk to the families who are dealing with their loved ones who are ensnared in these addictions, 4 to 6 months is really basically being told that there is no treatment available.

There is not a penny for prevention and education. If we go upstream, that is how we solve this problem in terms of better practices for opioid and heroin prescription.

It is not a coincidence that the White House last night issued a statement on this legislation, which basically points out the fact that they “do little to help the thousands of Americans struggling with addiction.”

The statement goes on to say that these alarming trends which are represented on this map “will not change by simply authorizing new grant programs, studies and reports. Congressional action is needed to fund the tools communities need to confront this epidemic and accelerate important policies like training health care providers on appropriate opioid prescribing, an essential component of this effort.”

The President submitted a budget with \$1 billion of new funding paid for offset for 2017 that would put money into those three buckets: prevention and education, law enforcement, and treatment, again, no action by the majority in terms of dealing with actual funding to help people out there desperate for help.

There is a bill also to provide emergency supplemental funding of \$600 million for this year to get that help out now. We presented it to the Rules Committee last night, and it was rejected.

If we had a hurricane or a tornado or a forest fire that was ravaging parts of this country or an attack on the homeland, this place would not hesitate about getting resources out there to help the folks that would respond to that type of a crisis; yet, somehow we have turned a blind eye to the thousands of Americans who are suffering from addiction and to the thousands of law enforcement fire and police who are responding to these calls literally as we are sitting here today.

There are hundreds of people per day who are dying because of this problem, and we, again, are providing no resources about better opioid prescription practices and getting better education, particularly to our young people, that clearly this map shows we must do if we are going to get our arms around this conflict and this problem.

Today there will be votes. There will be a lot of self-congratulatory rhetoric about the fact that we are moving on this. But, remember, there is not a penny for law enforcement, for treatment, or for prevention and education. Until we do that, we are kidding ourselves that we are going to turn this alarming, disturbing trend around.

SOUTH DADE VETERANS AFFAIRS CLINIC

The SPEAKER pro tempore. The Chair recognizes the gentlewoman from Florida (Ms. ROS-LEHTINEN) for 5 minutes.

Ms. ROS-LEHTINEN. Mr. Speaker, I rise today in strong support of the long-overdue south Dade Veterans Affairs clinic adjacent to Homestead Air Reserve Base, part of my congressional district.

Community-based outpatient clinic facilities in Homestead and Key Largo are extremely limited in the amount of services that they provide. This project, therefore, can no longer be ignored, Mr. Speaker. Currently, these local military personnel, retired servicemembers, and veterans are not getting the proper support that they have so rightfully earned.

As the wife of a Vietnam veteran and a stepmother of two marine aviators, I am passionate about safeguarding our Nation’s military members and their families and fighting for the services they need in order for them to live healthy and fulfilling lives. Our military does not quit on us, Mr. Speaker, and I certainly will continue fighting for them.

It is estimated that there are more than 22,500 veterans, Active-Duty military, and recently deployed reservists eligible for VA medical services within a 20-mile radius of Homestead Air Reserve Base. Currently, those living in Homestead who require more than the limited services offered at Homestead Outpatient Clinic must travel about 70 miles roundtrip to the VA Medical Center in order to get the proper care that they desperately need. Veterans living in the Upper Keys have to travel even further, oftentimes more than 160 miles roundtrip.

This is completely unacceptable. It is a huge burden for our servicemen and -women and their families who have already sacrificed so much for us and our Nation. This new clinic would not only improve access to care for veterans in Homestead and the Upper Keys, but it would also enhance the quality of care throughout the region by reducing pressure on the Miami VA Medical Center.

Mr. Speaker, the south Dade VA clinic is a project that has a great deal of support throughout my district, including the Department of Defense personnel at Homestead Air Reserve Base and the Military Affairs Committee of the south Dade Chamber of Commerce.

I have also received thousands of constituent support cards, many of which I have here with me today. Here is a bunch, and here is a bunch. There are just thousands, Mr. Speaker.

Once again I would like to express my strong support for the long-overdue south Dade Veterans Affairs clinic adjacent to the Homestead Air Reserve Base. These local veterans have waited too long already, and they deserve nothing less than the successful completion of a new facility as soon as possible.

CONGRATULATING ISRAEL ON ITS 68TH
INDEPENDENCE DAY

Ms. ROS-LEHTINEN. Mr. Speaker, I rise today to congratulate the democratic Jewish State of Israel as it marks its Independence Day.

Though the Jewish people have historical ties to Israel that date back millennia, in just 68 years of statehood, look at all that Israel has accomplished. Israel is a world leader in education, in technology, and in innovation. It is a vibrant and open democracy with a robust economy that thrives despite the constant threats that it faces daily.

The United States can have no greater friend than Israel not only because we share the same interests, but because we also share the same values and beliefs, such as democracy and the rule of law. That is why it is imperative that our two nations sign a new memorandum of understanding to ensure that Israel has the capability and the capacity to defend herself and her citizens from all threats and be a shining example of democracy for the entire region.

Mr. Speaker, I look forward to continuing to work to strengthen the already-strong relationship between the U.S. and Israel. I congratulate the Jewish state and her citizens on its 68th Independence Day.

WAR ON DRUGS

The SPEAKER pro tempore. The Chair recognizes the gentleman from Oregon (Mr. BLUMENAUER) for 5 minutes.

Mr. BLUMENAUER. Mr. Speaker, there is a major front on the war on drugs that is only now getting the attention it deserves. We will be discussing it later today on the floor dealing with opioid addiction.

Instead of arresting or citing over 600,000 people for marijuana last year, which had zero overdose deaths and which a majority of Americans think should be legal, we should redouble our efforts to fight the abuse of opioid prescription painkillers and the epidemic of opioid deaths.

Because of reckless marketing and lax oversight, there is an overdose death every 19 minutes; 78 people a day die, 20,000 last year. This is directly related to many heroin addicts. Deaths on heroin are increasing because the addict's drug of choice when their supply of opioids is interrupted shifts to heroin.

2.1 million suffer from substance abuse and 1,000 people a day are admitted to emergency rooms for opioid related causes. We have a challenge that needs to be addressed. There is plenty of blame to go around: the drug company's marketing practices, pill mills and unscrupulous doctors whose government regulators were asleep at the switch; and the DEA, which cannot get its priorities or its story straight.

I am hopeful that today's action on the floor will be the first step. As my

friend and colleague from Connecticut pointed out, today's legislation really doesn't speak meaningfully to what we are going to have to do: prevention and treatment, which ultimately can help disrupt this cycle of abuse.

There is one simple step that I think would make a profound difference. We are introducing legislation today to deal with disposal of prescription drugs. We are issuing approximately one prescription per adult in the United States, 260 million this year.

There are tens of millions of these pills floating around and left over. And what do people do? Many of them just flush them down the toilet or leave them in the medicine cabinets.

Well, flushing them into the sewer system is not a good idea because we are slowly medicating millions of Americans who are having traces of these drugs showing up in their system from drinking water. They are expensive to remove. Leaving it in the medicine cabinet is how many people find drugs to abuse. Teenagers steal unused medicines out of medicine cabinets in homes that they visit or from family members.

We are proposing a safe drug disposal tax credit, which would offer qualified entities such as retail pharmacies, narcotics treatment programs, and long-term care facilities a tax credit to be able to deal with disposal of these prescription drugs on site.

Locating safe drug disposal and take-back programs at pharmacies and other healthcare sites will increase access to this safe medicine disposal and will remove millions of these highly dangerous drugs from the hands of people who shouldn't have them.

By all means, let's have the debate today. Let's start moving forward. A look at the broader challenges of treatment and prevention is long overdue. Hopefully, the DEA gets its priorities straight in the future.

But, in the meantime, providing a tax credit for safe disposal is a small step, which should have bipartisan support and will make a difference in every community across America to end this epidemic of prescription overdose deaths.

CONGRATULATING BROCKWAY'S
GRACE PRESTON

The SPEAKER pro tempore. The Chair recognizes the gentleman from Pennsylvania (Mr. THOMPSON) for 5 minutes.

Mr. THOMPSON of Pennsylvania. Mr. Speaker, I rise to recognize the efforts of Grace Preston, a sixth grader from Pennsylvania's Fifth Congressional District.

Grace visited Washington, D.C., last week to accept the Prudential Spirit of Community Award, a ceremony at the Smithsonian Museum of Natural History. Grace was one of only two students in Pennsylvania to be honored with this award, which recognizes outstanding acts of volunteerism.

Grace has raised more than \$4,000 in the past 3 years to improve the lives of animals in her community through the sale of homemade dog treats, cat toys, and flea and tick repellent.

□ 1030

She became interested in helping animals after her family adopted a pet from a local shelter.

Through her efforts, Grace has raised enough money to enable the local Humane Society to purchase a storage shed, as well as other supplies, such as rabies gloves. She has also provided animal oxygen mask kits to a local fire department for pets that have been caught in fires; has helped pay for a shelter dog's surgery; and has collected animal food for the pets of needy families.

Grace's work is an example that students all across the Nation should look toward. I know she has made her school and her community proud.

LEADERSHIP FOR CLEAN WATER

Mr. THOMPSON of Pennsylvania. Mr. Speaker, last week was National Drinking Water Week. This designation is to highlight the importance of drinking water across our Nation and the need to reinvest in the infrastructure that brings tap water into our homes.

Quality water has been credited with vastly extending the life expectancy here in the United States by eliminating the sickness from diseases that are spread through drinking water, such as typhoid fever. While we have made great progress in improving water across our Nation, there is always more work to be done.

In Congress, since 1996, the Drinking Water State Revolving Fund has helped to fund public water systems and infrastructure projects in order to meet public health goals and to comply with Federal regulations. Last year alone, Congress provided \$2.3 billion to the EPA for local drinking water and sewer construction projects through the Clean Water and Drinking Water State Revolving Loan Funds.

Good water is not only vital for good health, but it is also essential for our State's number one industry: agriculture. The Commonwealth of Pennsylvania continues to provide substantial food, fiber, and energy for residents across our Nation. With this in mind, promoting and sustaining healthy waters and soil is essential.

As chairman of the Agriculture Subcommittee on Conservation and Forestry, with jurisdiction over Federal conservation programs that are administered by the Natural Resources Conservation Service, the U.S. Forest Service and forestry practices, we work to provide leadership and resources to promote the health of our watersheds, soils, and forests.

To help meet those needs, I was proud to work on the 2014 farm bill, which provides many positive tools for farmers and landowners. From on-farm operations to estuary management, the United States Department of Agriculture plays an important role in

managing and in improving both water and soil quality. The farm bill is the guiding authorization for the Department. Programs such as the Conservation Reserve Program, or the CRP, the Environmental Quality Incentives Program, or the EQIP, and the Regional Conservation Partnership Program, or the RCPP, are a few of the critical ones that directly impact soil and water quality in our country and certainly in Pennsylvania.

As we have seen so many times in Pennsylvania and around the country, once a watershed or water source is harmed, it often takes generations to recover. History shows us just how important clean water is. It also demonstrates how hard it is to fix a water source once it has been contaminated.

I remain committed in Washington and certainly in my home State of Pennsylvania to helping our professionals, volunteers, business community, nonprofits, such as Trout Unlimited and Watershed Associations, as well as academic and research institutions, such as Penn State, in their efforts to preserve our State's water and our country's water for future generations.

MR. SCOTT'S VISIT TO OREGON

The SPEAKER pro tempore. The Chair recognizes the gentlewoman from Oregon (Ms. BONAMICI) for 5 minutes.

Ms. BONAMICI. Mr. Speaker, when I travel around northwest Oregon, I often hear from parents who struggle to afford child care, which in Oregon can cost as much as a year of college tuition. I hear from people who can't find work because their skills don't match up with the jobs that are available in their areas, and I hear from students who are overwhelmed by the cost of their college educations.

These are not problems without solutions. As policymakers, we should be addressing the challenges our families face. It is possible to give every child the opportunity to succeed, to close the achievement gap, to make college accessible and affordable, to expand family-friendly workplace policies, and to make sure we have a 21st century workforce. In fact, we can't afford to let these problems continue to hold us back.

This week, I welcomed to Oregon Mr. SCOTT of Virginia, the ranking member of the Committee on Education and the Workforce. Together we saw and discussed some of the struggles our working families face. We had a whirlwind day that included substantive discussions about how to give children, young people, and working families the support they need to succeed. We talked about how to open the doors of opportunity that are closed for too many.

I invited Mr. SCOTT to Oregon because he has a remarkable record of standing up for working families. On the Education and the Workforce Committee, we worked together on the

Every Student Succeeds Act to strengthen our public schools, and on the Older Americans Act to support our growing population of older adults.

He has also been a leader for working families by his standing up to attacks on the National Labor Relations Board and by his protecting retirees through his support for the Department of Labor's rule to ban conflicts of interest in retirement advice. During his visit this week, I showed Mr. SCOTT the innovative and collaborative nature that sets Oregon apart.

Oregon is a leader in addressing barriers that are faced by working families. Last year our State legislature raised the State's minimum wage and passed legislation to provide workers with paid sick days to care for themselves or their families.

At our forum on early childhood development, we discussed how this country's workplace policies have not kept up with our changing workforce. Andrea Paluso from Family Forward Oregon told us that even the iconic image of the Cleaver family does not accurately reflect the diversity of American families.

In fact, Barbara Billingsley, the actress who played June Cleaver on "Leave It to Beaver," was in real life a single, working mom.

We heard from others about how food insecurity and hunger interfere with the ability of too many children to focus in school and about how early childhood education correlates to positive health outcomes and academic achievement later in life.

I am proud of Oregon for taking so many positive steps to protect working families, but these changes shouldn't be happening just for some. We should be having these conversations and discussions in Congress as well. Our economy will be stronger and our families will be healthier when we acknowledge that families need policies that work for them, not against them. We need equal pay for women, good wages, paid leave, and affordable child care to support families in Oregon and across the country.

Looking toward our future, I want students today to have the same opportunities I had. I worked my way through community college, college, and law school, and I graduated with a very manageable amount of student debt. Unfortunately, that opportunity is out of reach for too many of today's families.

Again, Oregon is a national leader. Oregon Promise, our State's free community college plan, will help put education within reach for thousands of students. Oregon's leaders have recognized that the future of our economy relies on an educated and innovative workforce to create and fill the jobs of the 21st century.

During our visit, I introduced Mr. SCOTT to Fernando, who participates in the Portland Community College's very successful Future Connect Program. This program connects low-in-

come, first-generation college students with financial aid resources, personalized academic advising, internships and job training, and an intensive summer orientation, all of which help them to succeed in college. This program is critical to Fernando, who is a DACA student, and to other first-generation college students. Fernando told us that Future Connect made a difference, it made him feel at home in college. Oregon knows it is not enough just to get students to college, but that it is important that they stay there and finish their degrees. Now Fernando is off to a 4-year university and is pursuing his plans to become a dentist.

I am incredibly proud of the State I represent. Congress can learn a lot from the Oregon spirit of innovation and collaboration. I was glad to show Mr. SCOTT the progress we have made in Oregon, and I look forward to working with my colleagues on both sides of the aisle to remove the many obstacles that are holding back working families and that are keeping young people from achieving their full potential, because when we open the doors of opportunity to everyone, we all succeed.

A STRONGER AMERICA OR A PATH TO ECONOMIC DISASTER

The SPEAKER pro tempore. The Chair recognizes the gentleman from Ohio (Mr. GIBBS) for 5 minutes.

Mr. GIBBS. Mr. Speaker, in 2009 and 2010, when the other side of the aisle had complete control of Congress and the White House, the American people saw what liberals would pass when given free rein and a blank check.

With Dodd-Frank, Democrats deemed it necessary to punish small community banks with burdensome regulations they cannot afford to comply with. Dodd-Frank created a new, unaccountable bureaucracy called the CFPB, which is funded in a way that obscures its transparency and prevents Congress' direct oversight of the agency. The lack of accountability like that seen with the CFPB and the heavy hand of agencies like the EPA and the IRS have become hallmarks of this administration.

With the stimulus bill, Democrats gave handouts to their union and so-called green energy friends. Taxpayers were on the hook for loan guarantees to companies like Solyndra, which used its political connections in the White House to push through irresponsible loan approvals. When Solyndra went bankrupt, it was at the cost of the American people. Many other smaller boondoggles came out of the stimulus: silly studies on ducks, over \$1 million on road signs that promote the stimulus, and over \$3 million for a tunnel for turtles in Florida.

This leaves ObamaCare. Too many Americans have felt the negative consequences of what boils down to a government takeover of the healthcare industry. The President claimed this law would decrease premiums by \$2,500 per

year. Instead, they have risen since ObamaCare has been enacted. To go with the increase in cost, many Americans have seen a sharp decrease in their choices. There are fewer plans available, restricting the ability of hardworking families to choose coverage that is appropriate for their circumstances.

Taken together, this trio of liberal policies is adding layers of bureaucratic red tape, forcing Americans to pay more for health care and putting taxpayers on the hook.

In 2009, Democrats used the blank check to add \$1.5 trillion in discretionary spending. When Republicans gained control of the House of Representatives in 2011, we put discretionary spending on a downward trend. Discretionary spending funds our Federal agencies such as the EPA and the IRS, as well as the Department of Defense. We have made real cuts in spending, not slowdowns in growth and not projected cuts down the road—honest-to-God cuts in spending. Since I took office in 2011, discretionary spending has been cut significantly by \$434 billion.

But this does not address mandatory spending, which is the real driver of our national debt. This includes programs like food assistance, welfare, Medicare, Medicaid, Social Security, and interest on our debt. Reforms are needed to ensure these programs work efficiently and are sustainable. Because of the way ObamaCare was written and enacted, mandatory spending also includes large portions of ObamaCare funding. Mandatory spending is on autopilot and will continue with or without Congress' annual appropriations process.

The fact is we have to change the law. That means both Chambers of Congress have to pass reforms and the President has to sign them or we have to override a veto. Mandatory spending accounts for three-quarters of all money spent by the Federal Government. This is a 180-degree change from when I was a teenager, when in 1970, mandatory spending was only about a third of government spending.

Realistically, there is only one path to a balanced budget and shrinking our national debt. That path is to pass a budget and use a process called reconciliation. A budget facilitates reconciliation, which only requires a 51-vote majority in the United States Senate and avoids a filibuster by liberals who want to continue running up America's credit card. Not doing a budget forfeits the opportunity to do reconciliation. Reconciliation with mandatory spending program reforms, coupled with real tax and regulatory reforms, will send a strong signal to our entrepreneurs and businesses, which will unleash innovation and the American spirit and will, thus, grow our economy and provide for our national defense. A vibrant economy will provide for our national security and priorities without raising taxes.

We have an opportunity with a new President next year to send two reconciliation bills to his desk—one for this fiscal year and another for the next fiscal year. Elections do matter, and this one has historic implications—one being a path to a stronger America and opportunity for every American or a path on a downward spiral of economic disaster, risking our personal and economic freedoms. God help us.

AMERICA IS SADDLED WITH BAD TRADE DEALS

The SPEAKER pro tempore. The Chair recognizes the gentleman from California (Mr. SHERMAN) for 5 minutes.

Mr. SHERMAN. Mr. Speaker, how does America get saddled with these bad trade deals?

If we look at our free trade agreements, we see a 425 percent increase in our trade deficit with those FTA countries. You get that statistic if you include NAFTA, which, of course, is the granddaddy of all of our free trade deals, and that doesn't even count our worst deal, which was granting most favored nation status to China.

So how do we end up with such bad deals?

First, the elites convince themselves that it is good for the country. They do this because they love the theory of the economic textbook and don't feel comfortable looking at the practice of how business actually works.

Second, the elites benefit from these deals. These deals help economists and Wall Street and attorneys, so they convince themselves that they are good for the country as a whole and create a subcultural echo chamber in which it is a subcultural norm that all smart people realize that these are good trade deals. In having convinced themselves to support these deals, they use a combination of condescension, false appeals to patriotism, and sneaky tactics to saddle the American people with these trade deals.

□ 1045

Take a look at the effect on working families. America needs a raise. To get it, we need a severe labor shortage. We would have millions of additional jobs, a desperate labor shortage, if only we had balanced trade with the world.

Let's look at TPP and its inclusion of Vietnam. We were told that the Trans-Pacific Partnership will give us free access to the Vietnamese market. There is only one problem: in Vietnam, there is no freedom and there is no market. In fact, we will not have access except as the Communist Party of Vietnam decides to grant it on the basis of crony capitalism, but our workers are going to have to compete against 40-cent-an-hour Vietnamese labor.

Now, we are told that in Vietnam, under this deal, it won't be illegal to organize a union. They won't put you in jail for organizing a union. What

they will do is they will plant drugs on every union activist and arrest them for that. You are not going to see free unions in Vietnam, and that will hurt working families in the U.S.

So how do they sell it? They claim that it may take jobs away, but it is a necessary sacrifice because we have to contain China. As the ranking member of the Asia and the Pacific Subcommittee, I am here to tell you the TPP is great for China.

First, we are told, well, we get to write the rules. No. These are Wall Street's rules. They are not the rules of the American working family.

Second, TPP enshrines the idea that currency manipulation is just fine. So China gets the single most important change in the rules of international trade.

Finally and most obscurely, there are the rules of origin. Now we know that, under this deal, goods that are made in Vietnam or Japan come right in to the United States with no tariffs. What you don't know is the goods that are 50, 60 percent, 70 percent made in China then go to Vietnam or Japan where they can put a made-in-Japan sticker on it and send it to the United States—that is when they admit that it is 50 or 60 percent made in China.

As a CPA, I will tell you, if you are in a position to admit that your goods are 60 percent made in China, that means they can be 90 percent made in China. So China gets to fast-track their goods into the United States, no tariffs, and we get no access to the Chinese markets. So it is a really bad deal.

How do you pass it? You use sneaky tactics. They don't have the votes to pass it now. The American people would rise in opposition to try to pass it now. So they are going to wait for the lame duck and then have a group of retiring Members of this body shaft the American people with the TPP.

We do have a solution. We need to get all three remaining Presidential candidates to declare, if sneaky tactics and lame duck sessions are used to impose TPP on America, that they will, in their first month in office, pull us back out of TPP. Unless we hear that clearly from the three Presidential candidates, all of whom oppose TPP, that they not only oppose it, but they will erase anything that happens in a lame duck session, then the elites will prevail. We will lose jobs again. Our workers will have to compete with 40-cent-an-hour labor. Chinese goods will be fast-tracked into the United States with "Made in Japan" and "Made in Vietnam" stickers on them.

It is time for the Presidential candidates to go beyond saying they are against it. They have to declare that they will make sure that any lame duck approval of TPP that happens in December will be erased the following January.

HEROIN OPIOID CRISIS

The SPEAKER pro tempore. The Chair recognizes the gentleman from New York (Mr. ZELDIN) for 5 minutes.

Mr. ZELDIN. Mr. Speaker, the growing heroin and opioid crisis has especially hit home in my district in Suffolk County, New York. There was a 2015 report issued in New York State that showed that, out of all 62 counties in New York, it was my home county that was hit the hardest by the rise of heroin and opioid abuse. We had the highest number of heroin-related overdose deaths of any county in New York.

As a member of the Bipartisan Task Force to Combat the Heroin Epidemic, I have spoken with affected families directly. Addiction is a truly devastating disease that shatters lives, families, and communities. It is a disease that only continues to spread at rapid rates, and more can and must be done to counteract the damage it has done and prevent its rapid advancement.

Working closely with my local community, I have been pursuing a more localized solution to address this crisis. Hosting multiple drug task force roundtables in Suffolk County, I have been able to bring together local elected officials, law enforcement, health professionals, community groups, parents, concerned residents, and those in recovery to discuss various ways that we can work together to combat this epidemic. Over the past year, working with both local residents and my colleagues in Congress, I have been pushing to advance legislation in the House that would help provide us with the resources we need to end the growing epidemic crisis on Long Island.

Just last week, joined by my local community, I was proud to announce that there has been progress made to pass several important bills this week aimed at improving and increasing access to treatment, enforcement, and education. The House is now passing many of these critically important measures over the course of the next few days.

While I have been dedicating the most amount of my time advocating for the passage of the Comprehensive Addiction and Recovery Act, CARA, H.R. 593, many other important proposals are also moving forward.

One other bill that I cosponsor is H.R. 4641, which will be passing today, which would improve the guidelines for prescribing opioids and pain medication by creating a Federal interagency and stakeholder task force that would review, modify, and update best practices for pain management in prescribing pain medication. While there are many legitimate reasons and needs for some to be treated with pain medication, those highly addictive pills pose a serious risk. This critical bill would help ensure that all parties, from prescribers to patients, have access to the most up-to-date information so that lawful prescription use does not become addicting.

Just a few of the other bills include the Examining Opioid Treatment Infra-

structure Act of 2016, H.R. 4982, which would require Congress receive a report on substance abuse treatment availability and infrastructure needs in the U.S., and legislation that would task a Federal agency to create a plan on how to deal with the opioid and heroin epidemic, H.R. 4976.

Legislation is passing to help stop the flow of illegal narcotics into our country, to keep drugs out of our communities and off our streets, such as legislation to help law enforcement officials identify and target drug traffickers, H.R. 3380, and to allow for easier prosecution of these criminals, H.R. 4985.

There is not one piece of legislation that will completely solve this overwhelming crisis, but finally Congress is taking a big step forward in the fight against drug abuse. We must always do everything in our power to provide our local communities with the resources necessary to help stop and prevent drug abuse through treatment, enforcement, and education, which is why I will continue pushing these efforts in the House.

I have spoken to parents of those recovering, parents of those who are unfortunately lost. It is impacting lives. It is devastating families.

Have a conversation in each of our districts, all 435 congressional districts, and we all hear the story all too often. It is not any race, gender, or socioeconomic status. It is not one particular school district. It is impacting all of our children.

As the father of two 9-year-old girls, I visited their class last week. I think of their generation, and it is important that this generation in Congress today does everything in our power this week and beyond to combat this epidemic.

WALLACE COMMUNITY COLLEGE SELMA

The SPEAKER pro tempore. The Chair recognizes the gentlewoman from Alabama (Ms. SEWELL) for 5 minutes.

Ms. SEWELL of Alabama. Mr. Speaker, today I rise to pay tribute to a hidden jewel in Alabama's Seventh Congressional District: Wallace Community College Selma. Wallace Community College Selma is a stellar 2-year institution that provides incredible educational opportunities to the students of Dallas County and across the Black Belt of Alabama.

Now, more than ever, America needs greater innovation in our educational system to meet the demanding needs of tomorrow. Outstanding higher education institutes in the State of Alabama are producing some of our State's and our Nation's best and brightest who will lead us into the next era of American innovation.

Wallace Community College Selma is leading that charge in my district through its dual enrollment program, which allows high school students to complete college courses and graduate with a high school diploma as well as

an associate degree from this junior college.

In 2008, Wallace Community College Selma graduated 31 students from the Selma Early College High School, which was the first of its kind on a college campus in the State of Alabama. The 2016 graduating class will include 22 dual enrollment students, including 20 students that participated in a special partnership with Tuskegee University.

The Howard Hughes Medical Institute program with Tuskegee allowed Wallace Community College Selma to increase the participation of underrepresented minority students from Alabama's Black Belt counties in the important fields of science and research. This dual enrollment program with Tuskegee offers high school students an opportunity to take classes at Wallace Community College Selma as well as Tuskegee, and to graduate with their high school diploma as well as an associate degree in science.

Mr. Speaker, the dual enrollment program at Wallace Community College Selma is accomplishing what it set out to do: to give Dallas County high school students a head start in college. The benefits of this important opportunity are immeasurable: cutting the cost and the time spent in college while providing high school students significant exposure to the types of classes and fields of interest that will give them an important advantage and jump start on their peers.

Collaborations like these are so critically important to our youth gaining important and invaluable educational experience while obtaining college credit through dual enrollment. America must encourage more of these types of programs as we seek to lead the world in educating our people and attracting new generations of high-tech and high-paying jobs.

As a Member of Congress for the Seventh Congressional District, I take great pride in working to offer solutions that will help lay the foundation for creating better paying jobs and for our educational system to thrive in the future. I am so proud to acknowledge today the tremendous efforts and the outstanding programs offered at Wallace Community College Selma which exemplify the invaluable role our 2-year colleges play in our communities.

This college's leadership and innovation in creating a 21st century learning environment is to be commended—what a jewel to have serving the students of the Black Belt of Alabama. I am proud to represent them in my district and also to help encourage more students to participate in the dual enrollment program and Wallace Community College Selma.

Mr. Speaker, I want to commend Dr. James Mitchell for his tremendous leadership as president of Wallace Community College Selma. I want to commend the faculty, administrators, and students of Wallace Community College Selma for being truly outstanding.

This Friday, May 13, 2016, is graduation day at Wallace Community College Selma. I want to congratulate the entire class of 2016 and especially acknowledge the academic achievement of the 22 dual enrollment students who will receive a special congressional commendation on Friday. The names of these students will be listed in this CONGRESSIONAL RECORD.

I would also like to acknowledge the tremendous efforts and the tremendous achievements of the Wallace students who participated in Alabama Skills USA:

Alabama Skill USA winner Jonniece Collins won first place in masonry and, as such, was the first woman in the State of Alabama to win this honor.

Other winners included Roderick Perkins, who won second place in masonry; Terrence Campbell, who won third place in masonry; and Francis Phillips, who won second place in cosmetology in the men's hair design competition.

I want to also pay special tribute to the outstanding athletic achievements of Ki'Onna Likely, who was the 2015–2016 Alabama Community College Conference Player of the Year as well as NJCAA Second Team All-American.

Mr. Speaker, I ask my colleagues to join me in honoring all of the accomplishments of the outstanding students and graduates of Wallace Community College Selma and to praise the leadership of Dr. James Mitchell and the hardworking staff and faculty of Wallace Community College.

Congratulations to the graduating class of 2016. I wish you all the very best in all of your future endeavors. We are counting on you to make a difference.

RECESS

The SPEAKER pro tempore. Pursuant to clause 12(a) of rule I, the Chair declares the House in recess until noon today.

Accordingly (at 11 a.m.), the House stood in recess.

□ 1200

AFTER RECESS

The recess having expired, the House was called to order by the Speaker at noon.

PRAYER

The Chaplain, the Reverend Patrick J. Conroy, offered the following prayer:

Merciful God of the universe, we give You thanks for giving us another day.

Send Your spirit upon the Members of this people's House. Enlighten their hearts, and give them the light and strength to know Your will and make it their own.

Guide them by Your wisdom, and support them with Your power. For You desire justice for all, and we ask You to enable them to uphold the rights of all.

May they be not misled by ignorance nor corrupted by fear or favor, but rather faithful to all that is true. As they work through this day and these weeks, may they temper justice with love, and may all their deliberations be pleasing to You.

May all that is done within these hallowed halls be for Your greater honor and glory.

Amen.

THE JOURNAL

The SPEAKER. The Chair has examined the Journal of the last day's proceedings and announces to the House his approval thereof.

Pursuant to clause 1, rule I, the Journal stands approved.

PLEDGE OF ALLEGIANCE

The SPEAKER. Will the gentleman from Illinois (Mr. LAHOOD) come forward and lead the House in the Pledge of Allegiance.

Mr. LAHOOD led the Pledge of Allegiance as follows:

I pledge allegiance to the Flag of the United States of America, and to the Republic for which it stands, one nation under God, indivisible, with liberty and justice for all.

ANNOUNCEMENT BY THE SPEAKER

The SPEAKER. The Chair will entertain up to 15 requests for 1-minute speeches on each side of the aisle.

REMEMBERING FIREFIGHTER RICHARD SHELTRA

(Mr. PITTENGER asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. PITTENGER. Mr. Speaker, I rise today in memory of Firefighter Richard Sheltra of the Pineville Volunteer Fire Department.

Firefighter Sheltra died a hero while battling a fire on April 30, but he was a hero long before he volunteered to step into that burning building.

Firefighter Sheltra had service in his blood. He had great examples because his parents were also volunteer firefighters, all dedicated Christians attending Forest Hill Church.

Whenever the call went out, Firefighter Sheltra dropped whatever he was doing to go help. So strong was his commitment to serve and protect the families involved that he was often first on the scene.

Firefighter Sheltra was Pineville's Rookie of the Year in 2015. He was in the process of applying to the Charlotte Fire Department when he died at the age of 20.

While Mr. Sheltra was an excellent firefighter, he was an even greater servant of God. Please join me in praying for Firefighter Sheltra's family and the Pineville Volunteer Fire Department during this time of immense grief

and, also, asking God to protect all of the brave men and women who serve our communities each and every day.

UNITED STATES' RELATIONSHIP WITH ISRAEL IS MORE IMPOR- TANT THAN EVER

(Mr. QUIGLEY asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. QUIGLEY. Mr. Speaker, last week I had the honor and privilege of traveling to Israel for the fourth time. Congressman SCHIFF and I joined the U.S. Ambassador to Israel, Dan Shapiro, at Yad Vashem in Jerusalem for Holocaust Remembrance Day.

We watched six survivors, each representing 1 million innocent civilians killed, light the torch and share their stories of loss and survival. It was a powerful, moving, and emotional moment.

I am not sure one can begin to understand the devastation of the Holocaust until you have stood in Dachau or Auschwitz or heard stories from survivors themselves that seem too horrific to be real.

The United States' relationship with Israel is more important than ever. No matter what other threats we face, the United States and Israel must remain the closest of friends and continue to work together to ensure the security of our trusted ally.

HONORING KANE COUNTY OFFICER OF THE YEAR DEAN TUCKER

(Mr. HULTGREN asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. HULTGREN. Mr. Speaker, I rise today to congratulate Officer Dean Tucker on being named Kane County's Officer of the Year for saving the life of a 7-year-old girl.

Last June Officer Tucker responded to reports of an early-morning two-car collision. Upon arrival, witnesses alerted him to an SUV believed to be submerged at the bottom of a retention pond. Surveying the scene from the shoreline, Tucker spotted 7-year-old Monserrat Alanis Ramirez 40 yards away, flailing on the surface.

Acting decisively, Officer Tucker quickly removed his gear, dove into the water, and wrapped his arms around the girl to keep her afloat. Fatigue quickly set in and Tucker called out to a fellow Aurora police officer, David Bliss, and a passerby for help. The passerby provided support, swimming alongside Tucker, while Officer Bliss waded in and pulled Tucker and the girl to safety.

Tragically, Monserrat's mother and brother did not survive. However, the brave actions of Officer Tucker prevented further loss of life. We salute his selfless courage.

BREAKING ADDICTION TO OPIOIDS

(Mr. HIGGINS asked and was given permission to address the House for 1 minute.)

Mr. HIGGINS. Mr. Speaker, I rise in support of H.R. 4981, the Opioid Use Disorder Treatment Expansion and Modernization Act.

Like the TREAT Act, which I introduced, this bill would allow qualified physician assistants and nurse practitioners to prescribe the medical treatment patients need to break their addiction to opioids. Utilizing these healthcare professionals is crucial to combat this epidemic, especially in medically underserved areas.

The bill would also increase the number of patients that physicians can prescribe Suboxone to from 100 to 250 per year. This is a step in the right direction. But there is no cap on the prescription of opioids, and it is counterproductive to cap treatment for opioid addiction.

The TREAT Act would eliminate this cap. The Senate Committee on Health, Education, Labor & Pensions has reported out a version with an annual cap of 500 patients. I urge my colleagues to support the Senate position so that more Americans can access this lifesaving treatment.

I thank the sponsors of this bill, Mr. BUCSHON and Mr. TONKO, and the Senate sponsor of the TREAT Act, ED MARKEY, for their work on this important initiative.

NATIONAL POLICE WEEK

(Mr. LAHOOD asked and was given permission to address the House for 1 minute.)

Mr. LAHOOD. Mr. Speaker, I rise today in recognition of National Police Week, a week we set aside to thank the 780,000 police officers who put on a badge nationwide and risk their lives to protect our communities.

We thank them for their brave service. Our police officers play an essential role in our community, working to keep us safe, upholding the rule of law, and responding to emergencies. The 18th District of Illinois is home to many upstanding, honorable, courageous, and self-sacrificing police officers.

Mr. Speaker, we also take time this week to mourn the loss of our fallen officers whose lives were lost in the line of duty. On average, one law enforcement officer is killed in the line of duty somewhere in the United States every 61 hours.

That is why I am proud to support a measure on the floor this week to extend the Bulletproof Vest Partnership Grant Program through fiscal year 2020. We need to ensure our officers have the necessary equipment to keep them safe.

Just this winter South Jacksonville, Illinois, in my district grieved the loss of one of its very own police officers in the line of duty.

I also want to take this time to thank the support network that supports our police officers, their parents, wives, husbands, and children, for the sacrifices they make when their loved ones serve as police officers.

Let us show our men and women who wear the badge how much we value their crucial work.

OPIOID AND HEROIN EPIDEMIC

(Ms. KUSTER asked and was given permission to address the House for 1 minute and to revise and extend her remarks.)

Ms. KUSTER. Mr. Speaker, today I rise to highlight the crucial importance of addressing the heroin epidemic that is sweeping across this Nation.

I have been holding a series of regional briefings in my home State of New Hampshire to hear firsthand from communities working to fight this crisis. I have heard from far too many families who have lost loved ones to this epidemic because no treatment options were available.

In the fall of 2014, a high school French teacher in one of my towns who was beloved by her students died of an overdose, in part, because she could not get access to the treatment she needed.

And my good friend, Kriss Blevens, lost her stepdaughter, Amber, to addiction when no treatment beds were available.

This is simply unacceptable. We need to take action now to fight back against this epidemic and arm our communities with the resources to help individuals struggling to overcome the devastating pull of addiction.

I am a cofounder of the Bipartisan Task Force to Combat the Heroin Epidemic. We recently announced a package of 15 bills. I urge my fellow members to pass these bills this week. Let's help American families.

WHITE HOUSE DECEPTION ON IRAN ARMS DEAL

(Mr. LAMALFA asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. LAMALFA. Mr. Speaker, over the weekend The New York Times published a disturbing story about the Obama administration's efforts to manipulate press coverage of the Iran deal.

When the deal was signed last year, many of my colleagues and I warned that Iran could not be trusted to follow these temporary restrictions on their nuclear weapons program, but key staffers in the White House worked to create an echo chamber for their false claims about the Iran deal.

The Obama administration spun a concocted story about a moderate regime coming to power in Iran that was suddenly willing to change their approach to their pursuit of nuclear weapons and their relationship with the rest of the world.

As it turns out, the administration had already begun talks with Iran well before new President Rouhani took office. Iran already knew how desperate President Obama was to sign this or any deal which allowed them to extract several key concessions. The deal only provides temporary restrictions on Iran's nuclear weapons program while giving Iran permanent relief from sanctions.

Meanwhile, Iran will continue to support terrorism and further destabilize the region as well as violate the missile test program in the agreement.

The Obama administration's misleading campaign to convince the American people to support the Iran deal has dangerous consequences for us deceiving the public and their trust in government as well as putting our allies around the world, such as Israel, in danger and that trust as well.

LEAD CONTAMINATION

(Mr. PAYNE asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. PAYNE. Mr. Speaker, it is not a new problem. Lead in school drinking water has been a problem in communities across this Nation for years. So why isn't there more outrage and talk about it among my colleagues?

Even Chris Christie has ordered lead testing in New Jersey public schools. When New Jersey's Governor starts to admit that there is a problem that demands government action, you know the situation must be dire.

No child takes a drink from a water fountain in school and thinks about whether the water is contaminated or not. It is our job to protect our children, and that means ensuring the safety of school drinking water.

Congress should pass and the President should sign my TEST for Lead Act. The bill requires States to help schools establish programs to test for lead in the drinking water if those States receive Federal funding for safe water programs. It would ensure transparency by requiring disclosure of high levels of lead in schools. Most importantly, it would help keep our children safe.

OPIOID OVERDOSES

(Mr. STEWART asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. STEWART. Mr. Speaker, like many of my colleagues, I am concerned by the great opioid epidemic that is sweeping our Nation.

Every day more than 78 Americans die from opioid overdoses—78 Americans. Think about that. That is more than three every hour. Nearly 2 million Americans are addicted to or abuse opiate-based painkillers.

Unfortunately and, frankly, very sadly, my home State of Utah is all too

familiar with these statistics, as we are fifth in the Nation in the most opioid-related deaths.

These drug addictions are destroying opportunities and are devastating families and communities all across the country. We simply must take steps to help alleviate this suffering.

I am proud to be supporting a number of bills that the House will be debating and voting on this week to combat opioid abuse, legislation that will lead to updated best practices for prescribers of pain medication, legislation that will improve drug abuse programs, and legislation that will give States and local communities more flexibility to attack this problem and the problems that are unique to those communities.

I urge support from my colleagues on both sides of the aisle, and am pleased to see that there is bipartisan support of these much-needed reforms.

□ 1215

OPIOID ADDICTION IS A NATIONAL EMERGENCY

(Mr. HIMES asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. HIMES. Mr. Speaker, I rise this morning to tell the story of Alex Recupido, a troubled high school graduate of 2010, an accomplished pianist, a kid who was known for his creativity. He had gotten his nursing license and had moved to Florida when prescription drugs led to a heroin addiction and Alex died in 2014.

Sadly, Alex is not alone as 723 people died last year in my small State of Connecticut, and roughly 30,000 Americans will die this year of opioid addiction. By any standard, this is a national emergency.

At great long last, this House is acting this week on a series of bills to improve the training, the awareness, and the treatment that we offer to people who are caught in this cycle. I am concerned, though, Mr. Speaker, that the total funds called for by all of these bills—about \$100 million—is completely inadequate for a national emergency.

At the end of the day, it is the resources, not the words, that we must offer. I believe we can do better. Our citizens are worth it. For people out there like Alex Recupido, it is a matter of life and death.

FACEBOOK SHOULD SHARE CONSERVATIVE NEWS

(Mr. SMITH of Texas asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. SMITH of Texas. Mr. Speaker, a recent story from the tech blog Gizmodo details Facebook's alleged efforts to suppress conservative views in its popular trending news section.

Former curators of the trending news section said they were routinely told to

ignore news stories of interest to conservative readers. Censoring stories from popular conservative news sites to fit a liberal political agenda does a severe disservice to the American people.

A recent Pew Research Center study found that two-thirds of American adults use Facebook to get news. Facebook has an obligation and a public responsibility not to silence conservative voices. Facebook should give the American people an honest appraisal of the news when it comes to deciding what is trending on its Web site. Anything less is intentionally trying to manipulate public opinion to promote a liberal agenda.

SECURE GUNS AND PROTECT OUR KIDS

(Mr. DEUTCH asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. DEUTCH. Mr. Speaker, last week we read a powerful story under the headline: "One Week in April, Four Toddlers Shot and Killed Themselves."

Last year, toddlers shot someone with unsecured guns at a rate of one per week, and we are outpacing that horrific rate this year.

I stand here over and over, begging for Congress to act on gun violence, but today I plead for gun owners to be smart about the guns in their homes.

The groups Moms Demand Action and Everytown for Gun Safety are educating Americans and are encouraging gun owners to secure guns in their homes and vehicles, to model responsible behavior, to ask about unsecured guns in other homes, to recognize the risks of teen suicides, and to tell their peers to be smart by sharing these simple steps to stop heartbreaking violence. Our society is saturated with guns. There are 357 million guns and there are 317 million people—the highest concentration in the world.

As The New York Times noted, if owners do not secure these guns, they will continue to end up in the hands of "shooters who need help tying their shoelaces, too young sometimes to even say the word 'gun,' killed by their own curiosity."

Mr. Speaker, on this gun issue, let's come together, all of us, to secure guns and to protect our kids.

LUPUS AWARENESS MONTH

(Ms. ROS-LEHTINEN asked and was given permission to address the House for 1 minute and to revise and extend her remarks.)

Ms. ROS-LEHTINEN. Mr. Speaker, I rise to recognize May as Lupus Awareness Month.

According to the Lupus Foundation of America, as many as 2 million Americans, including my lovely stepdaughter, Katharine Lehtinen, are living with lupus, and another 16,000 new cases are reported across our Nation

each year; but new research and collaborative projects offer hope that we are getting closer to safer and more effective treatments.

The Lupus Research Institute, in particular, has funded over 150 Novel Research Grants. These funds are aimed at forging scientific breakthroughs to better understand the disease and to help patients who are living with lupus. Because of the advancing science, 2016 may very well mark a new and exciting year in the long fight against this mysterious autoimmune disease.

Mr. Speaker, as this poster reads, "For a future with no lupus, we must know lupus."

NATIONAL NURSES WEEK

(Mr. CICILLINE asked and was given permission to address the House for 1 minute.)

Mr. CICILLINE. Mr. Speaker, this week is National Nurses Week. It is an opportunity to honor the 3.1 million registered nurses who are primary providers of hospital patient care.

Right now at hospitals and health centers across America, nurses are offering essential, lifesaving treatment for patients. Every day nurses encounter and overcome challenges that most of us will never face. Honoring the work of nurses is especially important for me on a personal level as my grandmother, Lucy Cicilline, was a proud nurse at Saint Joseph's Hospital in Providence, Rhode Island, for many years.

Let's honor the work of nurses by passing H.R. 2083, the bipartisan Registered Nurse Safe Staffing Act, which is a bill that I am proud to cosponsor that will require hospitals to create staffing plans for nurses, establish new whistleblower protections, improve nurse retention, and make hospitals safer both for nurses and their patients.

I am honored to recognize National Nurses Week, and I thank all of America's great nurses for all that they do.

HONORING THE LEGACY OF HARRY WU

(Mr. ROTHFUS asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. ROTHFUS. Mr. Speaker, 2 weeks ago, on April 26, the world lost an extraordinary man.

As a political prisoner in China for 19 years, from 1960 to 1979, Harry Wu endured torture, forced labor, and severe hunger. It was not until 3 years after Mao Zedong's death that Harry Wu was released.

His alleged crime?

As a 23-year-old student, Wu had criticized the Soviet invasion of Hungary and was given, according to Wu, a life sentence of labor, torture, and the teachings of Mao. After being freed, he devoted his life to exposing the horrors

of the so-called reform through labor camps.

After moving to the United States in 1985, Wu began returning to China to secretly document the labor camps, known as laogai. His work was showcased both on CBS and on the BBC in the early 1990s and continued through his Laogai Research Foundation and museum in Washington. He testified before Congress on China's unfulfilled promises of reform, forced abortions and sterilizations, Internet censorship, and religious repression.

We can honor his tremendous work by ensuring the truths he revealed are not forgotten and by continuing to defend human rights in China and across the world.

DR. CASTRO AND THE CONSUL OF MEXICO AWARD

(Mr. COSTA asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. COSTA. Mr. Speaker, I rise to recognize Dr. Joseph Castro, the president of Fresno State University. Dr. Castro is the president of one of the finest universities in the Western United States. It also happens to be my alma mater.

Since Dr. Castro has been president, it has been clear that he wants to make a positive difference in the lives of all students, especially of those who are from California's San Joaquin Valley. Over 60 percent of the students are the first in their families to attend a university, and it has over 25,000 students today.

This is one of the many reasons the Consul General of Mexico honored Dr. Castro with the Ohtli Award, which is the highest award given to exceptional leaders who improve the lives of the Hispanic community abroad.

Dr. Castro is truly deserving of this award. He understands the immigrant communities throughout the valley and throughout the region and my home, which we are also proud to represent. It is a special place. It is where he was from originally, from California, and he is the first Hispanic president to be appointed at Fresno State.

Please join me in honoring Dr. Joseph Castro and the entire Fresno State faculty and staff for all they do for the students to ensure that they have access to a high quality, affordable college education, because they are the future of America.

NATIONAL WOMEN'S HEALTH WEEK

(Ms. LORETTA SANCHEZ of California asked and was given permission to address the House for 1 minute and to revise and extend her remarks.)

Ms. LORETTA SANCHEZ of California. Mr. Speaker, I rise in honor of National Women's Health Week.

Our goal this week is to empower women to prioritize and to take charge

of their health. Thanks to the Affordable Care Act, women can access preventative care for little or no cost, but there still are concerning gaps in women's health.

One out of four women reports not visiting a doctor because of the cost, and nearly two out of three women in America die from chronic diseases like diabetes, heart disease, cancer, which is why women need quality, affordable, and accessible health care.

Protecting and improving the health of American women is one of my top priorities in Congress. I fought to insert language in the annual defense bill to ensure that our brave servicewomen and female veterans have access to adequate health services that fully address their specific medical needs, including preventative care and infertility treatments.

We have seen increasing attacks on women's health in Congress. So it is important, more than ever, that we ensure women's access to contraception and to their constitutionally protected right to choose.

COMMUNICATION FROM THE CLERK OF THE HOUSE

The SPEAKER pro tempore (Mr. JOLLY) laid before the House the following communication from the Clerk of the House of Representatives:

OFFICE OF THE CLERK,
HOUSE OF REPRESENTATIVES,
Washington, DC, May 11, 2016.

Hon. PAUL D. RYAN,
The Speaker, House of Representatives,
Washington, DC.

DEAR MR. SPEAKER: Pursuant to the permission granted in Clause 2(h) of Rule II of the Rules of the U.S. House of Representatives, the Clerk received the following message from the Secretary of the Senate on May 11, 2016 at 9:12 a.m.:

That the Senate passed without amendment H.R. 4923.

That the Senate passed S. 1352.

That the Senate passed with amendments H.R. 4336.

With best wishes, I am
Sincerely,

KAREN L. HAAS.

APPOINTMENT OF MEMBER TO BOARD OF VISITORS TO THE UNITED STATES MILITARY ACADEMY

The SPEAKER pro tempore. The Chair announces the Speaker's appointment, pursuant to 10 U.S.C. 4355(a), clause 10 of rule I, and the order of the House of January 6, 2015, of the following Member on the part of the House to the Board of Visitors to the United States Military Academy to fill the existing vacancy thereon:

Mr. SEAN PATRICK MALONEY of New York

PROVIDING FOR CONSIDERATION OF H.R. 4641, ESTABLISHING PAIN MANAGEMENT BEST PRACTICES INTER-AGENCY TASK FORCE, AND PROVIDING FOR CONSIDERATION OF H.R. 5046, COMPREHENSIVE OPIOID ABUSE REDUCTION ACT OF 2016

Mr. COLLINS of Georgia. Mr. Speaker, by direction of the Committee on Rules, I call up House Resolution 720 and ask for its immediate consideration.

The Clerk read the resolution, as follows:

H. RES. 720

Resolved, That at any time after adoption of this resolution the Speaker may, pursuant to clause 2(b) of rule XVIII, declare the House resolved into the Committee of the Whole House on the state of the Union for consideration of the bill (H.R. 4641) to provide for the establishment of an inter-agency task force to review, modify, and update best practices for pain management and prescribing pain medication, and for other purposes. The first reading of the bill shall be dispensed with. All points of order against consideration of the bill are waived. General debate shall be confined to the bill and shall not exceed one hour equally divided and controlled by the chair and ranking minority member of the Committee on Energy and Commerce. After general debate the bill shall be considered for amendment under the five-minute rule. It shall be in order to consider as an original bill for the purpose of amendment under the five-minute rule the amendment in the nature of a substitute recommended by the Committee on Energy and Commerce now printed in the bill. The committee amendment in the nature of a substitute shall be considered as read. All points of order against the committee amendment in the nature of a substitute are waived. No amendment to the committee amendment in the nature of a substitute shall be in order except those printed in part A of the report of the Committee on Rules accompanying this resolution. Each such amendment may be offered only in the order printed in the report, may be offered only by a Member designated in the report, shall be considered as read, shall be debatable for the time specified in the report equally divided and controlled by the proponent and an opponent, shall not be subject to amendment, and shall not be subject to a demand for division of the question in the House or in the Committee of the Whole. All points of order against such amendments are waived. At the conclusion of consideration of the bill for amendment the Committee shall rise and report the bill to the House with such amendments as may have been adopted. Any Member may demand a separate vote in the House on any amendment adopted in the Committee of the Whole to the bill or to the committee amendment in the nature of a substitute. The previous question shall be considered as ordered on the bill and amendments thereto to final passage without intervening motion except one motion to recommit with or without instructions.

SEC. 2. At any time after adoption of this resolution the Speaker may, pursuant to clause 2(b) of rule XVIII, declare the House resolved into the Committee of the Whole House on the state of the Union for consideration of the bill (H.R. 5046) to amend the Omnibus Crime Control and Safe Streets Act of 1968 to authorize the Attorney General to make grants to assist State and local governments in addressing the national epidemic of opioid abuse, and for other purposes. The first reading of the bill shall be

dispensed with. All points of order against consideration of the bill are waived. General debate shall be confined to the bill and shall not exceed one hour equally divided and controlled by the chair and ranking minority member of the Committee on the Judiciary. After general debate the bill shall be considered for amendment under the five-minute rule. It shall be in order to consider as an original bill for the purpose of amendment under the five-minute rule an amendment in the nature of a substitute consisting of the text of Rules Committee Print 114-52. That amendment in the nature of a substitute shall be considered as read. All points of order against that amendment in the nature of a substitute are waived. No amendment to that amendment in the nature of a substitute shall be in order except those printed in part B of the report of the Committee on Rules accompanying this resolution. Each such amendment may be offered only in the order printed in the report, may be offered only by a Member designated in the report, shall be considered as read, shall be debatable for the time specified in the report equally divided and controlled by the proponent and an opponent, shall not be subject to amendment, and shall not be subject to a demand for division of the question in the House or in the Committee of the Whole. All points of order against such amendments are waived. At the conclusion of consideration of the bill for amendment the Committee shall rise and report the bill to the House with such amendments as may have been adopted. Any Member may demand a separate vote in the House on any amendment adopted in the Committee of the Whole to the bill or to the amendment in the nature of a substitute made in order as original text. The previous question shall be considered as ordered on the bill and amendments thereto to final passage without intervening motion except one motion to recommit with or without instructions.

The SPEAKER pro tempore. The gentleman from Georgia is recognized for 1 hour.

Mr. COLLINS of Georgia. Mr. Speaker, for the purpose of debate only, I yield the customary 30 minutes to the gentleman from Massachusetts (Mr. McGOVERN), pending which I yield myself such time as I may consume. During consideration of this resolution, all time yielded is for the purpose of debate only.

□ 1230

GENERAL LEAVE

Mr. COLLINS of Georgia. Mr. Speaker, I ask unanimous consent that all Members have 5 legislative days to revise and extend their remarks and to include any extraneous material on House Resolution 720, currently under consideration.

The SPEAKER pro tempore. Is there objection to the request of the gentleman from Georgia?

There was no objection.

Mr. COLLINS of Georgia. Mr. Speaker, I am pleased to bring this rule forward today on behalf of the Rules Committee.

The rule provides for consideration of H.R. 5046, the Comprehensive Opioid Abuse Reduction Act of 2016, and H.R. 4641, a bill to establish an interagency task force to review, modify, and update best practices for pain management and for prescribing pain medication.

For H.R. 5046, the rule provides for 1 hour of debate, equally divided and controlled by the chairman and ranking member of the Judiciary Committee.

And for H.R. 4641, the rule provides for 1 hour of debate, equally divided and controlled by the chairman and ranking member of the Energy and Commerce Committee.

Both rules are structured rules that make in order numerous amendments.

Yesterday the Rules Committee received testimony from members of the Judiciary Committee, the Energy and Commerce Committee, and multiple other Members on their amendments. H.R. 5046 was marked up by the Judiciary Committee, and H.R. 4641 was reported by the Energy and Commerce Committee. Both bills have broad bipartisan support.

These bills are part of the House's effort to combat our Nation's growing opioid epidemic. They reflect a commitment to address this devastating problem in a constructive and meaningful way.

Opioid abuse hits communities all across this country, rich and poor, rural, suburban, and urban, and it takes a major toll. In 2012, an estimated 2.1 million in the United States were suffering from substance abuse disorders related to prescription opioid pain relievers. An estimated 467,000 people were addicted to heroin.

In the same year, in Georgia, the Georgia Bureau of Investigation found that prescription drugs played a role in 592 deaths in 152 of 159 counties for which autopsies were performed.

Mr. Speaker, just the other day I was having coffee with a dear friend of mine who I have known for 20 years. As we were talking and I mentioned what we were doing here, he brought forth that just in the last little bit in his own family life he has seen relatives that have been touched by this epidemic of painkillers and substance abuse issues. This is something that can affect anyone in any family, and this is why we are here today.

The bills before us today take steps to combat the opioid epidemic and drug addiction.

H.R. 5046, introduced by Mr. SENSENBRENNER from Wisconsin, establishes a comprehensive opioid abuse grant program. The program encompasses new and existing Department of Justice programs, including training for first responders, law enforcement, drug courts, residential substance abuse treatment, and criminal investigations for the unlawful distribution of opioids.

Importantly, this bill provides flexibility for the States to use the funds where they are needed most. It does so by establishing one grant program that has numerous allowable uses. The bill also ensures that there isn't duplication and eliminates redundancy.

I was proud to support this bill at the Judiciary Committee.

H.R. 4641, introduced by Congresswoman SUSAN BROOKS of Indiana, es-

tablishes a pain management best practices interagency task force. This task force will include representatives from Federal agencies, state medical boards, healthcare professionals, experts from addiction recovery communities, and others knowledgeable in the field.

The task force will be responsible for reviewing and updating best practices for acute and chronic pain management in an evidence-based manner. It will also be responsible for sharing the information found with healthcare professionals. This bill recognizes that responses to the opioid epidemic need to be coordinated and thoughtful.

Addiction is happening far too often with devastating consequences. Further, it is shown that prescription opioid abuse often leads to heroin abuse—and the sheriffs in my part of my State can attest to this every day—compounding this problem.

In fact, according to the Centers for Disease Control, 45 percent of people who used heroin were addicted to prescription opioid painkillers.

Heroin has frequently been thought of as an inner-city problem, but we are starting to see it more and more outside of cities and spreading to rural areas, too. This problem is a problem for America. This problem has exploded.

According to the Georgia Bureau of Investigation, heroin deaths have increased in Georgia by 300 percent. That is an astonishing and very tragic statistic.

CDC statistics on opioid abuse show 18,893 overdose deaths related to prescription pain relievers and 10,574 overdose deaths related to heroin in 2014. Those are staggering numbers.

The opioid epidemic affects everyone, and I believe that most people could tell you of a family member or friend who has suffered in some way because of this problem.

Also, Mr. Speaker, it affects babies who are born addicted to opioids and other drugs. These children, through no fault of their own, are born with a serious and heartbreaking problem. They then go through dangerous withdrawals and can be left with lasting health consequences. We have to find a way to stop this.

The opioid epidemic affects veterans, whose battle scars are treated by a VA whose answer too often is to prescribe high quantities of opioids with little thought to the consequences.

I am a chaplain in the United States Air Force Reserve. I served in Iraq. I saw firsthand the scars that the battlefield can leave, both physical and mental. We need a support system for our veterans. We need to address their pain. We need to ensure that they have an avenue to get the help they need.

I believe that the bills that this rule provides for will take the steps to make that happen. Our veterans deserve our very best.

Addiction issues are often related to other co-occurring disorders, including mental health issues. Addiction claims victims, and addiction is a disease.

We must not turn a blind eye to those in need. We must work to halt the opioid epidemic, and we must act to prevent more deaths and to stop the growth and spread of the problem. Today's bills are a step toward doing that, and I am glad that we have the opportunity to discuss those in an open manner.

These bills are brought forward due to the hard work of many Members. In particular, I thank Chairmen GOODLATTE and UPTON, Ranking Members CONYERS and PALLONE, Congresswoman BROOKS, Congressman SENSENBRENNER, and their staffs for their work in bringing these important reforms together. These reforms are a step in the right direction.

I reserve the balance of my time.

Mr. MCGOVERN. Mr. Speaker, I yield myself such time as I may consume.

(Mr. MCGOVERN asked and was given permission to revise and extend his remarks.)

Mr. MCGOVERN. Mr. Speaker, I thank the gentleman from Georgia (Mr. COLLINS) for the customary 30 minutes.

I rise to speak on the rule for consideration of H.R. 5046, the Comprehensive Opioid Abuse Reduction Act, and H.R. 4641, a bill to provide for the establishment of an interagency task force to review, modify, and update best practices for pain management and prescribing pain medication, and for other purposes.

By the end of this week, the House will have taken up a total of 17 bipartisan opiate-related bills, each a critical measure to help us tackle the opioid crisis in a variety of ways as we work to end this scourge hurting so many communities across our country and costing the lives of so many all across this country.

I am pleased that the House will be considering this critical bipartisan legislation this week. But in all honesty, I am also very concerned that Republicans are not proposing the new funding that is necessary to meaningfully address the opioid crisis.

So, in addition to passing the bipartisan legislation on the floor this week, which authorizes a new grant program, we must also provide real, new resources in the form of appropriations to ensure that the initiatives in this legislation can be fully implemented.

If we don't do that, all the speeches that we will give this week will amount to empty rhetoric. We need to make sure we fund these priorities. This is an emergency.

Opiate addiction is inflicting a savage daily toll in neighborhoods across America. According to the CDC, 78 Americans die from an opiate overdose every day, and many of them are young people. In 2013, the number of heroin users was 681,000, an increase of more than 250,000 users since 2002. This crisis is affecting every region across the country and every demographic group.

I have long said that Congress must provide the meaningful resources that

are needed to make a difference and save lives. Today I am pleased that we are coming together and taking action to attempt to do just that. These are important first steps.

In New England, we know all too well the terrible toll of the opiate epidemic. Having seen the damage it has done to the communities that I represent in central and western Massachusetts, tackling the opiate epidemic has long been a top priority for me.

Across Massachusetts, the number of opiate overdose deaths climbed by nearly 10 percent, up from 1,228 in 2014 to 1,379 in 2015. Once all cases are finalized by the medical officials in Massachusetts, it is estimated that there will be an additional 63 to 85 deaths for 2014 and 118 to 179 deaths in 2015.

In Worcester County alone, home to the second largest city in New England, opiate-related deaths jumped from 163 in 2014 to 177 in 2015. Looking back at the last 16 years, we can see an even bigger increase. In 2000, there were 59 opiate-related overdose deaths in Worcester County, a small fraction of the 1,289 deaths in 2015.

Most of last year's victims were between the ages of 25 and 44, in the prime of their lives with so much to live for. Many left behind families heartbroken and devastated by these senseless deaths. These families included husbands, wives, children, and so many more who loved them and desperately wanted them to get the help that they needed and to be able to live.

The opiate epidemic is even harder to cope with for those who have seen young people lose their lives to addiction. In Shrewsbury, Massachusetts, one high school principal said that, in the 11 years he has been principal, he has known of 33 students who have been active heroin addicts and 7 of them died. And in a recent forum, he learned that there had been even more that he had not known about.

Part of the problem is the stigma associated with heroin use. I think a lot of us think we know what heroin use and addiction looks like, but the reality is it can take hold of anyone, including our neighbors, our friends, and even our own family members.

However, instead of giving in to despair, communities in Massachusetts and across the country are responding to the opiate epidemic with strength and with courage. They are helping to lead grassroots State and national coalitions to raise awareness and educate people about the crisis and provide resources to help those ensnared by the addiction.

The Central Massachusetts Opiate Task Force, chaired by Worcester County District Attorney Joe Early, is a great example of this. They are working to bring greater awareness of the problem to residents. Members of the task force attend many of the coalition forums and also go into schools to talk to students directly.

The opiate task force serving Franklin County and the North Quabbin Re-

gion in Massachusetts is another example. It is co-chaired by John Merrigan, Franklin County Register of Probate; Chris Donelan, the Franklin County Sheriff; and David Sullivan, the Northwestern District Attorney.

I am so thankful for these and other task forces and coalitions in Massachusetts and across the country for coming together quickly to address this public health crisis and for their tenacity in fighting for individuals and families struggling with addiction.

Just this week I had the opportunity to join community leaders at North Brookfield High School in central Massachusetts for an event with Chris Herren, a former constituent of mine from Fall River and a former Boston Celtics player who now travels in New England and across the country to speak about his own recovery from addiction and the need for young people to stay drug free.

I am also grateful to my fellow members of the Massachusetts congressional delegation for being strong partners in this fight. JOE KENNEDY is a member of the Energy and Commerce Committee and has been a leader on this issue. He is the lead Democratic sponsor of H.R. 4641. A number of amendments sponsored by Massachusetts Members were made in order last night, including several from KATHERINE CLARK, as well as amendments from SETH MOULTON, BILL KEATING, and STEPHEN LYNCH.

□ 1245

I also want to commend the leadership of the gentleman from New Hampshire (Ms. KUSTER). She has been out front on this issue for a long, long time, and we appreciate her leadership.

The simple truth is that we are not going to arrest our way out of this problem. Prevention and treatment must be at the heart of our approach to tackling this epidemic. As part of the comprehensive approach called for, we must equip our young people with the skills necessary to identify constructive ways to deal with problems so that turning to drugs is never an option.

We must make every effort to ensure that treatment is available to those who seek it because it takes courage and strength to admit that you need help. I am pleased that this legislation that we are considering this week would do just that.

Mr. Speaker, I strongly support the legislation this rule makes in order, H.R. 5046. The Comprehensive Opioid Abuse Reduction Act would establish the Comprehensive Opioid Abuse Grant Program. With \$103 million provided annually over 5 years, this program would help provide vital assistance to States and local agencies to fund treatment alternatives to incarceration, opioid abuse prevention, training, and education.

The program's grants could be used to train first responders in carrying and administering opioid overdose reversal drugs, support prescription drug

monitoring programs, strengthen collaborations between criminal justice agencies and substance abuse systems, or for programs targeted toward juvenile opioid abuse programs.

This legislation, I think, is a commonsense, bipartisan step that goes a long way toward providing the critical help that Americans across this country need to combat our opioid epidemic.

I also support H.R. 4641, a bill that would provide for the establishment of an interagency task force to review, modify, and update best practices for pain management and prescribing pain medication, and for other purposes. Creating this task force is another key step to help strengthen our national response to the opioid crisis and increase interagency collaboration as we marshal all our resources in this fight.

I want to thank my colleagues on both sides of the aisle who worked very hard to bring this additional bipartisan legislation to the floor this week so we could begin to tackle this opioid crisis. These bills take important steps to cut the risk of opioid addiction among veterans managing chronic pain, take on international drug traffickers, improve the treatment and care of babies who are born addicted to opioids, help reduce opioid use among young people, and strengthen access to opioid overdose reversal medication.

There are many issues that Democrats and Republicans do not see eye to eye on, but I am pleased that both parties seem to be coming together, at least on this first step, to tackle the opioid crisis. For families and communities across the country who have already lost so much and so many to this epidemic, there has never been a more important time for us to take action.

I want to thank the leaders of both parties for helping to bring these bipartisan bills to the House floor. I do believe that we can end the opioid crisis once and for all.

But again, in conclusion—and I have to stress this—we need to provide the funding to our communities that are struggling to deal with this opioid and heroin crisis. This is an emergency. That is how you have to classify this and look at it. This is an emergency. People are dying. Without providing the additional resources needed, we will not be part of the solution.

The ideas that we have compiled today that will be debated this week are all good ideas, but they won't be real ideas unless they are funded. I worry that this Congress might not be up to the challenge. We have emergencies in Flint, Michigan, with the water crisis, and we have not done what we need to do to provide emergency funding to that community. We have a growing emergency with the Zika virus, and we can't get an emergency appropriations bill to the floor here today. I think that we need to understand that this crisis has risen to the level of an emergency. We need to do what is right. We need to not only

pass these bills, but we need to commit in a bipartisan way that we are going to provide the necessary funding. I hope we can do that.

Mr. Speaker, I reserve the balance of my time.

Mr. COLLINS of Georgia. Mr. Speaker, I am honored to yield 5 minutes to the gentleman from New Hampshire (Mr. GUINTA).

Mr. GUINTA. Mr. Speaker, I am proud to rise in support of H.R. 5046, the Comprehensive Opioid Abuse Reduction Act, and H.R. 4641, which will establish an interagency task force to review, modify, and update best practices for pain management and prescription pain medication.

Overprescription of opioids is leading to addiction, shattering lives, and creating death around our country. In my home State of New Hampshire, deadly overdoses following the abuse of heroin and opioids claimed the lives of over 430 people last year alone. That is about 1 in every 3,000 people from my State falling victim to an epidemic, succumbing to a preventable problem. According to the CDC, overdose deaths have tripled over the last 10 years.

Desperate families, too long, are crying out for help. I commend my colleagues for rising to the occasion in this legislative response, tackling this issue in a bipartisan way, and making the proper commitment to fund an adequate response to help those who are in need.

These two pieces of legislation are designed to assist those battling the epidemic on the front lines, from law enforcement officers to underfunded recovery systems and personnel, and everyone in between. I am moved time and time again by the painful stories of the victims and courageous individuals coming to their aid, and I urge the House to offer its support in this struggle.

I was pleased that just last night the Committee on Rules accepted my amendment, allowing prevention and recovery programs to accept grant money authorized by the Comprehensive Opioid Abuse Reduction Act, and I urge my colleagues to support this amendment when it comes to the House floor tomorrow.

As the House response to the Senate-passed Comprehensive Addiction and Recovery Act, these bills are a joint step toward progress and safety. I am a proud sponsor of many of these bills coming to the floor this week, and I hope for their swift and timely passage as urgent relief for those who are suffering around our Nation.

We must provide a thorough and wide-ranging plan to meet the enormity of this terrible epidemic, which invades every corner of the United States, takes lives across traditional divides, and manifests itself in ways to which we are not accustomed.

My colleagues and I are committed to seeing the House of Representatives answer this challenge by passing the most vigorous and inclusive plan pos-

sible. I am confident we will do all that we can to pass this plan this week, go to conference with the Senate, and put a bill on the President's desk before June.

Our plan is urgently needed. Almost 130 people die every day from opioid overdoses. Eighty percent of the opioids prescribed worldwide are prescribed here in the United States. In my district and around the country, I hear from families and friends who know someone coping with substance use disorder.

We will only make a dent in this great challenge by listening to its victims. We need to listen to fathers like Doug Griffin of Newton, New Hampshire. His daughter Courtney fell victim to heroin abuse at 20 years old.

Doug remembers Courtney as a vivacious girl, funny, passionate, and charming. She loved music and s'mores and told Doug she planned to become a marine, a beautiful young woman prepared to sacrifice for her country in one of its greatest and most honorable services. That was Courtney.

But 3 years later, she was lost on the streets, overwhelmed by the sorrow and confusion this epidemic instills, moving from rehab facility to rehab facility. Prescription pills, fentanyl, and street heroin ensnared Courtney in a fatal web of addiction, and she lost the will to live. Courtney was a 20-year-old girl—20 years old—a neighbor, a friend, a daughter. How can we begin to comprehend the depth of that kind of tragedy?

Because Courtney's pain was so great and because she had so few options for treatment, Doug says he and his family hid the truth from the outside world. To help others, they are speaking out now; and by speaking out and listening, we start to understand this tragedy. Doug is courageously telling everyone he knows the warning signs of heroin abuse and the deficiencies in our public response. Millions of Americans share Courtney's story and Doug's anguish. It is only by speaking out and sharing grief that we will remove the stigma preventing far too many from seeking help.

This week, during Heroin and Opioid Abuse Awareness Week, we have an opportunity to hear, learn, share, and fight back. We can hear the stories of grieving and resolute families, the stories of resilient victims. We can learn of the intensity of their experiences and glean from them the lessons we need to fight back. We can share their lessons and bring them to bear in our discourse and through our legislation, and we can start to turn the tide.

As the House considers this vital legislation, I encourage my colleagues to listen to their constituents, hear their stories, share their struggles, and help them fight back.

Mr. MCGOVERN. I yield myself such time as I may consume.

Mr. Speaker, again, I think that every Member of this House should support the underlying legislation.

There will be some good amendments offered. Unfortunately, there were a lot of good amendments that were not made in order by the Committee on Rules last night. There will be some suspensions that will come to the floor that I think deserve our support. And I am anxious to go to conference with the Senate, anxious to put a bill on the President's desk.

I don't want to spoil this bipartisan moment, but none of this means anything if we don't fund it. These aren't appropriations bills that we are dealing with. I know my colleagues on the other side of the aisle said, well, we will deal with that in the appropriations process. Well, because of the dysfunction of this place, we are not going to deal with the appropriations bills in any real way until after the election. I don't think we can wait. I think we need an emergency supplemental appropriations bill to deal right now with this crisis that has already claimed so many lives.

Let's all come together and pass these authorizing bills, but we need to do more than that. The President has requested \$1.1 billion, I think, to try to help provide resources to communities to deal with this crisis. We haven't funded that. So bills that set up grant programs that we all support, initiatives that we all think are important, that is good; but if the money is not there to actually fund these and implement these programs, then we are not doing our job. I would just argue that we have waited too long. It is an emergency. We ought to do this, and we ought to have an emergency supplemental appropriations bill on the floor immediately and get relief to our communities today.

Mr. Speaker, I support all these measures that the House will consider this week; however, as I said, they can't be the final word. We have to approve additional funding to develop a comprehensive response to this epidemic, which is an emergency. I am going to ask my colleagues to defeat the previous question. If we defeat the previous question, I will offer an amendment to the rule to bring up legislation that provides \$600 million in funding to address the opioid epidemic.

Mr. Speaker, I ask unanimous consent to insert the text of the amendment in the RECORD along with extraneous material immediately prior to the vote on the previous question.

The SPEAKER pro tempore. Is there objection to the request of the gentleman from Massachusetts?

There was no objection.

Mr. MCGOVERN. Mr. Speaker, I yield 4 minutes to the distinguished gentleman from New Hampshire (Ms. KUSTER), a leader on this issue, to discuss our proposal.

Ms. KUSTER. Mr. Speaker, I thank all my colleagues for the bipartisan work that is happening this week.

I am proud to be a co-chair with the gentleman from New Hampshire (Mr. GUINTA) of the Bipartisan Taskforce to

Combat the Heroin Epidemic, Members of Congress from all across the country coming together to address this crisis.

I rise, however, to oppose the rule and, as Mr. MCGOVERN has said, we intend to move the previous question. I am bringing to the House floor a Democratic substitute opioids package to include \$600 million in critical funding to address this opioid epidemic.

We have an emergency. People are dying, as Mr. GUINTA said—in my own State, our State of New Hampshire, over 420 people in 1 year. We have a better chance in New Hampshire of dying from an opioid epidemic death from fentanyl, from heroin, from drugs off the street, than we do of dying in a car accident. This is an emergency, and it is a crisis.

My substitute bill will provide vital funding for all of the bills that we are discussing, for bills that will provide the grants the Committee on the Judiciary has brought forth in H.R. 5046, introduced by Mr. SENSENBRENNER, for law enforcement, for drug courts.

I have just this week been to the graduation of a drug court. We can turn lives around, but we need funding for drug courts to spread all across our country, for the good work that my colleagues, the gentlewoman from Indiana (Mrs. BROOKS) and the gentleman from Massachusetts (Mr. KENNEDY), put into the Energy and Commerce bill, H.R. 4641, to create the task force.

Mr. GUINTA and I had an original bill, the STOP ABUSE Act, that created a task force, and we are so pleased that that task force will move forward. We need to bring together the experts to determine why now, what is happening in our society that opioid overdoses are leading people, leading this addiction, this substance use disorder that is a disease, leading people to go from prescribed medication from their physician into heroin off the streets and, in our State, is now being laced with fentanyl, which is a lethal combination.

□ 1300

The substitute will provide a total of \$600 million in vital new resources to address this epidemic, and my understanding is that we have not included this funding in these underlying bills. We want to support the underlying bills, but it is critical to have the funding.

New Hampshire has now gone from number 24 in the Nation in deaths per population to number 3, seemingly overnight. I have traveled around my district bringing together stakeholders, law enforcement, treatment providers, long-term recovery, which is a critical aspect of this, physicians, hospitals, police, everyone to the table. In Keene, in Nashua, in Concord, in the north country of our State, we now have mayors' committees. We have the Governor having a major summit this week. Here is the answer: we have solutions.

I serve on the Committee on Veterans' Affairs, and I was so proud to

bring to one of our congressional task force hearings Dr. Julie Franklin from the VA in White River Junction, Vermont, who is doing critical front-line research with people, veterans who are experiencing chronic pain. This is lifelong pain. She has worked with them with acupuncture, with mental health treatment, with physical therapy, with all different kinds of wellness and yoga, and she has decreased the use of opiate medication by 50 percent. We can do this, but we need funding.

I urge you to vote "no" on the rule. I ask my colleagues to please support the substitute package that will include a critical \$600 million in funding.

Mr. COLLINS of Georgia. Mr. Speaker, I yield 2 minutes to the gentleman from Augusta, Georgia (Mr. ALLEN), my good friend and someone who has spent a great deal of time looking into these issues. I appreciate his willingness to come speak on it today.

Mr. ALLEN. Mr. Speaker, I thank the gentleman from Georgia for yielding to me to speak on this important threat to our country, our State, and our communities.

Our Founders made a promise of life, liberty, and the pursuit of happiness. In America today, in every State, in too many families, there is a palpable undercurrent of pain, loss, and suffering that is caused by this horrendous opioid crisis.

Sadly, nearly one in five Americans knows someone who has been addicted to opioids. Nearly every 12 minutes, someone in the U.S. dies of a drug overdose; every 25 minutes, a baby is born suffering from opioid withdrawal.

A recent CDC study found that, in 2009, more Americans died from prescription drugs than motor vehicle accidents, marking the first time drug-related deaths have outnumbered motor vehicle-related deaths since 1979, when the government started tracking drug-related deaths.

Unfortunately, my home State of Georgia is not immune to this growing epidemic. According to the Georgia Bureau of Investigation, in 2012, prescription drugs played a role in 592 deaths in 152 of the 159 counties in Georgia for which it performs autopsies.

These heartbreaking numbers are far too high and tragic. We must take action to combat this crisis so that those addicted and their loved ones may start the road to healing. This week my colleagues and I in the House of Representatives are bringing opioid addiction out of the shadows to stop this devastating crisis.

I am proud of the tireless work of my colleagues in the Judiciary Committee, the Energy and Commerce Committee, and the Education and the Workforce Committee, on which I serve, to prevent, treat, and streamline access to care for those addicted to opioids.

My colleagues and I have worked to advance bipartisan solutions that address this crisis, from helping newborns who are born into addiction to creating an interagency task force to update

best practices for prescribing opioid painkillers.

The SPEAKER pro tempore. The time of the gentleman has expired.

Mr. COLLINS of Georgia. Mr. Speaker, I yield the gentleman an additional 1 minute.

Mr. ALLEN. This is only the start of our work in the United States Congress on this important subject. The road to recovery will be long and hard fought, but the American spirit is as strong as ever and will prevail.

Together we will help our brothers and sisters in Christ become whole again. The very soul of this country is at stake. I am pleased the people's House is taking proactive steps to fight this epidemic.

I urge my colleagues to support the rule and support the numerous bills coming before the House this week.

Mr. MCGOVERN. Mr. Speaker, I yield myself the balance of my time.

Mr. Speaker, I think we all agree that this is a crisis and that we need to come up with solutions and we need to do something rather than just talk about it.

I support—and I think I speak for the Democrats—and we all support the bipartisan legislation that is being brought to the floor, not only the bills that are going to be considered under this rule, but many of the suspension bills that will be brought to the floor this week. I expect that they will be passed nearly unanimously.

But I think what I do have a problem with is the fact that we have funded none of these things. I have a problem with the fact that some are content to wait until the appropriations process kind of works its way through this House, which, as we all know, is not going to be probably until December.

We have already been informed that we will probably deal with an omnibus package sometime after the election. Because there is infighting within the Republican ranks here in the House in trying to come to an agreement before the election, it is just too difficult. I regret that very, very much because I don't think that we can wait until December before we actually fund some of these priorities that are in this bill.

The reason why I hope my colleagues will support the Democratic substitute is because it actually funds. It is an appropriation. It funds these priorities. It puts our money where our rhetoric is. It makes the money available now, and we know it is there and communities will know that they can depend on it.

So I think we really want to be effective in our battle against this scourge of opioids and heroin addiction that has touched every district in this country.

We have all been to too many funerals. We have all seen the heartbreak up close and personal. But if we want to do something about it, we have to not only come up with the ideas, we have to fund these ideas.

That is why I am urging that Members vote “no” on the previous ques-

tion. It is so that we can bring a funding component to this. Let's not wait until December. This is an emergency. We should have had an emergency supplemental bill. That is not coming.

So this is a chance to put some money behind these priorities and actually fund all these great ideas that we all, in a bipartisan way, say we support.

I urge my colleagues to support all the underlying bills, but to vote “no” on the previous question so we can bring this appropriations bill up to actually fund them. So I urge my colleagues to vote “no” on the previous question and to also vote “no” on the rule.

Mr. Speaker, I yield back the balance of my time.

Mr. COLLINS of Georgia. Mr. Speaker, I yield myself the balance of my time.

Mr. Speaker, as you have heard—and we have spent the last almost 40 minutes talking about it—the opioid epidemic is out of control, but we have the opportunity today to start addressing that problem in a meaningful way.

The rule provides for consideration of legislation that will enact measures to address this problem through multiple avenues to ensure that we are taking a comprehensive approach to stopping this scourge.

It takes important steps to address the serious and growing threat of opioid abuse. It keeps a promise that we won't sit idly by while people continue the battle of addiction and die.

For that reason, I urge my colleague to support the rule and both H.R. 5046 and H.R. 4641.

The material previously referred to by Mr. MCGOVERN is as follows:

AN AMENDMENT TO H. RES. 720 OFFERED BY
MR. MCGOVERN

At the end of the resolution, add the following new sections:

SEC. 3. Immediately upon adoption of this resolution the Speaker shall, pursuant to clause 2(b) of rule XVIII, declare the House resolved into the Committee of the Whole House on the state of the Union for consideration of the bill (H.R. 5189) to address the opioid abuse crisis. The first reading of the bill shall be dispensed with. All points of order against consideration of the bill are waived. General debate shall be confined to the bill and shall not exceed one hour equally divided among and controlled by the respective chairs and ranking minority members of the Committees on Energy and Commerce and the Judiciary. After general debate the bill shall be considered for amendment under the five-minute rule. All points of order against provisions in the bill are waived. At the conclusion of consideration of the bill for amendment the Committee shall rise and report the bill to the House with such amendments as may have been adopted. The previous question shall be considered as ordered on the bill and amendments thereto to final passage without intervening motion except one motion to recommit with or without instructions. If the Committee of the Whole rises and reports that it has come to no resolution on the bill, then on the next legislative day the House shall, immediately after the third daily order of business under clause 1 of rule XIV, resolve into the Committee of the Whole for further consideration of the bill.

SEC. 4. Clause 1(c) of rule XIX shall not apply to the consideration of H.R. 5189.

THE VOTE ON THE PREVIOUS QUESTION: WHAT IT REALLY MEANS

This vote, the vote on whether to order the previous question on a special rule, is not merely a procedural vote. A vote against ordering the previous question is a vote against the Republican majority agenda and a vote to allow the Democratic minority to offer an alternative plan. It is a vote about what the House should be debating.

Mr. Clarence Cannon's Precedents of the House of Representatives (VI, 308-311), describes the vote on the previous question on the rule as “a motion to direct or control the consideration of the subject before the House being made by the Member in charge.” To defeat the previous question is to give the opposition a chance to decide the subject before the House. Cannon cites the Speaker's ruling of January 13, 1920, to the effect that “the refusal of the House to sustain the demand for the previous question passes the control of the resolution to the opposition” in order to offer an amendment. On March 15, 1909, a member of the majority party offered a rule resolution. The House defeated the previous question and a member of the opposition rose to a parliamentary inquiry, asking who was entitled to recognition. Speaker Joseph G. Cannon (R-Illinois) said: “The previous question having been refused, the gentleman from New York, Mr. Fitzgerald, who had asked the gentleman to yield to him for an amendment, is entitled to the first recognition.”

The Republican majority may say “the vote on the previous question is simply a vote on whether to proceed to an immediate vote on adopting the resolution . . . [and] has no substantive legislative or policy implications whatsoever.” But that is not what they have always said. Listen to the Republican Leadership Manual on the Legislative Process in the United States House of Representatives, (6th edition, page 135). Here's how the Republicans describe the previous question vote in their own manual: “Although it is generally not possible to amend the rule because the majority Member controlling the time will not yield for the purpose of offering an amendment, the same result may be achieved by voting down the previous question on the rule. . . . When the motion for the previous question is defeated, control of the time passes to the Member who led the opposition to ordering the previous question. That Member, because he then controls the time, may offer an amendment to the rule, or yield for the purpose of amendment.”

In Deschler's Procedure in the U.S. House of Representatives, the subchapter titled “Amending Special Rules” states: “a refusal to order the previous question on such a rule [a special rule reported from the Committee on Rules] opens the resolution to amendment and further debate.” (Chapter 21, section 21.2) Section 21.3 continues: “Upon rejection of the motion for the previous question on a resolution reported from the Committee on Rules, control shifts to the Member leading the opposition to the previous question, who may offer a proper amendment or motion and who controls the time for debate thereon.”

Clearly, the vote on the previous question on a rule does have substantive policy implications. It is one of the only available tools for those who oppose the Republican majority's agenda and allows those with alternative views the opportunity to offer an alternative plan.

Mr. COLLINS of Georgia. Mr. Speaker, I yield back the balance of my time,

and I move the previous question on the resolution.

The SPEAKER pro tempore (Mr. POE of Texas). The question is on ordering the previous question.

The question was taken; and the Speaker pro tempore announced that the ayes appeared to have it.

Mr. MCGOVERN. Mr. Speaker, on that I demand the yeas and nays.

The yeas and nays were ordered.

The SPEAKER pro tempore. Pursuant to clause 9 of rule XX, the Chair will reduce to 5 minutes the minimum time for any electronic vote on the question of adoption of the resolution.

The vote was taken by electronic device, and there were—yeas 215, nays 173, not voting 45, as follows:

[Roll No. 182]

YEAS—215

Abraham	Granger	Noem
Aderholt	Graves (GA)	Nugent
Allen	Graves (LA)	Nunes
Amash	Graves (MO)	Olson
Amodei	Griffith	Palazzo
Babin	Grothman	Palmer
Barletta	Guinta	Paulsen
Barton	Guthrie	Pearce
Benishek	Hanna	Perry
Bilirakis	Hardy	Pittenger
Bishop (MI)	Harper	Pitts
Blackburn	Harris	Poe (TX)
Blum	Hartzler	Poliquin
Bost	Hensarling	Pompeo
Boustany	Hice, Jody B.	Posey
Brat	Hill	Ratcliffe
Bridenstine	Holding	Reed
Brooks (AL)	Hudson	Ribble
Brooks (IN)	Huizenga (MI)	Roby
Buchanan	Hultgren	Roe (TN)
Buck	Hunter	Rogers (KY)
Bucshon	Hurd (TX)	Rohrabacher
Burgess	Hurt (VA)	Rooney (FL)
Byrne	Issa	Ros-Lehtinen
Calvert	Jenkins (KS)	Ross
Carter (GA)	Johnson (OH)	Rothfus
Carter (TX)	Johnson, Sam	Rouzer
Chabot	Jolly	Royce
Chaffetz	Jones	Salmon
Clawson (FL)	Jordan	Sanford
Coffman	Katko	Scalise
Cole	Kelly (MS)	Schweikert
Collins (GA)	King (IA)	Scott, Austin
Collins (NY)	King (NY)	Sensenbrenner
Comstock	Kinzinger (IL)	Sessions
Conaway	Kline	Shimkus
Cook	Knight	Shuster
Costello (PA)	Labrador	Simpson
Cramer	LaHood	Smith (MO)
Crawford	Lamborn	Smith (NJ)
Crenshaw	Lance	Smith (TX)
Culberson	LoBiondo	Stefanik
Curbelo (FL)	Long	Stewart
Davis, Rodney	Loudermilk	Stivers
Denham	Love	Stutzman
Dent	Lucas	Thompson (PA)
DeSantis	Luetkemeyer	Thornberry
DesJarlais	Lummis	Tipton
Diaz-Balart	MacArthur	Trott
Dold	Marchant	Turner
Donovan	Marino	Upton
Duffy	Massie	Valadao
Duncan (SC)	McCarthy	Wagner
Duncan (TN)	McCaul	Walden
Ellmers (NC)	McClintock	Walker
Emmer (MN)	McHenry	Walorski
Farenthold	McKinley	Walters, Mimi
Fitzpatrick	McMorris	Weber (TX)
Fleischmann	Rodgers	Wenstrup
Fleming	McSally	Westerman
Flores	Meadows	Williams
Forbes	Messer	Wilson (SC)
Fortenberry	Mica	Wittman
Fox	Miller (FL)	Womack
Franks (AZ)	Miller (MI)	Woodall
Frelinghuysen	Moolenaar	Yoder
Garrett	Mooney (WV)	Yoho
Gibbs	Mullin	Young (AK)
Gibson	Mulvaney	Young (IA)
Gohmert	Murphy (PA)	Young (IN)
Goodlatte	Neugebauer	Zeldin
Gowdy	Newhouse	Zinke

NAYS—173

Adams	Fudge	Neal
Aguilar	Gabbard	Nolan
Ashford	Gallego	Norcross
Bass	Garamendi	O'Rourke
Beatty	Graham	Pallone
Becerra	Grayson	Pascrell
Beyer	Green, Al	Payne
Bishop (GA)	Green, Gene	Pelosi
Blumenauer	Gutiérrez	Perlmutter
Bonamici	Hahn	Peters
Boyle, Brendan	Heck (WA)	Peterson
F.	Higgins	Pingree
Brady (PA)	Himes	Pocan
Brown (FL)	Hinojosa	Polis
Brownley (CA)	Honda	Price (NC)
Bustos	Hoyer	Quigley
Butterfield	Huffman	Rangel
Capps	Israel	Rice (NY)
Capuano	Jackson Lee	Richmond
Cárdenas	Jeffries	Roybal-Allard
Carney	Johnson (GA)	Ruiz
Carson (IN)	Johnson, E. B.	Ruppersberger
Castro (TX)	Kaptur	Rush
Chu, Judy	Keating	Ryan (OH)
Cicilline	Kelly (IL)	Sánchez, Linda
Clark (MA)	Kennedy	T.
Clarke (NY)	Kildee	Sanchez, Loretta
Clay	Kilmer	Sarbanes
Cleaver	Kind	Schakowsky
Clyburn	Kirkpatrick	Schiff
Cohen	Kuster	Schrader
Connolly	Larsen (WA)	Scott (VA)
Conyers	Lawrence	Scott, David
Cooper	Lee	Serrano
Courtney	Levin	Sewell (AL)
Crowley	Lewis	Sherman
Cuellar	Lieu, Ted	Sinema
Cummings	Lipinski	Sires
Davis (CA)	Loebsack	Speier
Davis, Danny	Lofgren	Swalwell (CA)
DeFazio	Lowenthal	Takano
DeGette	Lowe	Thompson (CA)
Delaney	Lujan Grisham	Thompson (MS)
DeLauro	(NM)	Titus
DeBene	Lynch	Tonko
DeSaulnier	Maloney,	Torres
Deutch	Carolyn	Tsongas
Dingell	Maloney, Sean	Van Hollen
Doggett	Matsui	Veasey
Doyle, Michael	McCollum	Vela
F.	McDermott	Velázquez
Duckworth	McGovern	Visclosky
Edwards	McNerney	Walz
Ellison	Meeke	Wasserman
Engel	Meng	Schultz
Eshoo	Moore	Waters, Maxine
Esty	Moulton	Watson Coleman
Farr	Murphy (FL)	Wilson (FL)
Foster	Nadler	Yarmuth
Frankel (FL)	Napolitano	

NOT VOTING—45

Barr	Jenkins (WV)
Bera	Joyce
Bishop (UT)	Kelly (PA)
Black	LaMalfa
Brady (TX)	Langevin
Cartwright	Larson (CT)
Castor (FL)	Latta
Costa	Luján, Ben Ray
Fattah	(NM)
Fincher	Meehan
Gosar	Price, Tom
Grijalva	Reichert
Hastings	Renacci
Heck (NV)	Rice (SC)
Herrera Beutler	Rigell
Huelskamp	Rogers (AL)

Rokita
Roskam
Russell
Slaughter
Smith (NE)
Smith (WA)
Takai
Tiberi
Vargas
Walberg
Webster (FL)
Welch
Westmoreland
Whitfield

Mr. SMITH of Nebraska. Mr. Speaker, on rollcall No. 182, I was unavoidably detained. Had I been present, I would have voted "yea."

Mr. MEEHAN. Mr. Speaker, on rollcall No. 182, I was unavoidably detained at a Ways and Means Committee Hearing. Had I been present, I would have voted "yes."

Mr. BARR. Mr. Speaker, on rollcall No. 182, I was unavoidably detained. Had I been present, I would have voted "yes."

Mr. RENACCI. Mr. Speaker, on rollcall No. 182, I was at a Ways and Means hearing and was not able to make it to the floor in time. Had I been present, I would have voted "yes."

Mr. ROKITA. Mr. Speaker, on rollcall No. 182, I was unavoidably detained. Had I been present, I would have voted "yes."

Ms. SLAUGHTER. Mr. Speaker, I was unavoidably detained and missed rollcall vote No. 182. Had I been present, I would have voted "nay."

Stated against:

Mr. LANGEVIN. Mr. Speaker, on rollcall vote No. 182, I was unavoidably detained. Had I been present, I would have voted "no."

Mr. BERA. Mr. Speaker, I was unavoidably detained for one rollcall vote Wednesday, May 11, 2016. Had I been present I would have voted "no" on rollcall No. 182.

Mr. SMITH of Washington. Mr. Speaker, today, Wednesday, May 11, 2016, I missed the first vote in a series of votes because I was at a medical appointment. Had I been present, I would have voted "no" on rollcall vote No. 182 (on ordering the previous question on H. Res. 720).

The SPEAKER pro tempore. The question is on the resolution.

The question was taken; and the Speaker pro tempore announced that the ayes appeared to have it.

RECORDED VOTE

Mr. MCGOVERN. Mr. Speaker, I demand a recorded vote.

A recorded vote was ordered.

The SPEAKER pro tempore. This is a 5-minute vote.

The vote was taken by electronic device, and there were—ayes 255, noes 163, not voting 15, as follows:

[Roll No. 183]

AYES—255

Abraham	Chabot	Ellison
Aderholt	Chaffetz	Ellmers (NC)
Allen	Clawson (FL)	Emmer (MN)
Amash	Coffman	Farenthold
Amodei	Cole	Fitzpatrick
Babin	Collins (GA)	Fleischmann
Barletta	Collins (NY)	Fleming
Barr	Comstock	Flores
Barton	Conaway	Forbes
Benishek	Cook	Fortenberry
Bilirakis	Cooper	Fox
Bishop (MI)	Costa	Franks (AZ)
Bishop (UT)	Costello (PA)	Frelinghuysen
Black	Cramer	Garrett
Blackburn	Crawford	Gibbs
Blum	Crenshaw	Gibson
Bost	Cuellar	Gohmert
Boustany	Culberson	Goodlatte
Brady (TX)	Curbelo (FL)	Gosar
Brat	Davis, Rodney	Gowdy
Bridenstine	Denham	Granger
Brooks (AL)	Dent	Graves (GA)
Brooks (IN)	DeSantis	Graves (LA)
Buchanan	DesJarlais	Graves (MO)
Buck	Diaz-Balart	Griffith
Bucshon	Dold	Grothman
Burgess	Donovan	Guinta
Byrne	Duckworth	Guthrie
Calvert	Duffy	Hanna
Carter (GA)	Duncan (SC)	Hardy
Carter (TX)	Duncan (TN)	Harper

□ 1328

Ms. LINDA T. SÁNCHEZ of California and Mr. BRADY of Pennsylvania changed their vote from "yea" to "nay."

So the previous question was ordered.

The result of the vote was announced as above recorded.

Stated for:

Mr. KELLY of Pennsylvania. Mr. Speaker, on rollcall No. 182, I was at a hearing and not able to vote. Had I been present, I would have voted "yes."

Harris
Hartzler
Heck (NV)
Hensarling
Hice, Jody B.
Higgins
Hill
Himes
Holding
Hudson
Huelskamp
Huizenga (MI)
Hultgren
Hunter
Hurd (TX)
Hurt (VA)
Issa
Jenkins (KS)
Jenkins (WV)
Johnson (OH)
Johnson, Sam
Jolly
Jones
Jordan
Kaptur
Katko
Keating
Kelly (MS)
Kelly (PA)
King (IA)
King (NY)
Kinzinger (IL)
Kline
Knight
Labrador
LaHood
LaMalfa
Lamborn
Lance
LoBiondo
Long
Loudermilk
Love
Lucas
Luetkemeyer
Lummis
Lynch
MacArthur
Marchant
Marino
Massie
McCarthy
McCaul
McClintock
McHenry

McKinley
McMorris
Rogers
McSally
Meadows
Meehan
Messer
Mica
Miller (FL)
Miller (MI)
Moolenaar
Mooney (WV)
Moulton
Mullin
Mulvaney
Murphy (FL)
Murphy (PA)
Neugebauer
Newhouse
Noem
Nugent
Nunes
Olson
Palazzo
Palmer
Pascrell
Paulsen
Pearce
Perry
Pittenger
Poe (TX)
Poliquin
Pompeo
Posey
Price, Tom
Ratcliffe
Reed
Reichert
Renacci
Ribble
Rice (SC)
Rigell
Roby
Roe (TN)
Rogers (AL)
Rogers (KY)
Rohrabacher
Rokita
Rooney (FL)
Ros-Lehtinen
Roskam
Ross
Rothfus
Rouzer
Royce

Ruppersberger
Russell
Salmon
Sanford
Scalise
Schiff
Schweikert
Scott, Austin
Sensenbrenner
Sessions
Shimkus
Shuster
Simpson
Sinema
Smith (MO)
Smith (NE)
Smith (NJ)
Smith (TX)
Stefanik
Stewart
Stivers
Stutzman
Thompson (PA)
Thornberry
Tiberi
Tipton
Trott
Turner
Upton
Valadao
Wagner
Walberg
Walden
Walker
Walorski
Walters, Mimi
Walz
Weber (TX)
Webster (FL)
Wenstrup
Westerman
Westmoreland
Williams
Wilson (SC)
Womack
Woodall
Yoder
Yoho
Young (AK)
Young (IA)
Young (IN)
Zeldin
Zinke

Quigley
Rangel
Rice (NY)
Richmond
Roybal-Allard
Ruiz
Rush
Ryan (OH)
Scott, Austin
Sanchez, Linda
T.
Sanchez, Loretta
Sarbanes
Schakowsky
Schrader
Scott (VA)

Scott, David
Serrano
Sewell (AL)
Sherman
Sires
Slaughter
Smith (WA)
Speier
Swailwell (CA)
Takano
Thompson (CA)
Thompson (MS)
Titus
Tonko
Torres

Tsongas
Van Hollen
Vargas
Veasey
Vela
Velázquez
Visclosky
Wasserman
Schultz
Waters, Maxine
Watson Coleman
Welch
Wilson (FL)
Yarmuth

The Clerk read the title of the bill.
The CHAIR. Pursuant to the rule, the bill is considered read the first time.
The gentlewoman from Indiana (Mrs. BROOKS) and the gentleman from New Jersey (Mr. PALLONE) each will control 30 minutes.
The Chair recognizes the gentlewoman from Indiana.
Mrs. BROOKS of Indiana. Mr. Chairman, I yield myself such time as I may consume.

Mr. Chairman, this week we have and will continue to hear harrowing and personal stories on the House floor about how opioid addiction is devastating local communities and families across the country. Just last night, my colleagues shared some of their stories. The gentleman from Pennsylvania (Mr. MEEHAN) shared a story about a promising collegiate athlete whose star was extinguished when a minor injury led to an addiction and his eventual overdose and death. Ms. KUSTER from New Hampshire told of a constituent named Amber who tragically died of an overdose after a treatment bed was unavailable for her after leaving incarceration.

We are going to hear many more stories today about this epidemic that has touched every community in every State of our country, an epidemic that has exploded in recent years to the point where every 12 minutes someone is dying of a drug overdose in this country. By the end of this debate, there may be over five people who have died of an overdose.

The Energy and Commerce Committee has meticulously investigated this epidemic over the past year with multiple hearings and expert witnesses. The result is a thoughtful package of solutions focused on prevention and treatment that will help those facing addictions and their families deal with this opioid and, subsequently, heroin crisis. The statistics couldn't be more stark.
The United States only represents 5 percent of the world's population, yet we consume 80 percent of the world's pain medication. Yet 80 percent of heroin users started with a prescription to legal pain medication. Nearly 260 million opioid prescriptions were written in the United States in 2012, outpacing the number of American adults by 20 million.
As we debate this crisis, this is not just about statistics, because we are actually talking about husbands, wives, brothers, sisters, parents, and, sadly, our children. A parent who has inspired me is a woman named Justin Phillips from Indianapolis, a Hoosier mom who lost her son, Aaron, to a heroin overdose at the age of 20.
Out of her heartbreak, she found a calling to keep local and national attention on the issue of heroin and opioid abuse, she said, "until the dying stops." She became a leading voice for families facing addiction in Indiana, and she founded Overdose Lifeline, a nonprofit organization devoted to purchasing those lifesaving drugs, those

NOES—163
Adams
Aguilar
Ashford
Bass
Beatty
Becerra
Bera
Beyer
Bishop (GA)
Blumenauer
Bonamici
Boyle, Brendan
F.
Brady (PA)
Brown (FL)
Brownley (CA)
Bustos
Butterfield
Capuano
Cárdenas
Carney
Carson (IN)
Castro (TX)
Chu, Judy
Cicilline
Clark (MA)
Clarke (NY)
Clay
Cleaver
Clyburn
Cohen
Connolly
Conyers
Courtney
Crowley
Cummings
Davis (CA)
Davis, Danny
DeFazio
DeGette
Delaney
DeLauro

DelBene
DeSaulnier
Deutch
Dingell
Doggett
Doyle, Michael
F.
Edwards
Engel
Eshoo
Lowenthal
Esty
Farr
Foster
Frankel (FL)
Fudge
Gabbard
Gallego
Garamendi
Graham
Grayson
Green, Al
Green, Gene
Gutiérrez
Hahn
Heck (WA)
Honda
Hoyer
Huffman
Israel
Jackson Lee
Jeffries
Johnson (GA)
Johnson, E. B.
Kelly (IL)
Kennedy
Kildee
Kilmer
Kind
Kirkpatrick
Kuster
Langevin
Larsen (WA)

ESTABLISHING PAIN MANAGEMENT BEST PRACTICES INTER-AGENCY TASK FORCE

GENERAL LEAVE
Mrs. BROOKS of Indiana. Mr. Speaker, I ask unanimous consent that all Members may have 5 legislative days to revise and extend their remarks and to include extraneous material on the bill, H.R. 4641.

The SPEAKER pro tempore (Mr. RODNEY DAVIS of Illinois). Is there objection to the request of the gentlewoman from Indiana?
There was no objection.
The SPEAKER pro tempore. Pursuant to House Resolution 720 and rule XVIII, the Chair declares the House in the Committee of the Whole House on the state of the Union for the consideration of the bill, H.R. 4641.
The Chair appoints the gentleman from Texas (Mr. POE) to preside over the Committee of the Whole.

Accordingly, the House resolved itself into the Committee of the Whole House on the state of the Union for the consideration of the bill (H.R. 4641) to provide for the establishment of an inter-agency task force to review, modify, and update best practices for pain management and prescribing pain medication, and for other purposes, with Mr. POE of Texas in the chair.

reversal drugs, for Hoosier first responders. But she didn't stop there.

She helped pass a bill at our state-house, called Aaron's Law, to provide access to overdose reversal drugs for others beyond first responders. Justin is just like so many other moms and dads. She needs our help to prevent more kids like Aaron from being lost to heroin and opioid abuse.

Her story made me realize that solving this public health crisis, this epidemic, must be a top priority for Congress and for the Federal Government, and inspired me to work with my colleague from across the aisle, Congressman KENNEDY of Massachusetts, to lead these efforts in the House to combat the heroin opioid crisis.

This week we are taking up a series of bills that are going to make a real difference—we hope. They must make a real difference in turning back this scourge.

□ 1345

Now, I have cited the number of opioid prescriptions written in 2012, which outpaces the number of American adults. But the fact is that our prescribers—our doctors, our nurse practitioners, our dentists, and others—are often unaware that, in many cases, their efforts to properly treat their patients' pain can inadvertently create longer term addiction issues.

While there are certainly legitimate medical needs for pain medication opioids, many prescribers are unaware that, in many cases, their efforts to properly treat their patients' pain can inadvertently create these long-term addiction issues.

In an effort to address this, the CDC recently developed guidelines for prescribing opioids for chronic pain. In order to improve the way opioids are prescribed to patients with severe and chronic pain, these guidelines seek to reduce their overuse and their abuse.

H.R. 4641, which I introduced with Representative KENNEDY, would ensure that the CDC's opioid prescribing guidelines are reviewed, modified, and updated where needed by an interagency task force and expert stakeholders from the prescriber community, the patient community, the addiction community, and the recovery community to reflect best practices going forward.

The task force will be comprised of representatives from the Federal relevant agencies as well as those who deal with this problem day in and day out: physicians, dentists, pharmacists, hospitals, overdose reversal specialists, and pain and addiction researchers.

This task force will also include representatives from State medical boards, pain advocacy groups, medical professional associations, mental health and addiction treatment communities.

The scope and breadth of this group will ensure that the practices are thoughtfully reviewed, modified, and updated. They will take into account

the different types of opioids, opioids within and between different classes, the availability of deterrent technology as well as nonpharmacological and medical device alternatives to opioids. It is important that the task force consider the broadest scope of pain management options.

It is also important that this isn't just going to be another bureaucratic report that is compiled and sits on a shelf that is reviewed by congressional researchers and congressional staff. They must report out to Congress, lay out best practices, and provide a strategy for disseminating these best practices for pain management and recommendations at medical facilities.

We have to do more in this country. Failure to address a major part of this epidemic from the outset will perpetuate the cycle of addiction in our communities. This is but one important step. There are many, many bills that the House is considering.

I reserve the balance of my time.

Mr. PALLONE. Mr. Chairman, I yield myself such time as I may consume.

I rise in support of H.R. 4641, a bill to create an interagency task force on pain management. This legislation passed the committee with unanimous support.

In 2014, pharmacies in the United States dispensed approximately 245 million prescriptions for opioids. This is enough to provide a script to every adult in our entire Nation.

At the same time, we know that over 5 million Americans use prescription pain relievers either recreationally or to satisfy an opioid addiction.

This combination has produced tragic results. 2014 produced the highest number of drug overdose deaths than any previous year on record, with opioids and heroin driving the recent surge.

Unfortunately, our Nation's doctors and healthcare providers have not been provided the tools and education necessary to safely prescribe these medications in the midst of an opioid epidemic.

Recently, an article in the New England Journal of Medicine examined this topic and found that "many physicians admit that they are not confident about how to prescribe opioids safely, how to detect abuse or emerging addiction, or even how to discuss these issues with their patients."

As a result, we have created a patchwork of prescribing practices with tremendous variation both geographically as well as even within the same field.

This bill would create an interagency task force on pain management to review, modify, and update best practices on management and development of a strategy to disseminate those best practices to prescribers, pharmacists, and other stakeholders.

Those best practices will increase the tools available to providers who prescribe opioids more safely and be able to detect and intervene earlier in instances of substance use disorders.

I urge my colleagues to support this important legislation, which is part of the opioid epidemic package that we are moving on the floor today on suspension.

Mr. Chairman, I reserve the balance of my time.

Mrs. BROOKS of Indiana. Mr. Chairman, I yield 3 minutes to the gentleman from Michigan (Mr. UPTON), our chairman.

Mr. UPTON. Mr. Chairman, every 12 minutes someone in the U.S. dies of a drug overdose. Abuse of prescription painkillers and heroin has impacted every single community. It is an epidemic. It doesn't have boundaries and doesn't discriminate.

We have lost a lot of good kids and a lot of good people in my State and every State. As I travel back and forth to Michigan virtually every week, I meet a family member who has lost somebody with this very tragic story.

This last week it was a mother and a wife of a fellow who had committed suicide in Mattawan, Michigan. It breaks your heart.

Yes, we know the numbers. They are staggering. The CDC reports that nearly 260 million opioid prescriptions were written in 2012. That is one for every single U.S. adult, as my friend Mr. PALLONE said, with another 20 million to spare.

A recent study from the Kaiser Family Foundation found that one in five Americans say they have a family member who has been addicted to prescription painkillers.

The epidemic is unique to the U.S., as Americans consume 80 percent of the world's opioid prescriptions. It is not unique. It is a frightening reality, but we have to face the epidemic head-on. That is why today is an important step.

In the Energy and Commerce Committee, we have held a number of hearings over the last year with testimony from so many experts on the front lines. What we learned is eye-opening.

Federal policies toward opioid addiction in the past year have often over-emphasized a one-size-fits-all law enforcement approach. It is clear through our listening sessions that it is a public health crisis and that our strategy should reflect the complex dynamic between public health and criminal activity. We know that we cannot simply incarcerate our way out of this epidemic.

The bills that we are considering today touch on a spectrum of issues driving the opioid crisis. While there is no one solution, these bills represent good steps in addressing a problem that has rapidly grown.

I want to thank all of my colleagues on the Energy and Commerce Committee and off for working to adhere in a bipartisan way these important bills that will really make a difference in every one of our communities.

The House leadership deserves recognition on both sides for their swift consideration of these bills. I want to thank, in particular, my good friend,

Mr. PALLONE, for working with us to get these bills across the finish line, through the committee process, and now on the floor.

Our work is going to continue. We owe this effort to the past, present, and, sadly, future victims of this epidemic: our neighbors, friends, and families across every part of the country, every demographic group. We owe it to the families and we owe it to the communities who are suffering from this addiction.

Mr. PALLONE. Mr. Chairman, I yield such time as he may consume to the gentleman from Massachusetts (Mr. KENNEDY), who is the Democratic sponsor of this bill and has worked a lot on the opioid epidemic problem.

Mr. KENNEDY. Mr. Chairman, I want to thank Mr. PALLONE for yielding, for his leadership on this issue throughout his time on Energy and Commerce, particularly over the last several months since I have been on the committee trying to galvanize support from all of our colleagues to recognize the impact that this is having every single day.

Mr. Chairman, I want to thank you for including H.R. 4641 in this package of bipartisan opioid-related bills.

None of our districts has been spared the heartbreaking headlines about lives lost to the opioid crisis. We have heard from each of our constituents who have attended funerals for friends, neighbors, classmates, colleagues, and family members. The bills we are considering this week are a promising step forward as we find ways to respond to this crisis.

To my colleague, Congresswoman BROOKS, thank you for your partnership on this issue and on so many others. We have both seen firsthand how lack of access to treatment can lead those suffering from addiction to our courts. With this bill, we are trying to change the course of their path to stop addiction before it even begins.

Mr. Chairman, last week the Boston Globe wrote a series of articles about the opioid crisis in my home State of Massachusetts. The statistics are devastating. Nationally, heroin overdose rates have tripled in the last 5 years. At home, our State faces a heroin overdose rate that is twice the national average.

Last year alone, nearly 1,400 Massachusetts families lost loved ones to opioid overdoses. Between 2013 and 2014, prescription opioid overdoses nearly doubled. During that same time, the number of people in Massachusetts who overdosed on a combination of heroin and prescription opioids rose by almost 500 percent.

The Globe also noted that there has been a noticeable shift from opioids to heroin with one exception, Bristol County, where many of my constituents live. In trying to explain that exception, the reporter included a haunting line that has stayed with me ever since.

He wrote that, in Bristol County, "prescription opioids remain a domi-

nant killer, though it's not clear whether that's because this area is somehow less susceptible to heroin or if it's merely a matter of time."

Mr. Chairman, we cannot accept a reality with a rise in heroin overdoses as "merely a matter of time." We have all said it over 100 times. When it comes to a Federal response, there is no silver bullet.

But H.R. 4641 tries to focus on what I believe offers us one of the very best opportunities for combating this problem: stopping addiction before it ever starts.

The bill will create a new task force dedicated to the job of reviewing, modifying, and updating best practices for the management of pain and the prescription of pain medication.

Voices from HHS, the VA, FDA, DEA, NIH, and other agencies will join prescribers, substance use disorder professionals, patients suffering from chronic pain, and patients who have lived through the heartbreaking reality of becoming addicted to prescription pills.

These advocates and experts are on the front lines of this fight every single day. Under their guidance, this task force will ensure we implement the policies that balance responsible pain management with the urgency that our opioid crisis requires.

Again, I am encouraged by the bipartisan progress we are making on this issue; yet, our work is just beginning.

I urge my colleagues to support this bill and look forward to working with each of them to build on this momentum.

Mrs. BROOKS of Indiana. Mr. Chairman, I yield 3 minutes to the gentleman from Oregon (Mr. WALDEN).

Mr. WALDEN. Mr. Chairman, I think, as you can see, Members on both sides of the aisle know of people in our districts, our States, and across our country that have been tragically affected by opioid abuse and overdose.

I want to thank my colleagues on both sides of the aisle for their work on this legislation, especially my friend from Indiana, Mrs. BROOKS.

I rise in strong support of H.R. 4641. This is a very important bipartisan step forward to combat opioid abuse. This issue hits close to home, all of our homes.

The State of Oregon ranked near the top or at the top for nonmedical use of prescription pain relievers in the Nation. With opioid prescriptions serving as a gateway to heroin, it is no surprise that deaths from drug overdoses have surpassed those of car accidents in my State.

Last week, in Medford, Bend, and Hermiston, I hosted roundtables with community leaders and affected families to talk about what they are seeing on the front lines.

Physicians, first responders, members of law enforcement, and families all were there sharing their stories, talking about how important the work we are doing here today is to them and

our communities. All of them are on the ground combating this problem every day. We had excellent discussions.

H.R. 4641, in addition to the 17 other bipartisan bills we are voting on this week, will help combat this epidemic. This bill will help prevent lawful prescription use from spiraling into abuse by developing best practices for the treatment of pain.

In Medford, I heard from a father who had seen the impacts of addiction on his own family. His sister, who was a nurse, died of an overdose after years of suffering from addiction and bouncing between pharmacies, passing off forged prescriptions.

□ 1400

He spoke about how better tracking and treatment could have helped catch his sister's problem earlier and, perhaps, made counseling more effective. As it was, she was only caught because two pharmacies in a small town happened to check with each other. You see, by then, it was too late.

Today, this man is working to help his son with an addiction that started with a prescription for a high school sports injury that drifted into a heroin addiction. He spoke to the importance of counseling, support, and trying to avoid addiction through better prescribing practices.

Echoing those sentiments, a therapist I spoke to in Hermiston experienced 10 years of addiction of opioids after she was prescribed painkillers for a broken foot. Then when she tried to overcome this addiction, she could not find any help. So she traveled more than 5 hours, from Milton-Freewater, Oregon, to Marysville, Washington, because she could not find a physician in her region to prescribe Suboxone, an important medicine to help people break free from opioids.

Addiction is an equal opportunities destroyer. It crosses all segments and regions of our country, and often the disease shows no symptoms.

One emergency room physician relayed a story about a recent patient he had no reason to believe had an addiction problem until he saw in the database that the patient just received 60 pills the week before.

Opioids are highly effective at providing relief and improving the quality of life for those in debilitating pain. But if we don't know how to appropriately prescribe them, it's no wonder we got to this place. We need to increase access to counseling, medication-assisted therapy and treatment for those battling addiction. Echoing what I heard from health practitioners across my district, opioid addiction is a biopsychosocial disease—it's as complicated as diabetes and requires a multi-pronged approach.

That's why it is so important that we pass H.R. 4641 and all of these bills this week to give health providers, first responders, law enforcement, and those battling addiction the tools they need to overcome the epidemic of opioid abuse.

Mr. PALLONE. Mr. Chairman, I yield 3 minutes to the gentlewoman from

New Mexico (Ms. MICHELLE LUJAN GRISHAM).

Ms. MICHELLE LUJAN GRISHAM of New Mexico. I thank my colleague for yielding time.

Mr. Chairman, opioid abuse has become, as we have heard today, a critical national issue as 78 Americans are killed by heroin and prescription drug overdoses each day, and drug overdoses are now the leading cause of injury-related deaths in the United States.

The number of unintentional overdose deaths from prescription painkillers almost quadrupled between 1999 and 2013; but as bad as the opioid epidemic is across the country, it is much more severe in my home State of New Mexico, which has had one of the highest rates of overdose deaths in the country for several years. Unfortunately, it is getting worse. From 2013 to 2014, the death rate from drug overdoses in New Mexico increased 21 percent. Rio Arriba County, New Mexico, has the highest overdose death rate in the Nation—one in 500 people dies from overdose—which is about six times the national average.

The over-prescription of opioids for pain management is part of the problem, and an increasing number of patients is becoming dependent on these powerfully addictive medications. In fact, 259 million opioid prescriptions were written in 2012—more than one for every adult in the United States. Once addicted to these prescription opioids, many then turn to heroin and to synthetic opioids due to their increased availability, lower prices, and higher purity.

We must act to respond to this public health crisis, but we need to do it in a balanced way. We need to be mindful of the millions of Americans who suffer from chronic pain. We need to ensure that patients and providers continue to have access to the best, most medically appropriate course of treatment while cutting off access to those who abuse the system.

This is why I strongly support H.R. 4641, which would establish an interagency task force to review and update medical best practices for pain management and prescribing pain medication; but we can't stop here. We have to do more than just study the problem, because only 11 percent of Americans who need treatment for substance abuse are receiving it. Many of those who remain find themselves in our criminal justice system. Our prisons have become de facto treatment centers. More than 65 percent of our prison population has a substance abuse problem.

We have to provide the funds necessary to fully invest in opioid prevention, rehabilitation, and treatment programs. We have to support the placement of substance abuse treatment providers in the communities that are most in need, like Rio Arriba County. We have to improve access to the overdose reversal drug, naloxone, which can help save countless lives every year.

I urge my colleagues to support this legislation, which will address this disease that has destroyed the lives of so many.

Mrs. BROOKS of Indiana. Mr. Chairman, I yield 1 minute to the gentleman from Florida (Mr. BILIRAKIS).

Mr. BILIRAKIS. Mr. Chairman, I rise in support of H.R. 4641.

Prescription drug abuse, particularly with opioids, has become a national epidemic. It affects all of our communities. The bill before us today will authorize an important task force to determine and disseminate best practices for pain management.

The need for best practice guidelines was highlighted last week during a substance abuse panel I hosted in my district with Office of National Drug Control Policy Director Botticelli. One woman shared her story of addiction and struggle to receive help following a surgery she had had as a 15-year-old gymnast. We must give people like her the tools they need for prevention and treatment in order to stop the spread of this epidemic.

I thank the gentlewoman for sponsoring this bill. Please support this great bill.

Mr. PALLONE. Mr. Chairman, I reserve the balance of my time.

Mrs. BROOKS of Indiana. Mr. Chairman, I yield 2 minutes to the gentleman from North Dakota (Mr. CRAMER).

Mr. CRAMER. I thank Mrs. BROOKS for her leadership on this—Mr. KENNEDY's as well—and for bringing this important legislation to our committee and to the floor.

Mr. Chairman, I rise to support H.R. 4641.

With heroin addiction now being three times greater than it was a decade ago, we know it doesn't matter where you come from. Whether you are on an Indian reservation, on a farm, in the middle of a city, in a suburb, in a small town, or whether you are in a Fargo high school, at the University of North Dakota in Grand Forks, or at Bismarck State College, it doesn't matter what your lot is in life. It doesn't matter what your income level is. It doesn't matter what your social status is. This opioid abuse crisis affects people from all walks of life, and it is about time we acknowledged it and tried to deal with it at this level.

This bill is pretty basic, but is pretty profound as well because it takes advantage of the collective opportunity of the collective talents, experiences, and backgrounds of the people on the ground who are dealing with it every day. It brings it all together and facilitates it at every level of government in every community and in every State whether it is North Dakota or Indiana or Massachusetts. It is the beginning, I believe, of a profound solution.

Just as much as anything, I applaud the efforts of the leadership who brought this to us, and I grieve with so many parents as we have heard their stories. This year, in the Fargo, North

Dakota, area alone, there have been a minimum of 10 fatal overdoses because of this crisis.

I will stand shoulder to shoulder with anybody and everybody in this Chamber, as well as in the Chamber on the other side of the Capitol, to help solve this problem.

Mr. PALLONE. Mr. Chairman, I reserve the balance of my time.

Mrs. BROOKS of Indiana. Mr. Chairman, I yield 2 minutes to the gentleman from Georgia (Mr. CARTER).

Mr. CARTER of Georgia. Mr. Chairman, I rise in support of H.R. 4641 so we can continue to involve the practices of pain management and the prescribing of pain medication to fight the opioid abuse epidemic in this country.

As a lifelong pharmacist, I have provided prescription medications to Americans for over 30 years. In that time, I have personally witnessed the struggles that both medical professionals and patients face with prescription drug abuse.

There are many steps that must be taken to address this epidemic. One priority should be to involve practices related to pain management and the prescribing of pain medication. This bill does just that. This bill creates an interagency task force to continually review, modify, and update best practices for pain management and prescribing pain medication. Through the new task force, experts in fields related to prescription drug abuse and pain management will be able to involve best industry practices that will give clarity to our fight against this epidemic.

I commend Representative BROOKS and the Committee on Energy and Commerce for their work on this bill, and I encourage all of my colleagues to support this measure.

Mr. PALLONE. Mr. Chairman, I reserve the balance of my time.

Mrs. BROOKS of Indiana. Mr. Chairman, I yield myself the balance of my time.

I thank all of my colleagues. I thank particularly the leadership of the Committee on Energy and Commerce. There have also been other committees—the Judiciary Committee, the Committee on Education and the Workforce—that have been working on bills. This is not something that any one Member of this body has truly been a leader on. So many different Members have been leading on this because it has affected our communities, our families, our neighborhoods.

I urge my colleagues to vote "yes" on this important bill because, as the gentleman from North Dakota said, the Federal Government has not done enough yet. This will be an opportunity for us to bring together all of the Federal agencies that are involved in this problem, which have been part of the problem, and try to change the way our prescribers throughout the country work on the pain management issues the country faces, which, hopefully, will yield a much lower overdose

rate—a rate which now exceeds the motor traffic fatalities in this country and which is the leading cause of calls to our poison centers. More importantly, it has devastated so many parents and friends who have found their friends who have overdosed from either heroin or opioids.

I am so pleased that we are finally beginning to recognize that we cannot arrest our way out of this problem. It is a disease. It is something that so many people cannot stop on their own. They need help. With all of these experts coming together on this task force to provide the best practices for the country, I hope we can turn the tide and save many lives.

I urge the bill's passage by my colleagues.

Mr. Chairman, I yield back the balance of my time.

Mr. PALLONE. Mr. Chairman, I yield myself such time as I may consume.

I ask all of my colleagues to support this bill. As I said, this interagency task force is an important part of this larger opioid package that we produced in the Committee on Energy and Commerce on a bipartisan basis. I know the rest of those bills are going to come up on suspension—or most of them—this afternoon. I can't emphasize enough the importance of this package, as well as this bill, as being part of it.

I yield back the balance of my time. The CHAIR. All time for general debate has expired.

Pursuant to the rule, the bill shall be considered for amendment under the 5-minute rule.

It shall be in order to consider as an original bill for the purpose of amendment under the 5-minute rule the amendment in the nature of a substitute, recommended by the Committee on Energy and Commerce, printed in the bill. The committee amendment in the nature of a substitute shall be considered as read.

The text of the committee amendment in the nature of a substitute is as follows:

H.R. 4641

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

SECTION 1. DEVELOPMENT OF BEST PRACTICES FOR THE USE OF PRESCRIPTION OPIOIDS.

(a) **DEFINITIONS.**—*In this section—*
(1) the term “Secretary” means the Secretary of Health and Human Services; and

(2) the term “task force” means the Pain Management Best Practices Inter-Agency Task Force convened under subsection (b).

(b) **INTER-AGENCY TASK FORCE.**—*Not later than December 14, 2018, the Secretary, in cooperation with the Secretary of Veterans Affairs, the Secretary of Defense, and the Administrator of the Drug Enforcement Administration, shall convene a Pain Management Best Practices Inter-Agency Task Force to review, modify, and update, as appropriate, best practices for pain management (including chronic and acute pain) and prescribing pain medication.*

(c) **MEMBERSHIP.**—*The task force shall be comprised of—*

(1) representatives of—

(A) the Department of Health and Human Services;

(B) the Department of Veterans Affairs;

(C) the Food and Drug Administration;

(D) the Department of Defense;

(E) the Drug Enforcement Administration;

(F) the Centers for Disease Control and Prevention;

(G) the Health Resources and Services Administration;

(H) the Indian Health Service;

(I) the National Academy of Medicine;

(J) the National Institutes of Health;

(K) the Office of National Drug Control Policy; and

(L) the Substance Abuse and Mental Health Services Administration;

(2) State medical boards;

(3) physicians, dentists, and nonphysician prescribers;

(4) hospitals;

(5) pharmacists and pharmacies;

(6) experts in the fields of pain research and addiction research;

(7) representatives of—

(A) pain management professional organizations;

(B) the mental health treatment community;

(C) the addiction treatment and recovery community;

(D) pain advocacy groups; and

(E) groups with expertise on overdose reversal;

(8) a person in recovery from addiction to medication for chronic pain;

(9) a person with chronic pain; and

(10) other stakeholders, as the Secretary determines appropriate.

(d) **DUTIES.**—*The task force shall—*

(1) not later than 180 days after the date on which the task force is convened under subsection (b), review, modify, and update, as appropriate, best practices for pain management (including chronic and acute pain) and prescribing pain medication, taking into consideration—

(A) existing pain management research;

(B) recommendations from relevant conferences and existing relevant evidence-based guidelines;

(C) ongoing efforts at the State and local levels and by medical professional organizations to develop improved pain management strategies, including consideration of differences within and between classes of opioids, the availability of opioids with abuse deterrent technology, and pharmacological, nonpharmacological, and medical device alternatives to opioids to reduce opioid monotherapy in appropriate cases;

(D) the management of high-risk populations, other than populations who suffer pain, who—

(i) may use or be prescribed benzodiazepines, alcohol, and diverted opioids; or

(ii) receive opioids in the course of medical care; and

(E) the 2016 Guideline for Prescribing Opioids for Chronic Pain issued by the Centers for Disease Control and Prevention;

(2) solicit and take into consideration public comment on the practices developed under paragraph (1), amending such best practices if appropriate; and

(3) develop a strategy for disseminating information about the best practices developed under paragraphs (1) and (2) to prescribers, pharmacists, State medical boards, educational institutions that educate prescribers and pharmacists, and other parties, as the Secretary determines appropriate.

(e) **LIMITATION.**—*The task force shall not have rulemaking authority.*

(f) **REPORT.**—*Not later than 270 days after the date on which the task force is convened under subsection (b), the task force shall submit to Congress a report that includes—*

(1) the strategy for disseminating best practices for pain management (including chronic and acute pain) and prescribing pain medication, as developed under subsection (d);

(2) the results of a feasibility study on linking the best practices described in paragraph (1) to

receiving and renewing registrations under section 303(f) of the Controlled Substances Act (21 U.S.C. 823(f)); and

(3) recommendations for effectively applying the best practices described in paragraph (1) to improve prescribing practices at medical facilities, including medical facilities of the Veterans Health Administration and Indian Health Service.

The CHAIR. No amendment to the committee amendment in the nature of a substitute shall be in order except those printed in part A of House Report 114-551. Each such amendment may be offered only in the order printed in the report, by a Member designated in the report, shall be considered read, shall be debatable for the time specified in the report, equally divided and controlled by the proponent and an opponent, shall not be subject to amendment, and shall not be subject to a demand for division of the question.

AMENDMENT NO. 1 OFFERED BY MS. BROWNLEY OF CALIFORNIA

The CHAIR. It is now in order to consider amendment No. 1 printed in part A of House Report 114-551.

Ms. BROWNLEY of California. Mr. Chairman, I have an amendment at the desk.

The CHAIR. The Clerk will designate the amendment.

The text of the amendment is as follows:

Page 4, line 11, strike “and”.

Page 4, line 13, insert “and” after the semicolon.

Page 4, after line 13, insert the following:

(M) the Office of Women's Health;

The CHAIR. Pursuant to House Resolution 720, the gentlewoman from California (Ms. BROWNLEY) and a Member opposed each will control 5 minutes.

The Chair recognizes the gentlewoman.

Ms. BROWNLEY of California. Mr. Chairman, I rise to offer a very straightforward amendment to H.R. 4641.

The amendment would include the Office of Women's Health in the interagency task force created under the bill.

As we all know, the underlying bill includes a list of Federal agency representatives to be included in the interagency task force, which will review, modify, and update best practices for pain management and prescribing pain medication.

However, the bill does not currently include the Office of Women's Health. The Office of Women's Health, within the U.S. Department of Health and Human Services, was established in 1991 to improve the health of women by advancing and coordinating a comprehensive women's health agenda to address healthcare prevention and service delivery.

The Office of Women's Health works with numerous government agencies, nonprofit organizations, consumer groups, and associations of healthcare professionals to coordinate and advance policies and programs that best meet the unique healthcare needs of women.

□ 1415

As a national leader in the health of women and girls, the Office of Women's Health has critical specialized expertise that will help the interagency pain management task force address the unique pain management needs of women who may be pregnant or who may be nursing.

This expertise is desperately needed because opioid abuse among women has increased substantially in recent years. In fact, according to the Centers for Disease Control and Prevention, the number of women who fall victim to an opioid-related fatality increased an alarming 400 percent from 1999 to 2010, totalling 48,000 women who have died during that span of time.

During this decade, opioid abuse among women increased more than abuse of any other drug, including cocaine and heroin. Shockingly, the CDC reports that in 2010, 18 women per day died of a prescription painkiller overdose, accounting for nearly 7,000 women in total.

It is critically important that we include experts on women's health in the opioid task force. Women who are pregnant or who may be nursing have specialized healthcare needs, and the Office of Women's Health is uniquely qualified to ensure that the interagency task force takes the needs of women and girls into account as it examines best practices for pain management in prescribing pain medication.

I urge my colleagues to support this commonsense amendment.

I reserve the balance of my time.

Mrs. BROOKS of Indiana. Mr. Chairman, I claim the time in opposition, but I support the amendment.

The CHAIR. Without objection, the gentlewoman from Indiana is recognized for 5 minutes.

There was no objection.

Mrs. BROOKS of Indiana. At this time, I thank the gentlewoman from California for the amendment. I think it strengthens the bill. I think it is very important that the Office of Women's Health is added to the task force. So many of us have had the opportunity to visit NICUs in hospitals and have seen drug-addicted babies. So I do believe that having the perspective of the Office of Women's Health would be critically important.

So often women's health has not been given the proper attention that it deserves, and I would ask for support of the amendment.

I yield back the balance of my time.

Ms. BROWNLEY of California. Mr. Chairman, I yield 1 minute to the gentleman from New Jersey (Mr. PALLONE).

Mr. PALLONE. Mr. Chairman, I want to urge all my colleagues on this side of the aisle to support the bill as well.

Ms. BROWNLEY of California. Mr. Chairman, I thank the gentleman from New Jersey and the gentlewoman from Indiana. I think we all realize the importance of ensuring that this interagency task force is effective and

works, and I think the eyes on specific healthcare needs of women and girls is most important.

I yield back the balance of my time.

The CHAIR. The question is on the amendment offered by the gentlewoman from California (Ms. BROWNLEY).

The amendment was agreed to.

AMENDMENT NO. 2 OFFERED BY MRS. BROOKS OF INDIANA

The CHAIR. It is now in order to consider amendment No. 2 printed in part A of House Report 114-551.

Mrs. BROOKS of Indiana. Mr. Chairman, as the designee of the gentleman from Georgia (Mr. CARTER), I offer amendment No. 2.

The CHAIR. The Clerk will designate the amendment.

The text of the amendment is as follows:

Page 4, line 15, strike "physicians" and insert "subject to subsection (d), physicians".

Page 4, line 18, strike "pharmacists" and insert "subject to subsection (d), pharmacists".

Page 5, after line 10, insert the following:

(d) CONDITION ON PARTICIPATION ON TASK FORCE.—An individual representing a profession or entity described in paragraph (3) or (5) of subsection (c) may not serve as a member of the task force unless such individual—

(1) is currently licensed in a State in which such individual is practicing (as defined by such State) such profession (or, in the case of an individual representing an entity, a State in which the entity is engaged in business); and

(2) is currently practicing (as defined by such State) such profession (or, in the case of an individual representing an entity, the entity is in operation).

Page 5, line 11, strike "(d)" and insert "(e)".

Page 7, line 1, strike "(e)" and insert "(f)".

Page 7, line 3, strike "(f)" and insert "(g)".

The CHAIR. Pursuant to House Resolution 720, the gentlewoman from Indiana (Mrs. BROOKS) and a Member opposed each will control 5 minutes.

The Chair recognizes the gentlewoman from Indiana.

Mrs. BROOKS of Indiana. Mr. Chairman, this amendment simply would require that any of the individuals who are appointed to the task force under H.R. 4641, whether they be a physician, a dentist, a nonphysician prescriber, or pharmacist who is eventually appointed by the lead of Health and Human Services, that that individual shall be a licensed prescriber and practicing in their appropriate State or that they, at a minimum, should have an active license and that they should be a practicing prescriber in that State.

I urge my colleagues to adopt this amendment.

I reserve the balance of my time.

Mr. PALLONE. Mr. Chairman, I claim the time in opposition, but I support the amendment.

The CHAIR. Without objection, the gentleman from New Jersey is recognized for 5 minutes.

There was no objection.

Mr. PALLONE. Mr. Chairman, I urge my colleagues to support the amendment.

I yield back the balance of my time.

Mrs. BROOKS of Indiana. Mr. Chairman, I yield back the balance of my time.

The CHAIR. The question is on the amendment offered by the gentlewoman from Indiana (Mrs. BROOKS).

The amendment was agreed to.

AMENDMENT NO. 3 OFFERED BY MR. GRAYSON

The CHAIR. It is now in order to consider amendment No. 3 printed in part A of House Report 114-551.

Mr. GRAYSON. Mr. Chairman, I have an amendment at the desk.

The CHAIR. The Clerk will designate the amendment.

The text of the amendment is as follows:

Page 4, after line 18, insert the following (and redesignate the subsequent paragraphs accordingly):

(6) first responders;

The CHAIR. Pursuant to House Resolution 720, the gentleman from Florida (Mr. GRAYSON) and a Member opposed each will control 5 minutes.

The Chair recognizes the gentleman from Florida.

Mr. GRAYSON. Mr. Chairman, my amendment would ensure that first responders are included for membership on the Pain Management Best Practices Interagency Task Force. This is a commonsense amendment.

First responders, like police officers and other emergency room staff, are the first on the scene when a person overdoses. And they are the first to administer emergency treatments and resuscitation programs. These are the people who have the first contact with victims of opioid overdose.

It would make sense that if we are putting together a task force to address the terrible opioid problem—and specifically pain management best practices—we should include the views and opinions of those who are first on the scene and in the best position to save lives.

Being first on the scene to overdose emergencies, first responders often interact with patients in pain. Yet, most first responders, especially EMS responders, have no pain management standards as part of their accreditation.

The Commission on Accreditation of Ambulance Services does not include a pain management standard as part of its clinical assessment, nor is pain management a major part of EMS education. As a result, first responder attitudes vary. According to a 2012 Yale study, there is a widespread reluctance within the EMS community to administer opioids to those who legitimately need it out of a fear—perhaps unfounded—that patients could be addicts seeking drugs.

First responders certainly do encounter people who are not prescription painkiller dependent. However, it is often not possible for paramedics to know with certainty if a patient is an addict or even whether the addict is also experiencing legitimate pain.

This level of uncertainty and varying degrees of attitudes within the first responder community, along with the

unique experience and insight into the opioid epidemic, warrants the inclusion of first responders to the Pain Management Best Practices Interagency Task Force membership.

Mr. Chairman, this is very simple, we are putting together a Pain Management Best Practices Interagency Task Force. We should include police officers. We should include paramedics. We should include people who are on the front lines of fighting this battle every day that is a battle of life and death.

I urge the support of my amendment. I reserve the balance of my time.

Mrs. BROOKS of Indiana. Mr. Chairman, I claim the time in opposition.

The CHAIR. The gentlewoman from Indiana is recognized for 5 minutes.

Mrs. BROOKS of Indiana. Mr. Chairman, for the record, I support the amendment.

I yield back the balance of my time.

Mr. GRAYSON. Mr. Chairman, I yield back the balance of my time.

The CHAIR. The question is on the amendment offered by the gentleman from Florida (Mr. GRAYSON).

The amendment was agreed to.

AMENDMENT NO. 4 OFFERED BY MS. CLARK OF MASSACHUSETTS

The CHAIR. It is now in order to consider amendment No. 4 printed in part A of House Report 114-551.

Ms. CLARK of Massachusetts. Mr. Chairman, I have an amendment at the desk.

The CHAIR. The Clerk will designate the amendment.

The text of the amendment is as follows:

Page 4, after line 20, insert the following:

(7) experts in the fields of adolescent and young adult addiction research;

Page 4, line 21, strike "(7)" and insert "(8)".

Page 5, line 6, strike "(8)" and insert "(9)".

Page 5, after line 7, insert the following:

(10) a person in recovery from addiction to medication for chronic pain, whose addiction began in adolescence or young adulthood;

Page 5, line 8, strike "(9)" and insert "(11)".

Page 5, line 9, strike "(10)" and insert "(12)".

Page 6, line 13, strike "and".

Page 6, after line 13, insert the following:

(E) the distinct needs of adolescents and young adults with respect to pain management, pain medication, substance use disorder, and medication-assisted treatment; and

Page 6, line 14, strike "(E)" and insert "(F)".

The CHAIR. Pursuant to House Resolution 720, the gentlewoman from Massachusetts (Ms. CLARK) and a Member opposed each will control 5 minutes.

The Chair recognizes the gentleman from Massachusetts.

Ms. CLARK of Massachusetts. Mr. Chairman, a special thanks to Congresswoman BROOKS, Congressman KENNEDY, and Congressman PALLONE for introducing this important bipartisan bill to address a devastating public health crisis.

The opioid epidemic is a scourge on this country. In my district alone, 400 people have died in the last 4 years as a direct result. As we all know, there is no silver bullet to fix this problem. But what we can do and what we must do is

find every possible way to help those people already affected and stop it from reaching more victims.

When substance use disorder starts in adolescence, it affects key development and societal changes in young people's lives. It can interfere with the brain's ability to mature properly and have potentially lifelong consequences.

We know that a large majority of adults in substance abuse treatment start using prior to the age of 18, and we need to make sure that the voices of adolescents and young adults are heard in this conversation.

The underlying bill establishes a pain management task force that will include many different stakeholders and experts. This amendment would add an expert in adolescent and young adult addiction and a person in recovery from addiction to medication for chronic pain that began in adolescence or young adulthood to the bill's list of experts.

This amendment would also call on the task force to consider the distinct needs of adolescents and young adults as it develops best practices for pain management and medication.

Mr. Chairman, this is a commonsense amendment to help our young people dealing with this epidemic. I urge its passage.

I reserve the balance of my time.

Mrs. BROOKS of Indiana. Mr. Chairman, I claim the time in opposition, but I do support the amendment.

The CHAIR. Without objection, the gentlewoman from Indiana is recognized for 5 minutes.

There was no objection.

Mrs. BROOKS of Indiana. Mr. Chairman, I very much want to thank the gentlewoman from Massachusetts (Ms. CLARK). I believe that this does strengthen the task force. I appreciate and welcome the attention and focus on adolescents.

We had the opportunity to travel to the NIH and to learn so much about the research that is being done there. I believe in having an expert in adolescent and young adult addiction because we do know that that is where it so very often begins. So I appreciate and thank the gentlewoman for strengthening the bill.

I yield back the balance of my time.

Ms. CLARK of Massachusetts. Mr. Chairman, I yield back the balance of my time.

The CHAIR. The question is on the amendment offered by the gentlewoman from Massachusetts (Ms. CLARK).

The amendment was agreed to.

AMENDMENT NO. 5 OFFERED BY MR. PALLONE

The CHAIR. It is now in order to consider amendment No. 5 printed in part A of House Report 114-551.

Mr. PALLONE. Mr. Chairman, I rise as the designee of the gentleman from Massachusetts (Mr. MOULTON) to offer amendment No. 5.

The CHAIR. The Clerk will designate the amendment.

The text of the amendment is as follows:

Page 5, line 3, strike "and".

Page 5, after line 3, insert the following:

(E) veteran service organizations; and

Page 5, line 4, strike "(E)" and insert "(F)".

The CHAIR. Pursuant to House Resolution 720, the gentleman from New Jersey (Mr. PALLONE) and a Member opposed each will control 5 minutes.

The Chair recognizes the gentleman from New Jersey.

□ 1430

Mr. PALLONE. Mr. Chairman, this amendment by the gentleman from Massachusetts (Mr. MOULTON) would basically add representatives of veterans service organizations to the Pain Management Best Practices Interagency Task Force that we have discussed and that we support on a bipartisan basis. I urge support for Mr. MOULTON's amendment.

Mr. Chairman, I reserve the balance of my time.

Mrs. BROOKS of Indiana. Mr. Chairman, I claim the time in opposition, but I support this amendment.

The CHAIR. Without objection, the gentlewoman from Indiana is recognized for 5 minutes.

There was no objection.

Mrs. BROOKS of Indiana. Mr. Chairman, while the task force was designed with the Veterans Administration as a key member of the task force, I do believe that this bill would strengthen the task force in that representatives from veterans service organizations often speak on behalf of and are the first line of defense and advocates for veterans.

Obviously, as we know, veterans seek their medical treatment often from VA hospitals and VA facilities. We know that there has been a significant problem with overprescribing at some of our VA facilities. I believe that this amendment will strengthen the task force and the bill. I urge passage or adoption of the amendment.

I yield back the balance of my time.

Mr. PALLONE. Mr. Chairman, I yield such time as he may consume to the gentleman from Massachusetts (Mr. MOULTON), the sponsor of the amendment.

Mr. MOULTON. Mr. Chairman, the addiction epidemic has touched every community and demographic in America, but our veterans have been hit particularly hard. Veterans suffer from chronic pain at a higher rate than the civilian population, often due to injuries they sustained during their service. This puts our veterans at high risk of developing addiction and presents unique challenges as they search for ways to cope with the pain caused by the wounds of war.

The results of veteran addiction are tragic. Approximately 68,000 veterans struggle with opioid use. Veterans are also almost twice as likely to die from accidental opioid overdoses than non-veterans.

We need to do more to ensure that we are not losing veterans to the disease of addiction, while also ensuring that

they get the absolute best care possible when they return home. That is why it is imperative that the veteran community has a seat at the table as we begin the process of reviewing and updating our pain management best practices.

By adding a representative of a veterans service organization to the interagency task force created by this bill, my amendment will ensure that the unique challenges our veterans face are part of the conversation.

In closing, I would like to thank my colleagues, the gentleman from New York (Mr. ZELDIN) and the gentleman from Minnesota (Mr. WALZ), for their bipartisan cosponsorship and the Iraq and Afghanistan Veterans of America, Vietnam Veterans of America, American Legion, Paralyzed Veterans of America, and Boston Scientific for their support of this amendment.

I urge my colleagues to support this amendment.

Mr. PALLONE. Mr. Chairman, I urge support for the amendment.

I yield back the balance of my time.

The CHAIR. The question is on the amendment offered by the gentleman from New Jersey (Mr. PALLONE).

The amendment was agreed to.

AMENDMENT NO. 6 OFFERED BY MR. NOLAN

The CHAIR. It is now in order to consider amendment No. 6 printed in part A of House Report 114-551.

Mr. NOLAN. Mr. Chairman, I have an amendment at the desk.

The CHAIR. The Clerk will designate the amendment.

The text of the amendment is as follows:

Page 5, line 8, strike “and”.

Page 5, after line 8, insert the following:

(10) an expert on active duty military, armed forces personnel, and veteran health and prescription opioid addiction;

Page 5, line 9, strike “(10)” and insert “(11)”.

The CHAIR. Pursuant to House Resolution 720, the gentleman from Minnesota (Mr. NOLAN) and a Member opposed each will control 5 minutes.

The Chair recognizes the gentleman from Minnesota.

Mr. NOLAN. Mr. Chairman, Members of the House, my amendment simply would ensure that the concerns and the interests of Active-Duty members of our Armed Forces and veterans have their interests and concerns taken into consideration by the interagency task force.

The simple truth is that there is a greater need and use of opioids among Active Duty and veterans of our Armed Forces simply because of the many serious accidents and injuries that they incur in combat and in training.

Over half of the Iraq and Afghanistan veterans have had to use opioids as painkillers from the accidents and the injuries that they have suffered. That is well over half a million of our finest and bravest citizens here in this country, and an 80 percent increase in its use over the last decade.

I would be remiss if I didn't point out as well that overdose from opioids is twice the rate among our Active-Duty

servicemembers and veterans of that of the general population. Also, I would be remiss if I didn't point out that, because of problems that we have been seeing in the Veterans Administration with veterans having a difficult time sometimes getting appointments to get their prescriptions filled, they have been tragically forced to go to alternative street measures, including heroin, with disastrous consequences for our soldiers and our veterans. Our veterans, our men and women of the Armed Forces, deserve better.

This is a growing problem, a growing concern, and my amendment would simply require that they be represented on this interagency task force so that their interests, their concerns can be properly reflected and reported in the findings and results of this interagency task force.

Mr. Chairman, I reserve the balance of my time.

Mrs. BROOKS of Indiana. Mr. Chairman, I claim the time in opposition, but I support the amendment as well.

The CHAIR. Without objection, the gentleman from Indiana is recognized for 5 minutes.

There was no objection.

Mrs. BROOKS of Indiana. Mr. Chairman, I want to thank the gentleman from Minnesota, again, for strengthening the representation on the task force. While I do feel that the VSOs are a strong voice for veterans and will continue to be, I believe the addition specifically of Active-Duty military is something that would be a very strong voice. While DOD is represented on the task force, I think actually having specific Active-Duty military personnel and those who are currently serving and are currently dealing with their pain as a result of their service would be an important addition.

I thank the gentleman, and I urge passage of the amendment.

Mr. Chairman, I yield back the balance of my time.

Mr. NOLAN. Mr. Chairman, I want to thank the gentlewoman from Indiana (Mrs. BROOKS) for her leadership on this important issue and her support for this important amendment, most importantly the great work she is doing here on behalf of our veterans and our men and women in the Armed Forces.

Mr. Chairman, I yield back the balance of my time.

The CHAIR. The question is on the amendment offered by the gentleman from Minnesota (Mr. NOLAN).

The amendment was agreed to.

AMENDMENT NO. 7 OFFERED BY MRS. WATSON COLEMAN

The CHAIR. It is now in order to consider amendment No. 7 printed in part A of House Report 114-551.

Mrs. WATSON COLEMAN. Mr. Chairman, I have an amendment at the desk.

The CHAIR. The Clerk will designate the amendment.

The text of the amendment is as follows:

Page 5, line 8, strike “and”.

Page 5, after line 8, insert the following:

(10) an expert in the field of minority health; and

Page 5, line 9, strike “(10)” and insert “(11)”.

The CHAIR. Pursuant to House Resolution 720, the gentlewoman from New Jersey (Mrs. WATSON COLEMAN) and a Member opposed each will control 5 minutes.

The Chair recognizes the gentlewoman from New Jersey.

Mrs. WATSON COLEMAN. Mr. Chairman, this amendment would simply ensure that, as we address what has rightly been called an epidemic, we consider the unique impacts and issues of drug addiction for minority communities by adding an expert on minority health to the task force that is created by this bill.

The dangers of opiate addiction are apparent across the board. Abuse of prescription opioids has contributed to a flood of cheap heroin to all communities.

Over the past 4 years, we have seen a 269 percent increase in heroin overdose deaths in White communities, but also a 213 percent increase in Black communities, 137 percent increase in Latino communities, and 236 percent in Native American communities.

With that in mind, it is important to remember that the opiate epidemic—both heroin and its prescription painkiller counterparts—looks very different from the perspective of communities of color. The compassion and clemency that we are showing now and the evidence-based solutions we are embracing were needed long ago, way before abuse by predominantly White and suburban communities.

As we craft the tools to solve this crisis, we must ensure the policies we create will help everyone affected. Adding an expert in minority health to this task force helps to make sure that the diverse needs of all Americans are represented at the table. We still live in a world of significant biases.

Just last month, the University of Virginia released a study that found that White medical students and residents genuinely believed that Black patients were less sensitive to pain and had less sensitive nerve endings than White patients, bearing out at least one reason for the consistently documented lack of pain management provided to Black patients.

As we give this task force the vital task of improving how we prescribe some of the most powerful and still-critical medication for pain management, let's do our part to eliminate as much bias as possible. This amendment takes an important step toward reaching that goal. I hope my colleagues will support it.

Mr. Chairman, I reserve the balance of my time.

Mrs. BROOKS of Indiana. Mr. Chairman, I claim the time in opposition, but I support the amendment.

The CHAIR. Without objection, the gentlewoman from Indiana is recognized for 5 minutes.

There was no objection.

Mrs. BROOKS of Indiana. Mr. Chairman, I thank the gentlewoman from New Jersey for this important addition to the task force. I think that she has brought forth some interesting points and some statistics with respect to the opioid abuse and addiction problems facing the minority community. A minority health expert that is very focused on this would add tremendous expertise to the depth of this task force. I support the amendment.

Mr. Chairman, I yield back the balance of my time.

Mrs. WATSON COLEMAN. Mr. Chairman, I thank the gentlewoman from Indiana for her leadership and for her support of this initiative.

Let me close by adding this. We are considering a number of bills this week aimed at curing the opioid and heroin epidemics ravaging so many American families. As we do so, we need to consider two things:

First is that communities of color have unique needs that deserve just as much consideration. That is why I have offered this amendment, and it is a theme I hope to see continued in other legislation we will debate.

The second is that, when we head back to our districts on Friday after completing consideration of these bills, we should not wash our hands and walk away from this issue. We need to fund the programs we have authorized. We need to look back with a critical eye at the ways we criminalized addictions in the past and offer those whom we failed solutions that will allow them to reenter society. Our work cannot stop there. I urge my colleagues to support this amendment.

Mr. Chairman, I yield back the balance of my time.

The CHAIR. The question is on the amendment offered by the gentlewoman from New Jersey (Mrs. WATSON COLEMAN).

The amendment was agreed to.

AMENDMENT NO. 8 OFFERED BY MS. KUSTER

The CHAIR. It is now in order to consider amendment No. 8 printed in part A of House Report 114-551.

Ms. KUSTER. Mr. Chairman, I have an amendment at the desk.

The CHAIR. The Clerk will designate the amendment.

The text of the amendment is as follows:

Page 5, after line 18, insert the following:

(B) research on trends in areas and communities in which the prescription opioid abuse rate and fatality rate exceed the national average prescription opioid abuse rate and fatality rate;

Page 5, line 19, strike "(B)" and insert "(C)".

Page 5, line 22, strike "(C)" and insert "(D)".

Page 6, line 6, strike "(D)" and insert "(E)".

Page 6, line 14, strike "(E)" and insert "(F)".

The CHAIR. Pursuant to House Resolution 720, the gentlewoman from New Hampshire (Ms. KUSTER) and a Member opposed each will control 5 minutes.

The Chair recognizes the gentlewoman from New Hampshire.

Ms. KUSTER. Mr. Chairman, the underlying bill before us authorizes the creation of an interagency task force to combat the opiate epidemic. I want to commend the gentlewoman from Indiana (Mrs. BROOKS) and the gentleman from Massachusetts (Mr. KENNEDY) for their hard work on this issue.

This important legislation will make it easier to tackle this crisis in a holistic way that addresses all angles of the crisis, including law enforcement, education and prevention, and, most importantly, treatment and lifelong recovery.

I thank Congresswoman BROOKS and Congressman KENNEDY for their great work on this bill, as well as the leadership of the chair and the ranking member.

□ 1445

In fact, a similar provision to this legislation was included in the STOP ABUSE Act that I introduced with my colleague, Mr. GUINTA, last year. Today he has joined me in introducing this important bipartisan amendment that will further improve the scope of the task force's effort.

In New Hampshire and across the country, four out of every five heroin users started out misusing prescription opioid medication. Last year more than 25,000 people died across this country from overdoses on prescription drugs.

There are complex reasons for why we have seen such a dramatic rise in prescription drug misuse, but one of the causes that we must examine more closely is prescribing practices and overprescribing.

I recently joined my colleague, Congressman MOONEY of West Virginia, in introducing legislation that would address this problem. This amendment with Mr. GUINTA would help to shine more light on prescription drug misuse by requiring the task force to research addiction trends in communities with high rates of prescription drug misuse and overdoses.

This research will be invaluable in the effort to identify why this crisis is hitting certain regions of our country particularly hard and in identifying further potential corrections to prescribing practices that can be made.

I thank my colleagues for taking up such important legislation this week, and I urge support for this amendment.

I yield 2 minutes to the gentleman from New Hampshire (Mr. GUINTA).

Mr. GUINTA. Mr. Chairman, I rise today in support of the amendment offered by my colleague, Congresswoman KUSTER, and myself, originally part of the STOP ABUSE Act that we authored earlier this year, as previously mentioned.

This amendment would simply require the task force to research addiction trends in communities with high rates of prescription drug abuse.

In our home State of New Hampshire, much of the heroin abuse we have seen today can be traced back to the over-

prescribing of narcotic drugs. This trend, which began in the 1990s, paved the way for the rampant heroin abuse that we are seeing today.

Last year, as you know, 430 people in our State died of an opioid overdose. This year that number is expected to be exceeded. So this amendment would research these trends so we can work to resolve the problem before the epidemic continues and expands. I would urge my colleagues to support this important amendment.

Again, I want to thank the gentlewoman from New Hampshire for her tireless work not just here, but on the Bipartisan Task Force to Combat Heroin Epidemic. We are clearly providing options and solutions to help those families in need.

Ms. KUSTER. Mr. Chairman, I will just close by thanking Mrs. BROOKS of Indiana for her leadership, Mr. KENNEDY for his leadership in offering this legislation, and thank Mr. GUINTA for this amendment.

I urge our colleagues to support this bipartisan amendment that will allow us to understand the underlying increase in the use of opioid medication and prescription drugs that are leading people into substance use disorder and, ultimately, sadly, into the use of heroin and fentanyl that is killing so many people in our homes and communities.

I yield back the balance of my time.

The Acting CHAIR (Mr. BYRNE). The question is on the amendment offered by the gentlewoman from New Hampshire (Ms. KUSTER).

The amendment was agreed to.

AMENDMENT NO. 9 OFFERED BY MR. SCHIFF

The Acting CHAIR. It is now in order to consider amendment No. 9 printed in part A of House Report 114-551.

Mr. SCHIFF. Mr. Chairman, I have an amendment at the desk.

The Acting CHAIR. The Clerk will designate the amendment.

The text of the amendment is as follows:

Page 6, line 3, strike "and".

Page 6, line 5, before the semicolon insert "and the coordination of information collected from State prescription drug monitoring programs for the purpose of preventing the diversion of pain medication".

The Acting CHAIR. Pursuant to House Resolution 720, the gentleman from California (Mr. SCHIFF) and a Member opposed each will control 5 minutes.

The Chair recognizes the gentleman from California.

Mr. SCHIFF. Mr. Chairman, I rise today to offer an amendment to H.R. 4641 that will require the interagency task force created by this legislation to study and report on the coordination of information collected from state prescription drug monitoring programs, or PDMPs, as part of its effort to update best practices for pain management strategies.

State PDMPs play a critical role in preventing the diversion of pain medication as well as other controlled substances. Chief among their benefits, access to a State PDMP provides an invaluable resource to prescribing physicians by allowing them to review a patient's history of prescription drugs and to spot signs of opioid abuse so that they may proactively refer a patient to substance abuse treatment, if appropriate. They allow medical professionals to intervene before an addiction spirals out of control.

Now active in 49 States, PDMPs can also inform prescribing physicians if a patient has recently accessed pain medication elsewhere and help to detect potential doctor-shopping activities by individuals with no legitimate medical need. Further, PDMPs also play an important role in identifying forged or stolen prescriptions.

While information sharing between some adjacent State PDMPs currently exists to prevent illicit doctor-shopping activities from occurring across State lines, I believe it is time that we boost efforts to strengthen the sharing of information across all State PDMPs.

I recently met with physicians from my district who described from their experience how prevalent the issue of doctor shopping is, particularly in the State of California, and how it is becoming more and more common for individuals with histories of opioid abuse to attempt to receive illicit prescriptions in nearby States.

With passage of this amendment, I urge the task force to explore the benefits of potentially establishing a national PDMP that will vastly approve our ability to prevent and disincentivize doctor shopping in all regions of the country, and I look forward to working with other concerned Members on this important topic.

By requiring that the interagency task force include State PDMP information as it formulates its expert input and improves prescribing guidelines, we will be able to better understand what is and isn't working and how we may be able to harness the power of State PDMPs to develop an effective national response to the opioid crisis that has devastated communities across the country.

It is beyond doubt that prescription drug monitoring programs serve an invaluable purpose, and any effort to address overprescription must include consideration of important data that is gleaned across State PDMPs.

While I hope that this Congress will ultimately provide the necessary resources to assure we are able to develop and implement a comprehensive plan to prevent opioid addiction and increase access to treatment, the recommendations developed by the task force created under this bill are an important initial step that must come to pass before achieving that goal.

I urge support for this amendment and for the bill.

Mr. Chairman, I reserve the balance of my time.

Mrs. BROOKS of Indiana. Mr. Chairman, I claim the time in opposition, but I am in support of the amendment.

The Acting CHAIR. Without objection, the gentlewoman is recognized for 5 minutes.

There was no objection.

Mrs. BROOKS of Indiana. Mr. Chairman, I would like to thank the gentleman from California for offering this amendment.

We know from talking to a lot of physicians and medical educators as well that the use of these PDMPs is a critically important tool in their tool chest to combat against those patients who might be doctor shopping.

We know, though, that not all States use it. Not all prescribers actually check that PDMP system like they should. So I appreciate the Congressman's concept of a feasibility study as to whether or not there should be a national PDMP system, and I urge its passage.

I yield back the balance of my time.

Mr. SCHIFF. Mr. Chairman, I thank the gentlewoman for her support as well as all of her good work in trying to address the opioid crisis in the United States.

I yield back the balance of my time.

The Acting CHAIR. The question is on the amendment offered by the gentleman from California (Mr. SCHIFF).

The amendment was agreed to.

AMENDMENT NO. 10 OFFERED BY MS. CLARK OF MASSACHUSETTS

The Acting CHAIR. It is now in order to consider amendment No. 10 printed in part A of House Report 114-551.

Ms. CLARK of Massachusetts. Mr. Chairman, I have an amendment at the desk.

The Acting CHAIR. The Clerk will designate the amendment.

The text of the amendment is as follows:

Page 6, after line 5, insert the following:

(D) ongoing efforts at the Federal, State, and local levels to examine the potential benefits of electronic prescribing of opioids, including any public comments collected in the course of those efforts;

Page 6, line 6, strike "(D)" and insert "(E)".

Page 6, line 14, strike "(E)" and insert "(F)".

The Acting CHAIR. Pursuant to House Resolution 720, the gentlewoman from Massachusetts (Ms. CLARK) and a Member opposed each will control 5 minutes.

The Chair recognizes the gentlewoman from Massachusetts.

Ms. CLARK of Massachusetts. Mr. Chairman, my amendment is simple. It directs the task force to consider any potential benefits from increasing the electronic prescribing of opioids.

We know that, with the increasing sophistication of health information technology, we have an opportunity to use that information for the benefit of our public health. We also know that paper prescriptions are subject to being stolen, copied, and misused.

While that is a fact, 67 percent of prescriptions nationally are ordered elec-

tronically, but the rate for controlled substances is less than 1 percent.

Electronic prescribing has the potential to provide data to help us identify problems, whether from a user or a prescriber, and focus our interventions on saving lives and preventing addiction.

Back home in my district, Cambridge Health Alliance has adopted electronic prescriptions for controlled substances and have found it reduces fraud and allows administrators to track prescription patterns and detect overprescribing. Electronic prescriptions can be a key tool in fighting this epidemic. I urge my colleagues to support this commonsense amendment.

I yield back the balance of my time.

The Acting CHAIR. The question is on the amendment offered by the gentleman from Massachusetts (Ms. CLARK).

The amendment was agreed to.

AMENDMENT NO. 11 OFFERED BY MR. ROTHFUS

The Acting CHAIR. It is now in order to consider amendment No. 11 printed in part A of House Report 114-551.

Mr. ROTHFUS. Mr. Chairman, I have an amendment at the desk.

The Acting CHAIR. The Clerk will designate the amendment.

The text of the amendment is as follows:

Page 6, line 13, strike "and".

Page 6, after line 16, insert "and" after the semicolon.

Page 6, after line 16, insert the following:

(F) the practice of co-prescribing naloxone for both pain patients receiving chronic opioid therapy and patients being treated for opioid use disorders;

The Acting CHAIR. Pursuant to House Resolution 720, the gentleman from Pennsylvania (Mr. ROTHFUS) and a Member opposed each will control 5 minutes.

The Chair recognizes the gentleman from Pennsylvania.

Mr. ROTHFUS. Mr. Chairman, I want to thank my good friend from Indiana for her leadership on this very important piece of legislation as well as the chairman and ranking member of the committee for working together to bring it to the floor today.

The United States is being ravaged by skyrocketing levels of prescription opioid and heroin abuse. This brutal epidemic has accounted for more than 28,000 American deaths in 2014, destroying families and devastating local communities alike.

My constituents in western Pennsylvania have been particularly hard hit. In the past two decades, there has been a 470 percent increase in drug overdose deaths. The vast majority of these have been heroin and opioid related.

Two weeks ago, at a local hospital in my district, five overdoses were treated in 1 day alone. In February, the same facility treated 20 overdoses in just 2 days.

We need meaningful and evidence-based solutions to combat this scourge. I have worked to help develop those solutions as part of the Bipartisan Task

Force to Combat the Heroin Epidemic and by holding roundtables with stakeholders in my district.

I strongly believe that the legislation we are considering today is another step forward in that process by creating an interagency task force to review and update best practices for pain management and prescribing pain medication.

As part of its work, the task force will consider various types of data and practices. For example, it must consider the existence and availability of different classes of opioids, including those with safety measures such as abuse deterrent technology. It must also consider how high-risk populations are managed by medical professionals.

The legislation has been entirely silent on the issue of naloxone, however. Thus, the amendment that I offered with my friend from Massachusetts (Mr. KEATING) simply seeks to have the task force take into consideration the practice of coprescribing this lifesaving drug as part of its work.

Naloxone has the ability to revive a victim who has suffered an overdose within minutes. It is both safe and effective and has been used successfully to counteract more than 26,000 overdoses between 1996 and 2014. First responders who have seen what naloxone can do have referred to it as the miracle drug.

The American Medical Association and many community, State, and national groups have supported coprescribing naloxone to patients who are taking opioids as a critical part of the solution to the rising epidemic of opioid overdose-related deaths.

Considering the practice of coprescribing naloxone, particularly for high-risk populations or when other avenues of treatment have been tried and failed, it is an essential part of addressing the opioid and heroin epidemic.

By reviewing and updating best practices with respect to coprescribing naloxone, the interagency task force can ensure that health professionals at all levels, both inside and outside of government, are fully informed when prescribing and treating patients.

Simply put, Americans who are struggling with opioid and heroin addiction cannot be treated if they lose their lives to drug overdose. It is essential that we get naloxone into the hands that need it the most in a safe and effective manner. My amendment would ensure that the task force takes a close look at this.

Mr. Chairman, I reserve the balance of my time.

□ 1500

Mr. KEATING. Mr. Chairman, I rise in support of Mr. ROTHFUS' amendment to H.R. 4641.

The Acting CHAIR. Without objection, the gentleman from Massachusetts is recognized for 5 minutes.

There was no objection.

Mr. KEATING. Mr. Chairman, I would like to thank my colleague from Pennsylvania (Mr. ROTHFUS).

I rise today in support of this amendment, our amendment. It is an amendment that I believe will move the task force to consider the practice of coprescribing of overdose reversal drugs such as naloxone as part of the review of its best practices for pain management and for prescribing pain medication.

Importantly, the medical community now realizes the need for having these important guidelines in place and having them being addressed, as over 80 percent of the AMA members have indicated they see the need for these guidelines now and the importance in terms of saving lives.

As a former district attorney, I took a public health approach a decade and a half ago, starting an Anti-Heroin Task Force. At the time, in our State, two people, on average, were dying every day from these overdoses. In just the last 6 years, that number has increased to almost four people a day.

As a Congressman, this hits really close to home to me because our latest stats in 2014 indicate that a quarter of the overdose deaths in Massachusetts occurred in counties in my district. Over 60 percent occurred in the cities of Fall River and New Bedford alone.

In fact, nearly twice the statewide average in Cape Cod, where the highest percentage of per capita rate of opioid-related overdoses occurs, represents a significant part of the epidemic in our Commonwealth.

Going forward, Mr. ROTHFUS and I introduced Co-Prescribing Saves Lives Act legislation to require Federal health agencies, including HHS, the Department of Defense, and the VA, to create guidelines for coprescribing naloxone alongside opioid prescriptions and making naloxone more widely available.

Our legislation creates a grant program as well, so the States will have the resources to do the same.

As our partnership shows, in an often divided Congress, we are coming together. We are coming together to confront a uniquely American epidemic.

Mr. Chairman, I yield back the balance of my time.

Mr. ROTHFUS. Mr. Chairman, to close, increased access to naloxone, particularly for patients who are at high risk, has been identified as one of the most powerful tools for reducing the number of opioid and heroin-related overdose deaths.

Let's ensure that our health professionals are fully informed of this option when prescribing and treating patients.

I urge my colleagues to support this commonsense, bipartisan amendment.

Mr. Chairman, I yield back the balance of my time.

The Acting CHAIR. The question is on the amendment offered by the gentleman from Pennsylvania (Mr. ROTHFUS).

The amendment was agreed to.

AMENDMENT NO. 12 OFFERED BY MS. CLARK OF MASSACHUSETTS

The Acting CHAIR. It is now in order to consider amendment No. 12 printed in part A of House Report 114-551.

Ms. CLARK of Massachusetts. Mr. Chairman, I have an amendment at the desk.

The Acting CHAIR. The Clerk will designate the amendment.

The text of the amendment is as follows:

Page 6, line 13, strike "and".

Page 6, after line 16, insert the following:

(F) research that has been, or is being, conducted or supported by the Federal Government on prevention of, treatment for, and recovery from substance use by and substance use disorders among adolescents and young adults relative to any unique circumstances (including social and biological circumstances) of adolescents and young adults that may make adolescent-specific and young adult-specific treatment protocols necessary, including any effects that substance use and substance use disorders may have on brain development and the implications for treatment and recovery;

(G) Federal non-research programs and activities that address prevention of, treatment for, and recovery from substance use by and substance use disorders among adolescents and young adults, including an assessment of the effectiveness of such programs and activities in—

(i) preventing substance use by and substance use disorders among adolescents and young adults;

(ii) treating such adolescents and young adults in a way that accounts for any unique circumstances faced by adolescents and young adults; and

(iii) supporting long-term recovery among adolescents and young adults; and

(H) gaps that have been identified by Federal officials and experts in Federal efforts relating to prevention of, treatment for, and recovery from substance use by and substance use disorders among adolescents and young adults, including gaps in research, data collection, and measures to evaluate the effectiveness of Federal efforts, and the reasons for such gaps;

The Acting CHAIR. Pursuant to House Resolution 720, the gentlewoman from Massachusetts (Ms. CLARK) and a Member opposed each will control 5 minutes.

The Chair recognizes the gentlewoman from Massachusetts.

Ms. CLARK of Massachusetts. Mr. Chairman, my amendment would direct the task force to consider the programs and research relative to adolescents and young adults.

We know that addiction and recovery often start early, and we need to focus research on how to address the unique needs of our adolescents and young adults.

We need to understand how years of opioid abuse can affect the development of the brain, how it affects the development of coping skills, and how we can best support our kids in long-term recovery.

Most importantly, there are many gaps in research on this subject, and we need to know the status of the current research and where we need to focus our resources.

Recently, I met a constituent named Ryan. In seventh grade, he started taking drugs. When he did, he told me he felt like he finally fit in, like he had found the answers to the problems he felt and the pain he felt.

By the time he was 13, he started drinking, taking pills, and stealing money from his family. His mother was panicked. The minute he walked out of the house he had to get high. He also felt powerless.

At 15, he became convinced he was a bad person. He felt ashamed that he couldn't change, not even for his mother.

The last time he relapsed, his mom told him he couldn't see friends anymore, and he threw a piece of glass at her.

She looked him in the eyes and said: I don't know who you are anymore.

He went into treatment for three additional months, and that treatment is what changed his life. He said that it saved him. One day at the sober house he remembers sincerely laughing for the first time, and he thought: There's hope for me.

All these little things he forgot about himself, like humor, kindness and empathy. He said: I no longer felt like the shell of a person.

He asked for our leadership for two things: the people in recovery need not to be ashamed. It is not what defines them, even when their addiction starts very young; and that we need to come up with funding for treatment.

Ryan is an inspiration to me, and we owe it to the young victims of this epidemic to focus on the unique impact of this public health crisis on adolescents and young adults.

I urge my colleagues to support this commonsense amendment.

I reserve the balance of my time.

Mrs. BROOKS of Indiana. Mr. Chairman, I claim the time in opposition, but I support the amendment.

The Acting CHAIR. Without objection, the gentlewoman is recognized for 5 minutes.

There was no objection.

Mrs. BROOKS of Indiana. Mr. Chairman, I would like to, once again, thank the gentlewoman from Massachusetts for this important amendment. As she spoke, she reminded me of a visit that I made to a recovery high school; and there are more recovery high schools being created across the country.

But I think when I visited the recovery high school in Indianapolis, called Hope Academy, it reminded me, as I listened to these young people, of the very different needs, but the very, very serious desire that they have to find themselves again, as the gentlewoman just stated.

A young woman who was turning 17 the next day shared that it was going to be her first birthday in 3 years where she would be sober, and she thanked her classmates and her colleagues there as they sat in that circle, and asked that they help her make sure that she didn't go home that night

and relapse because she couldn't remember a birthday, really, where she had been sober.

So I do believe that having more studies specifically with respect to the programs and the research about adolescents and young adults is critically important because that is where it all starts.

I support this amendment.

Mr. Chairman, I yield back the balance of my time.

Ms. CLARK of Massachusetts. Mr. Chairman, again, I just want to thank the gentlewoman from Indiana for all her leadership and advocacy, and my good friend and colleague from the Commonwealth of Massachusetts (Mr. KENNEDY) for his as well. This bill and their work will make an incredible difference to families across the country.

Mr. Chairman, I yield back the balance of my time.

The Acting CHAIR. The question is on the amendment offered by the gentlewoman from Massachusetts (Ms. CLARK).

The amendment was agreed to.

AMENDMENT NO. 13 OFFERED BY MS. ESTY

The Acting CHAIR. It is now in order to consider amendment No. 13 printed in part A of House Report 114-551.

Ms. ESTY. Mr. Chairman, I have an amendment at the desk.

The Acting CHAIR. The Clerk will designate the amendment.

The text of the amendment is as follows:

Page 6, line 19, strike "and".

Page 6, line 25, strike the period and insert "; and".

Page 6, after line 25, insert the following:

(4) review, modify, and update best practices for pain management and prescribing pain medication, specifically as it pertains to physician education and consumer education.

Page 7, line 15, strike "and".

Page 7, line 20, strike the period and insert "; and".

Page 7, after line 20, insert the following:

(4) the modified and updated best practices described in subsection (d)(4).

The Acting CHAIR. Pursuant to House Resolution 720, the gentlewoman from Connecticut (Ms. ESTY) and a Member opposed each will control 5 minutes.

The Chair recognizes the gentlewoman from Connecticut.

Ms. ESTY. Mr. Chairman, I rise today in support of my amendment, which would empower the interagency task force to help communities spread awareness about the dangers of drug addiction through consumer education, and help medical providers more effectively and safely address patient pain management.

Along with my colleague, Representative KNIGHT, I proudly introduced this amendment that was inspired by bipartisan legislation that I introduced earlier this year, with Representatives KNIGHT and COSTELLO, and that was identified as a legislative priority by the Bipartisan Task Force to Combat the Heroin Epidemic that I proudly serve on with so many of my colleagues here in this House.

Mr. Chairman, there is not a community in this great country that hasn't been touched by drug addiction, not one. Addiction knows no bounds. It knows no race, no gender, no economic status, no party affiliation.

In January, I was honored to have James Wardwell, the Chief of Police in New Britain, Connecticut, join me for the President's State of the Union Address, and he came to join me because of his leadership and his concern about the need to address this growing public health crisis.

Chief Wardwell, and many other first responders, medical professionals, substance abuse counselors, family members, and recovering addicts, have worked with me to help craft legislation to address our growing epidemic of prescription drug and heroin addiction.

I am glad that today, this House is taking action. Today's legislation is an example of what we, in Congress, are supposed to be doing. Our job is to work together, Democrats and Republicans, to address the needs of the American people.

Whenever I go home to central and northwest Connecticut, at community forums in Torrington, at Congress on Your Corner events in Waterbury and the Farmington Valley, constituents come up to me and ask: What are you in Congress doing to help our families with the heroin epidemic?

The families in Connecticut and across this country who are losing loved ones to drug addiction cannot afford for us to wait. We need to act now.

Recovering from addiction is possible, but it is hard. So much of our effort to combat drug addiction is focused on helping folks get the treatment they need, and that is important, but it is not enough to treat the crisis. We must help prevent people from getting addicted in the first place.

Our bipartisan amendment does just that by directing the interagency task force to establish guidelines that help prescribers more effectively and safely manage their patients' pain, and that strengthens consumer education about opioid addiction.

Our amendment takes an important step toward preventing drug addiction. Those who prescribe narcotics would benefit from an increased education about the dangers of addiction and ways in which they can help minimize the risks associated with prescribing narcotics.

Those hardest hit by this epidemic would benefit from having access to educational materials in our schools, community centers, and from local law enforcement, that help warn people about the dangers of opioid use and possible addiction.

I am very encouraged that the House and Senate are taking action to address this public health crisis, and I will continue doing everything within my power to make addiction prevention a priority.

Opioid and heroin addiction have already taken so many young lives and

needlessly torn apart so many families. We can't wait for more lives to be destroyed before we take action.

So let's work together today to prevent our children, our students, our patients, our neighbors, our families, and our friends, from becoming victims of this terrible public health crisis. Let's work together today to stop drug addiction before it begins.

Mr. Chairman, I reserve the balance of my time.

Mrs. BROOKS of Indiana. Mr. Chairman, I claim the time in opposition, but I support the amendment.

The Acting CHAIR. Without objection, the gentlewoman is recognized for 5 minutes.

There was no objection.

Mrs. BROOKS of Indiana. Mr. Chairman, I would like to thank the gentlewoman from Connecticut for this important amendment.

Certainly, the job of the interagency task force, besides producing best practices and reviewing and modifying and talking about them, is not just to generate a report that Congress will have, as I have said, sitting on a shelf someplace, and that our staff or the Congressional Research Service can look at and study; it is really meant to educate the public, to educate the public, whether or not they are people in schools, whether or not they are in our hospitals.

But I think, most importantly, we need to make sure that our prescribers are being educated. We have had roundtable discussions with our medical educators, and there is a push around the country, and I applaud that push around the country of our medical educators, whether it is in our med schools for physicians or for nursing programs, dental programs, but to try to start at a much earlier level in their medical education about the research and the studies and the best practices around opioids.

Certainly, as being a lawyer, we are required to do continuing medical or continuing legal education, and it is something that I know that physicians and prescribers are certainly required to get continuing medical education. I just want to continue to encourage and applaud them for seeking out that medical education around opioids. I think it is critically important.

With this amendment, I think it will strengthen and educate our prescribers about the need to continue to educate themselves on pain management practices and the use of opioids.

I urge the amendment's passage.

Mr. Chairman, I yield back the balance of my time.

□ 1515

Ms. ESTY. Mr. Chairman, again, I would like to thank my colleague, Representative KNIGHT, for cosponsoring this amendment. I would like to thank the bipartisan leadership for taking up this issue, and my good friend, the gentlewoman from Indiana, Representative BROOKS, for her leadership. I would

like to thank the advocates in Connecticut who have worked so tirelessly with me, Chief Wardwell and Shawn Lang, among others. Shawn Lang recently was recognized by the White House for her advocacy and leadership on this issue for many, many years.

Mr. Chairman, I urge my colleagues to support this amendment.

I yield back the balance of my time.

The Acting CHAIR. The question is on the amendment offered by the gentlewoman from Connecticut (Ms. ESTY).

The amendment was agreed to.

AMENDMENT NO. 14 OFFERED BY MR. WELCH

The Acting CHAIR. It is now in order to consider amendment No. 14 printed in part A of House Report 114-551.

Mr. WELCH. Mr. Chairman, I have an amendment at the desk.

The Acting CHAIR. The Clerk will designate the amendment.

The text of the amendment is as follows:

Page 6, line 19, strike "and".

Page 6, line 25, strike the period and insert "; and".

Page 6, after line 25, insert the following:

(4) examine and identify—

(A) the extent of the need for the development of new pharmacological, nonpharmacological, and medical device alternatives to opioids;

(B) the current status of research efforts to develop such alternatives; and

(C) the pharmacological, nonpharmacological, and medical device alternatives to opioids that are currently available that could be better utilized.

Page 7, line 15, strike "and".

Page 7, line 20, strike the period and insert "; and".

Page 7, after line 20, insert the following:

(4) the results of the examination and identification conducted pursuant to subsection (d)(4), and recommendations regarding—

(A) the development of new pharmacological, nonpharmacological, and medical device alternatives to opioids; and

(B) the improved utilization of pharmacological, nonpharmacological, and medical device alternatives to opioids that are currently available.

The Acting CHAIR. Pursuant to House Resolution 720, the gentleman from Vermont (Mr. WELCH) and a Member opposed each will control 5 minutes.

The Chair recognizes the gentleman from Vermont.

Mr. WELCH. Mr. Chair, on January 8, 2014, an extraordinary thing happened in Vermont. Our Governor, Peter Shumlin, giving a State of the State Address, devoted its entirety to the opioid epidemic in Vermont. I remember how stunned people were that a Governor would take such a difficult topic and spend his entire address on it. I remember the reaction of many of my colleagues here, who said: Peter, isn't that dangerous? You are talking about something that is not great for the reputation of the State.

What, in fact, was great for the reputation of the State was that our Governor and our leaders acknowledged the existence of a problem that was creating heartbreak and heartache in all of our communities; and a problem

acknowledged is the first step in dealing with a problem to be solved.

Since then, Vermont has been extraordinary in its efforts to attack this problem. Communities like Rutland, St. Albans, Barre, and Burlington have coordinated with the police force, with our medical providers and our hospitals to provide a treatment-based approach to helping folks who have an addiction to opioids—many of them coming by it as a result of prescriptions for legitimate medical needs.

We had, in Rutland, a community coming together to create Project VISION, which has faith-based groups, the police, and the medical community doing everything they can to basically give individual attention to folks who are trying to help themselves get off of opiates.

The problem continues to be severe, but what we have is a community that is fully engaged in it, including our State legislature, which provided funds for treatment—a treatment-based approach—to helping people with a hub-and-spoke system that is really working well. Folks who are getting prescriptions, folks who have a problem, an addiction, are getting access to methadone or other prescribed products, take that in a hub so it is supervised, and they are able then to go to work.

So this has been a situation in Vermont where, as a result of the Governor's focus on the problem, we have had community engagement to stem the tide of this issue.

It has been working, but challenges remain because we don't have enough treatment funds. This legislation is an important acknowledgment on the part of Congress that we are getting it, that across this country we are all being affected by the challenges that our communities face.

I thank the sponsors of this legislation, Mr. PALLONE, and Mr. UPTON, too, for their leadership.

My hope, by the way, is that we get the message, too, in Congress that we have got to send some funds back to our communities that are struggling with these programs. We can't micro-manage the treatment here. It is up to the courageous people in our communities to do it, and some of the tax dollars that they send to us we have got to send back to them. That is why I, among others, am supporting an emergency appropriation of \$600 million. That would help quite a bit.

The amendment that I have on this bill, which establishes an interagency task force to review, modify, and update the best practices for pain management, would ask that we also review developing nonopioid forms of pain relief. If opioids diminish pain but they create misery, let's find another way to do it and help our folks who need pain relief to get it.

The second thing, it would examine existing nonopioid alternatives that could be better utilized.

So this is tremendous that there has been such a bipartisan coming together

to sponsor practical steps that we can take. I see us in Congress as essentially acknowledging what Governor Shumlin identified as a real problem for us and we are hearing about in our communities. But I hope we are ready to take some next steps and actually focus on getting resources back to our communities that are doing the very, very challenging work at the local level where it needs to be done to help folks relieve themselves from the addiction of opioids.

Mr. Chairman, I yield back the balance of my time.

The Acting CHAIR. The question is on the amendment offered by the gentleman from Vermont (Mr. WELCH).

The amendment was agreed to.

AMENDMENT NO. 15 OFFERED BY MR. SESSIONS

The Acting CHAIR. It is now in order to consider amendment No. 15 printed in part A of House Report 114-551.

Mr. SESSIONS. Mr. Chairman, I have an amendment at the desk.

The Acting CHAIR. The Clerk will designate the amendment.

The text of the amendment is as follows:

Page 6, after line 25, insert the following (and redesignate the subsequent subsections accordingly):

(e) CONSIDERATION OF STUDY RESULTS.—In reviewing, modifying, and updating, best practices for pain management and prescribing pain medication, the task force shall take into consideration existing private sector, State, and local government efforts related to pain management and prescribing pain medication.

The Acting CHAIR. Pursuant to House Resolution 720, the gentleman from Texas (Mr. SESSIONS) and a Member opposed each will control 5 minutes.

The Chair recognizes the gentleman from Texas.

Mr. SESSIONS. Mr. Chairman, I want to take time to recognize the gentleman from New Jersey, representing the Energy and Commerce Committee, and the gentlewoman from Indiana (Mrs. BROOKS) for their service not only to this conference, but also to the issues and the ideas that are being brought forth.

The gentlewoman from Indiana has served our Nation as a United States attorney in Indiana. She has been on the front line of battles, albeit a few years ago, but the front line of battles that the American people face, how we protect the American public from all sorts of things that get in our way as families and communities. But in this case today, she is serving as a Member of Congress firsthand to fight a problem with opioids. Opioids are a synthetic heroin, Mr. Chairman, and synthetic heroin is a national problem. It is a national problem and one which this Congress is undertaking.

We are following up today on the United States Senate bill and this bill that came through regular order in the House of Representatives under two primary committees. The Judiciary Committee and the Energy and Commerce Committee have addressed bills

that are being debated today that will be passed, will be done in a bipartisan way, and will bring the best ideas of the House of Representatives to the plate. With that in mind, that is what I stand for today, sir, to do.

I join in, as my colleague from Vermont has done, in adding to this interagency task force with an amendment that I brought forth that I would ask us to consider. I will offer this amendment to ensure that the existing best practices of State and local governments, as well as the private sector, are specifically considered as the task force which was established by H.R. 4641 conducts their business.

Mr. Chairman, the opportunity for us to understand the amendment process means that not only I, but also other Members of this body, bring forth ideas that we think are the best ways to combat this problem. I believe in State and local governments. I believe in the private sector. I think they are the essence of, really, where the rubber meets the road on the solution of problems, not to kick around ideas and to find something that doesn't work, but to kick around ideas that do work.

Local communities, local governments, and the private sector collaborate back home daily. They do this in Dallas, Texas, which is my home, which I represent, and we have something that is called the Dallas Area Drug Prevention Partnership. It was established in 2007, and it represents what I believe is the best collaborative effort between local communities focusing on preventing drug abuse.

A few years ago, Dallas, Texas, the epicenter of something that was a heroin epidemic, was looking at a marketing effort by Mexican drug dealers with something that was called cheese. Cheese was a marketing effort, but it was heroin, and it was being packaged and sold as cheese. In fact, it caused the death of some 25 people in Dallas, Texas, very quickly before law enforcement recognized what the problem was.

Law enforcement worked with community leaders, church leaders, religious leaders, Boy Scout troops, Girl Scout troops, youth groups, YMCAs, and we got a handle on what the problem was. But it was not solved by the Federal Government. It was not done just by an interagency departmental group of people in Washington, D.C. It was solved with Washington, D.C., and with people back home who saw the problem firsthand, who took responsibility for the problem firsthand.

In this case, what we are trying to say is we are dealing with a nationwide epidemic, a nationwide epidemic which we have spoken very plainly about today that is one that is caused through opioid use and then the transition to heroin at some point in a person's life. It is creating thousands of deaths across our country. Something must be done. But the something to be done is a collaborative effort between the Federal Government, interagency responsibility up in Washington and

other places back home, but with State and local organizations and with private sector organizations that really will be not just the boots on the ground, but many times with the best expertise about the best way to do it in the best place.

Mr. Chairman, I bring forth this amendment. I urge my colleagues to support this amendment and the underlying bill.

I yield back the balance of my time.

The Acting CHAIR. The question is on the amendment offered by the gentleman from Texas (Mr. SESSIONS).

The amendment was agreed to.

The Acting CHAIR. The question is on the committee amendment in the nature of a substitute, as amended.

The amendment was agreed to.

The Acting CHAIR. Under the rule, the Committee rises.

Accordingly, the Committee rose; and the Speaker pro tempore (Mr. SESSIONS) having assumed the chair, Mr. BYRNE, Acting Chair of the Committee of the Whole House on the state of the Union, reported that that Committee, having had under consideration the bill (H.R. 4641) to provide for the establishment of an inter-agency task force to review, modify, and update best practices for pain management and prescribing pain medication, and for other purposes, and, pursuant to House Resolution 720, he reported the bill back to the House with an amendment adopted in the Committee of the Whole.

The SPEAKER pro tempore. Under the rule, the previous question is ordered.

Is a separate vote demanded on any amendment to the amendment reported from the Committee of the Whole?

If not, the question is on the committee amendment in the nature of a substitute, as amended.

The amendment was agreed to.

The SPEAKER pro tempore. The question is on the engrossment and third reading of the bill.

The bill was ordered to be engrossed and read a third time, and was read the third time.

The SPEAKER pro tempore (Mr. BYRNE). The question is on the passage of the bill.

The question was taken; and the Speaker pro tempore announced that the ayes appeared to have it.

Mrs. BROOKS of Indiana. Mr. Speaker, on that I demand the yeas and nays. The yeas and nays were ordered.

The SPEAKER pro tempore. Pursuant to clause 8 of rule XX, further proceedings on this question will be postponed.

□ 1530

ANNOUNCEMENT BY THE SPEAKER PRO TEMPORE

The SPEAKER pro tempore. Pursuant to clause 8 of rule XX, the Chair will postpone further proceedings today on motions to suspend the rules

on which a recorded vote or the yeas and nays are ordered, or on which the vote incurs objection under clause 6 of rule XX.

Record votes on postponed questions will be taken later.

INFANT PLAN OF SAFE CARE IMPROVEMENT ACT

Mr. BARLETTA. Mr. Speaker, I move to suspend the rules and pass the bill (H.R. 4843) to amend the Child Abuse Prevention and Treatment Act to require certain monitoring and oversight, and for other purposes, as amended.

The Clerk read the title of the bill.

The text of the bill is as follows:

H.R. 4843

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

SECTION 1. SHORT TITLE.

This Act may be cited as the “Infant Plan of Safe Care Improvement Act”.

SEC. 2. BEST PRACTICES FOR DEVELOPMENT OF PLANS OF SAFE CARE.

Section 103(b) of the Child Abuse Prevention and Treatment Act (42 U.S.C. 5104(b)) is amended—

(1) by redesignating paragraphs (5) through (8) as paragraphs (6) through (9), respectively; and

(2) by inserting after paragraph (4), the following:

“(5) maintain and disseminate information about the requirements of section 106(b)(2)(B)(iii) and best practices relating to the development of plans of safe care as described in such section for infants born and identified as being affected by illegal substance abuse or withdrawal symptoms, or a Fetal Alcohol Spectrum Disorder;”.

SEC. 3. STATE PLANS.

Section 106(b)(2)(B)(iii) of the Child Abuse Prevention and Treatment Act (42 U.S.C. 5106a(b)(2)(B)(iii)) is amended by inserting before the semicolon at the end the following: “to ensure the safety and well-being of such infant following release from the care of healthcare providers, including through—”

“(I) addressing the health and substance use disorder treatment needs of the infant and affected family or caregiver; and

“(II) the development and implementation by the State of monitoring systems regarding the implementation of such plans to determine whether and in what manner local entities are providing, in accordance with State requirements, referrals to and delivery of appropriate services for the infant and affected family or caregiver”.

SEC. 4. DATA REPORTS.

(a) IN GENERAL.—Section 106(d) of the Child Abuse Prevention and Treatment Act (42 U.S.C. 5106a(d)) is amended by adding at the end of the following:

“(17)(A) The number of infants identified under subsection (b)(2)(B)(ii).

“(B) The number of infants for whom a plan of safe care was developed under subsection (b)(2)(B)(iii).

“(C) The number of infants for whom a referral was made for appropriate services, including services for the affected family or caregiver, under subsection (b)(2)(B)(iii).”.

(b) REDESIGNATION.—Effective on May 29, 2017, section 106(d) of the Child Abuse Prevention and Treatment Act (42 U.S.C. 5106a(d)) is amended by redesignating paragraph (17) (as added by subsection (a)) as paragraph (18).

SEC. 5. MONITORING AND OVERSIGHT.

(a) AMENDMENT.—Title I of the Child Abuse Prevention and Treatment Act (42 U.S.C. 5101 et

seq.) is further amended by adding at the end the following:

“SEC. 114. MONITORING AND OVERSIGHT.

“The Secretary shall conduct monitoring to ensure that each State that receives a grant under section 106 is in compliance with the requirements of section 106(b), which—

“(1) shall—

“(A) be in addition to the review of the State plan upon its submission under section 106(b)(1)(A); and

“(B) include monitoring of State policies and procedures required under clauses (ii) and (iii) of section 106(b)(2)(B); and

“(2) may include—

“(A) a comparison of activities carried out by the State to comply with the requirements of section 106(b) with the State plan most recently approved under section 432 of the Social Security Act;

“(B) a review of information available on the Website of the State relating to its compliance with the requirements of section 106(b);

“(C) site visits, as may be necessary to carry out such monitoring; and

“(D) a review of information available in the State’s Annual Progress and Services Report most recently submitted under section 1357.16 of title 45, Code of Federal Regulations (or successor regulations).”.

(b) TABLE OF CONTENTS.—The table of contents in section 1(b) of the Child Abuse Prevention and Treatment Act (42 U.S.C. 5101 note) is amended by inserting after the item relating to section 113, the following:

“Sec. 114. Monitoring and oversight.”.

SEC. 6. RULE OF CONSTRUCTION.

Nothing in this Act, or the amendments made by this Act, shall be construed to authorize the Secretary of Health and Human Services or any other officer of the Federal Government to add new requirements to section 106(b) of the Child Abuse Prevention and Treatment Act (42 U.S.C. 5106a(b)), as amended by this Act.

The SPEAKER pro tempore. Pursuant to the rule, the gentleman from Pennsylvania (Mr. BARLETTA) and the gentlewoman from Massachusetts (Ms. CLARK) each will control 20 minutes.

The Chair recognizes the gentleman from Pennsylvania.

GENERAL LEAVE

Mr. BARLETTA. Mr. Speaker, I ask unanimous consent that all Members may have 5 legislative days in which to revise and extend their remarks and include extraneous materials on H.R. 4843.

The SPEAKER pro tempore. Is there objection to the request of the gentleman from Pennsylvania?

There was no objection.

Mr. BARLETTA. Mr. Speaker, I yield myself such time as I may consume.

I rise today in strong support of H.R. 4843, the Infant Plan of Safe Care Improvement Act.

Every 25 minutes in America, a baby is born suffering from opiate withdrawal. It is an eye-opening statistic. The more you consider what it really means, the more tragic it becomes.

Every 25 minutes a child enters the world having already been exposed to drugs. Every 25 minutes a newborn has to pay the price for something that he or she was defenseless against. Every 25 minutes another infant becomes a victim of the national opiate crisis.

These are the victims this bill will help protect. Federal policies, including the Child Abuse Prevention and

Treatment Act, or CAPTA, have long supported State efforts to identify, assess, and treat children who are victims of abuse and neglect.

The law provides States with resources to improve their child protective services systems if they assure the Department of Health and Human Services that they have put in place certain child welfare policies, for example, requiring healthcare providers to notify child protective service agencies when a child is born with prenatal illegal substance exposure and requiring the development of something known as a safe care plan to keep these newborns and their caregivers healthy and safe.

Last year a Reuters investigation examined the care that infants receive when they are born to parents struggling with opiate addiction. The investigation detailed the heartbreaking consequences those infants had to endure, consequences like suffering through the physical pain of withdrawal and, in the most shocking cases, terrible deaths.

It is hard to imagine that stories like these could be any more tragic. Unfortunately, they are because they should have and, in many cases, could have been prevented. As Reuters revealed, HHS is providing Federal funds to States that do not have the necessary child welfare policies in place.

In short, the law is not being properly followed and enforced and some of our most vulnerable children and families are slipping through the cracks.

That is why Representative CLARK and I worked with a number of our colleagues on both sides of the aisle and introduced the legislation before us today. The bill requires HHS to better ensure States are meeting their legal responsibilities when it comes to preventing and responding to child abuse and neglect.

Through a number of commonsense measures, it strengthens protections for infants born with illegal substance exposure, improves accountability related to the care of infants and their families, and ensures States will have the best practices for developing plans to keep infants and their caregivers healthy and safe.

As the House works this week to fight the opiate epidemic that is destroying communities and lives across the country, these are commonsense reforms that we all should embrace. By working together and advancing this legislation, we can help ensure these children, their mothers, and their families have the help they need and the care that they deserve.

I urge my colleagues to support this bipartisan legislation.

I reserve the balance of my time.

Ms. CLARK of Massachusetts. Mr. Speaker, I yield myself such time as I may consume.

I am pleased to join with Representative BARLETTA to introduce this important bill to help the most vulnerable victims of the opioid epidemic.

In every corner of our country, the opioid crisis is having a devastating effect. In Massachusetts, last year 1,379 people succumbed to fatal overdoses. Nationwide, drug overdoses are the leading cause of accidental death and we lose 129 people a day to fatal drug overdoses. This epidemic doesn't see race, gender, income, or political ideology and does not spare newborns and infants.

We know that every 25 minutes a baby is born suffering from opioid withdrawal symptoms. This is a condition known as neonatal abstinence syndrome. While there is no silver bullet to address this crisis in our country, this bill takes important steps to help.

This bill, the Infant Plan of Safe Care Improvement Act, strengthens and updates the care plans required by the Child Abuse Prevention and Treatment Act of 1974, also known as CAPTA.

CAPTA itself is up for reauthorization. This is just one portion of that important legislation where timely reauthorization will protect children in many different and difficult situations.

This legislation will help infants by ensuring that States have access to the best practices for establishing safe care plans for newborns with prenatal substance exposure.

It will also improve accountability by collecting data on the incidence of babies born exposed to drugs and the care that is provided to them and their families.

Perhaps most importantly, it will prevent tragedies by ensuring that babies and their moms and their families have the supports they need to be healthy and to build a future. We know that children have the best opportunity to thrive when their parents and caregivers are at the center of care.

I am grateful to the partnership with Representative BARLETTA and glad that we are taking this important step with this bill to ensure that the whole family is healthy and successful and supported.

I urge my colleagues to support this bill.

I reserve the balance of my time.

Mr. BARLETTA. Mr. Speaker, I yield 2 minutes to the gentleman from Minnesota (Mr. KLINE), the chairman of the Education and the Workforce Committee.

Mr. KLINE. Mr. Speaker, I thank Mr. BARLETTA for yielding the time and for his leadership on this issue.

Mr. Speaker, I rise today in strong support of the Infant Plan of Safe Care Improvement Act. Like many of the bills the House has slated to consider this week, this legislation will help address the growing opioid epidemic that has swept across America, focusing specifically on the most vulnerable among us.

This crisis has led to a number of painful consequences for individuals and families across the country. But few are as tragic as those suffered by infants born to parents struggling with an opioid addiction.

As is often the case with addiction, the parents' struggle affects those around them, including their newborns. In fact, according to a recent Reuters investigation mentioned earlier by Mr. BARLETTA, more than 130,000 babies born in the United States in the last decade entered the world addicted to drugs.

This report described the pain suffered by newborns going through withdrawal and told the stories of infants who actually lost their lives because of a terrible addiction. Many of the stories are too disturbing to even mention. But perhaps even more disturbing than the details is the fact that these deaths should have been prevented.

Current policies, including the Child Abuse Prevention and Treatment Act, are meant to prevent these tragedies from ever happening. The law is simple. If a State wants to receive Federal funding, then the State has to provide some basic assurances about their child welfare policies. The Department of Health and Human Services has a responsibility to ensure those policies are actually in place.

As we now know all too well, this important Federal law is not being properly followed and enforced. Earlier this year I sent a letter to the Department of Health and Human Services to better understand how it works with States to ensure they are meeting current child welfare requirements.

Not surprisingly, the Department passed the buck and suggested recent changes to the law somehow absolved them from their enforcement responsibilities, a disappointing response, to say the least.

Fortunately, thanks to the work of Mr. BARLETTA and Ms. CLARK, we are here today to consider our response to this preventable problem: the bill before us today. I appreciate their leadership in developing a bipartisan bill that will require the Department to do its job and assist States in their efforts to prevent and respond to child abuse and neglect.

I urge my colleagues to support this important legislation and to help ensure the most vulnerable victims of the opioid epidemic receive the help and care they desperately need.

Ms. CLARK of Massachusetts. Mr. Speaker, I yield 3 minutes to the gentleman from Virginia (Mr. SCOTT).

Mr. SCOTT of Virginia. Mr. Speaker, I rise in support of H.R. 4843, the Infant Plan of Safe Care Improvement Act.

Mr. Speaker, one of our highest national priorities should be to ensure that children have early quality opportunities to remove barriers to success in future life. But children born dependent on addictive substances face severe obstacles to overcome, and we know that many of these obstacles can be removed.

The Child Abuse Prevention and Treatment Act, CAPTA, is meant to support infants born addicted to these illegal substances. Unfortunately, nearly every State fails to follow the

CAPTA requirements, which work to ensure that children born of these circumstances have a plan of safe care that will help them grow up healthy.

H.R. 4843 is a strong positive first step to safeguard the well-being of our Nation's most vulnerable children. It will strengthen an infant's plan of safe care. It will help families and caregivers give the guidance and support they need in order to provide a nurturing environment for these children.

I welcome this bipartisan agreement to amend CAPTA as part of the comprehensive efforts to intervene and treat those affected by substance abuse. I therefore urge my colleagues to support H.R. 4843.

Ms. CLARK of Massachusetts. Mr. Speaker, I want to thank the gentleman from Virginia (Mr. SCOTT) for his leadership on this issue and so many involving the welfare and health of our children.

I reserve the balance of my time.

Mr. BARLETTA. Mr. Speaker, in response to an inquiry from the Education and the Workforce Committee Chairman KLINE and Chairman ROKITA of the Subcommittee on Early Childhood, Elementary, and Secondary Education, HHS indicated that it would request additional information from States regarding their child protective services notification processes and plans of safe care policies. HHS has started this process.

I include in the RECORD the HHS Children's Bureau Program Instruction requesting this additional information.

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES

ADMINISTRATION ON CHILDREN, YOUTH AND FAMILIES

1. Log No: ACYF-CB-PI-16-03
2. Issuance Date: April 13, 2016
3. Originating Office: Children's Bureau
4. Key Words: Title IV-B Child and Family Services Plan; Annual Progress and Services Report; Child Abuse Prevention and Treatment Act State Plan; Chafee Foster Care Independence Program; Education and Training Vouchers Program

PROGRAM INSTRUCTION

To: State Agencies, Territories, and Insular Areas Administering or Supervising the Administration of Title IV-B, subparts 1 and 2, and Title IV-E of the Social Security Act (the Act); Organization Designated by the Governor to Apply for Child Abuse and Neglect Prevention and Treatment Programs State Grant Funds; State Independent Living and Education and Training Voucher Coordinators.

Subject: June 30, 2016, submission of: (1) the second Annual Progress and Services Report (APSR) to the 2015-2019 Child and Family Services Plan (CFSP) for the Stephanie Tubbs Jones Child Welfare Services (CWS), the Promoting Safe and Stable Families (PSSF) and Monthly Caseworker Visit Grant programs; and the Chafee Foster Care Independence Program (CFCIP) and the Education and Training Vouchers (ETV) Program; (2) the Child Abuse Prevention and Treatment Act (CAPTA) State Plan update; and (3) the CFS-101, Part I, Annual Budget Request, Part II, Annual Summary of Child and Family Services, and Part III, Annual Expenditure Report—Title IV-B, subparts 1 and 2, CFCIP, and ETV.

Legal and Related References: Title IV-B, subparts 1 and 2, sections 421–425, 428, 430–438, and title IV-E, section 477 of the Act; sections 106 and 108 of CAPTA (42 U.S.C. 5106a, and 5106d.), as amended by Public Law (P.L.) 111–320, the CAPTA Reauthorization Act of 2010; the Indian Child Welfare Act. (ICWA) of 1978 (P.L. 95–608); the Indian Self-Determination and Education Assistance Act (P.L. 93–638); 45 CFR Parts 1355 and 1357; The Fostering Connections to Success and Increasing Adoptions Act of 2008 (P.L. 110–351); the Patient Protection and Affordable Care Act (P.L. 111–148); the Child and Family Services Improvement and Innovation Act of 2011 (P.L. 112–34); the Preventing Sex Trafficking and Strengthening Families Act (P.L. 113–183); and the Justice for Victims of Trafficking Act of 2015 (P.L. 114–22).

Purpose: This Program Instruction (PI) provides guidance to states, territories, and insular areas (hereafter “states,” unless otherwise noted) on actions they are required to take to receive their allotments for federal fiscal year (FY) 2017 (subject to the availability of appropriations) authorized under title IV-B, subparts 1 and 2, section 106 of CAPTA, CFICIP and ETV programs.

This PI summarizes the actions required in completion and submission of (1) the second APSR to the 2015–2019 CFSP, (2) the CAPTA Update, and (3) the CFS–101, Parts I, II, and III.

A separate PI addresses requirements for tribes, tribal consortia, and tribal organizations applying for funding under these programs.

We note that the title IV-B programs (subparts 1 and 2) are required to be reauthorized periodically by the Congress. The Child and Family Services Improvement and Innovation Act, signed into law on September 30, 2011, last reauthorized funding for these programs for five years through FY 2016. The guidance provided in this PI assumes that the programs will be extended without significant changes. Should new legislation be enacted that would affect the steps that states must take to receive funding for FY 2017, additional guidance will be provided.

INFORMATION: ORGANIZATION OF THE PROGRAM INSTRUCTION

Section A. Background

Section B. Continued Integration of the Child and Family Services Review Process with the CFSP/APSR

Section C. Requirements for 2017 APSR (Due June 30, 2016)

Section D. CAPTA State Plan Requirements and Update

Section E. Chafee Foster Care Independence Program

Section F. Updates to Targeted Plans within the 2015–2019 CFSP

Section G. Statistical and Supporting Information

Section H. Financial Information

Section I. Instructions for the Submission of the 2017 APSR for States, Puerto Rico, and the District of Columbia

Section J. Submittal Rule for Insular Areas

Attachments

SECTION D. CHILD ABUSE PREVENTION AND TREATMENT ACT (CAPTA) STATE PLAN REQUIREMENTS AND UPDATE

States submitted a plan for the CAPTA State Grant on June 30, 2011. Once approved by CB, the CAPTA State Plan remains in effect for the duration of the state’s participation in the CAPTA State Grant program. However, section 108(e) of CAPTA requires states receiving a CAPTA State Grant to submit an annual report describing its use of the grant. To facilitate coordination between the CAPTA State Plan and the title IV-B plan, as required by section 106(b)(2)(A) of

CAPTA, CB requires that the annual report describing use of CAPTA funds be submitted with the APSR. In addition, CB encourages states to use CAPTA State Grant funds in a manner that aligns with and supports their overall goals for the delivery and improvement of child welfare services, as they continue to implement their 2015–2019 CFSP and APSR goals.

IN THE STATE’S 2017 ANNUAL CAPTA REPORT

Describe substantive changes, if any, to state law or regulations, including laws and regulations relating to the prevention of child abuse and neglect, that could affect the state’s eligibility for the CAPTA State Grant (section 106(b)(1)(C)(i) of CAPTA). The state must also include an explanation from the State Attorney General as to why the change would, or would not, affect eligibility. (Note: States do not have to notify ACF of statutory changes or submit them for review if they are not substantive and would not affect eligibility.)

Describe any significant changes from the state’s previously approved CAPTA plan in how the state proposes to use funds to support the 14 program areas enumerated in section 106(a) of CAPTA. (See section 106(b)(1)(C)(ii) of CAPTA.)

Describe how CAPTA State Grant funds were used, alone or in combination with other federal funds, in support of the state’s approved CAPTA plan to meet the purposes of the program since the state submitted its last update on June 30, 2015 (section 108(e) of CAPTA).

Submit a copy of the annual report(s) from the citizen review panels and a copy of the state agency’s most recent response(s) to the panels and state and local child protective services agencies, as required by section 106(c)(6) of CAPTA.

Update on Services to Substance-Exposed Newborns

In addition to the information outlined above, CB requests an update from states on implementation of CAPTA provisions relating to substance-exposed newborns. Sections 106(b)(2)(B)(ii) and (iii) of CAPTA require states to have a statewide program relating to child abuse and neglect that includes:

—policies and procedures (including appropriate referrals to child protection service systems and for other appropriate services) to address the needs of infants born with and identified as being affected by illegal substance abuse or withdrawal symptoms resulting from prenatal drug exposure, or a Fetal Alcohol Spectrum Disorder, including a requirement that health care providers involved in the delivery or care of such infants notify the child protective services system of the occurrence of such condition of such infants, except that such notification shall not be construed to—

I. establish a definition under Federal law of what constitutes child abuse or neglect; or

II. require prosecution for any illegal action.

—the development of a plan of safe care for the infant born and identified as being affected by illegal substance abuse or withdrawal symptoms or Fetal Alcohol Spectrum Disorder.

The most recent national data on child abuse and neglect from the National Child Abuse and Neglect Data System (NCANDS) showed increases in FY 2014 compared to FY 2013 in the number of children referred to CPS, the number of children who received a CPS investigation or alternative response and the number of children who were determined to be victims of child abuse and neglect. While increases nationally were relatively small, some states saw increases of 15 percent or more in the number of children determined to be victims. Nationally, states

reported to NCANDS that more than one-quarter (27.4%) of victims were younger than 3 years and that the victimization rate was highest for children younger than 1 year (24.4 per 1,000 children in the population of the same age).

State commentary and data on risk factors associated with reports of abuse and neglect indicate that caretaker alcohol and drug abuse are significant factors associated with reports of child abuse and neglect. For states reporting to NCANDS, 9.2 percent of victims and 3.8 percent of nonvictims were reported with the alcohol abuse caregiver risk factor and 26.0 percent of victims and 8.2 percent of nonvictims were reported with the drug abuse caregiver risk factor. Beyond reports to NCANDS, increasing public attention is being paid to the significant effect of opioid addiction on individuals, families and communities.

In light of these trends, states are requested to provide an update on their implementation of these provisions of CAPTA.

IN THE 2017 CAPTA ANNUAL REPORT

Describe the policies and procedures the state has in place to address the needs of infants born with and identified as being affected by illegal substance abuse or withdrawal symptoms resulting from prenatal drug exposure, or a Fetal Alcohol Spectrum Disorder, including a requirement that health care providers involved in the delivery or care of such infants notify the child protective services system of the occurrence of such condition of such infants (section 106(b)(2)(B)(ii) of CAPTA). We note that such notification should occur in any instance in which an infant is demonstrating withdrawal symptoms due to prenatal drug exposure, whether the drugs were obtained legally or illegally.

Describe the state’s policies and procedures for developing a plan of safe care for infants born and identified as being affected by illegal substance abuse or withdrawal symptoms or Fetal Alcohol Spectrum Disorder (section 106(b)(2)(B)(iii)). Describe which agency or entity is responsible for developing a plan of safe care, how it is monitored and how follow-up is conducted to ensure the safety of these infants.

Describe any technical assistance the state needs to improve practice and implementation in these areas, including how to support mothers and families, as well as infants, through a plan of safe care.

Amendments to CAPTA made by P.L. 114–22, the Justice for Victims of Trafficking Act of 2015:

As noted in Section A of this PI, the Justice for Victims of Trafficking Act of 2015 included amendments to CAPTA that become effective on May 29, 2017.

The law amended CAPTA’s definition of “child abuse and neglect” and “sexual abuse” by adding a special rule that a child shall be considered a victim of ‘child abuse and neglect’ and of ‘sexual abuse’ if the child is identified, by a state or local agency employee of the state or locality involved, as being a victim of sex trafficking or severe forms of trafficking (as defined in sections 103(9)(A) and (10) of the Trafficking Victims Protection Act (TVPA)).

—As defined in section 103(10) of TVPA, “sex trafficking” means the recruitment, harboring, transportation, provision, obtaining, patronizing, or soliciting of a person for the purpose of a commercial sex act.

—As defined in section 103(9)(A) of TVPA, “severe forms of trafficking in persons” means sex trafficking in which a commercial sex act is induced by force, fraud, or coercion, or in which the person induced to perform such act has not attained 18 years of age.

The amendments also specify that, notwithstanding the general definition of a “child” in CAPTA, a state may opt to apply the sex trafficking portion of the definition of “child abuse and neglect” and “sexual abuse” to a person who has not attained age 24.

In addition to expanding the definitions of child abuse and neglect and sexual abuse applicable to the CAPTA State Grant, the law added new requirements to the list of assurances a state must provide to receive a CAPTA State Grant. Each state will now need to provide an assurance that the state has in effect and is operating a statewide program, relating to child abuse and neglect that includes:

—provisions and procedures regarding identifying and assessing all reports involving known or suspected child sex trafficking victims (as defined in section 103(10) of the Trafficking Victims Protection Act of 2000 (TVPA) (22 U.S.C. 7102)); and

—provisions and procedures for training CPS workers about identifying, assessing and providing comprehensive services to children who are sex trafficking victims, including efforts to coordinate with state law enforcement, juvenile justice, and social service agencies such as runaway and homeless youth shelters.

Finally, the amendments add to the list of data elements a state must annually report, to the maximum extent practicable, as a condition of receiving their CAPTA State Grant. Beginning with submission of FY 2018 data, the CB expects to ask states to report the number of children who are victims of sex trafficking. The CB anticipates collecting this information through NCANDS. Additional information on NCANDS data reporting will be provided separately from this PI.

IN THE 2017 CAPTA ANNUAL REPORT

Describe the steps that the state is taking or will need to take to address the amendments to CAPTA relating to sex trafficking in order to implement those provisions by May 29, 2017.

Provide an assessment of the changes the state will need to make to its laws, policies or procedures to ensure that victims of sex trafficking, as defined in sections 103(9)(A) and (10) of the TVPA, are considered victims of child abuse and neglect and sexual abuse. We note that it is likely that some states will need to make changes to state laws to come into compliance. Indicate whether the state is electing to apply the sex trafficking portion of the definition of “child abuse and neglect” and “sexual abuse” to persons who are over age 18 but have not yet attained age 24.

Provide an update on the state’s progress and planned activities in the coming year to develop provisions and procedures regarding identifying and assessing all reports involving known or suspected child sex trafficking victims.

Provide an update on the state’s progress and planned activities in the coming year to develop provisions and procedures for training CPS workers about identifying, assessing and providing comprehensive services to children who are sex trafficking victims, including efforts to coordinate with state law enforcement, juvenile justice, and social service agencies such as runaway and homeless youth shelters.

In addition, no later than May 29, 2017, states must submit the new CAPTA assurances relating to sex trafficking. These assurances are to be provided in the form of a certification signed by the State’s Governor (see Attachment F). The signed assurance may be returned with the 2017 CAPTA Annual Report submitted with the APSR due

June 30, 2016, if the state is ready to submit them by that time. If not, the state may submit the certification at a later date, but no later than May 29, 2017.

If the state anticipates it will be unable to submit these assurances by May 29, 2017, provide an explanation as to why that is the case.

Identify any technical assistance needs the state has identified relating to implementation of the amendments to CAPTA made by the Justice for Victims of Trafficking Act of 2015.

States must include all required information indicated above in their 2017 CAPTA Annual Report to be submitted as part of the 2017 APSR. Missing or incomplete information will result in the withholding of CAPTA funds until such time as approval can be granted by CB. Please note that compliance with the eligibility requirements for a CAPTA State Grant program is a prerequisite for eligibility to receive funding under the Children’s Justice Act State Grant Program, authorized by section 107(a) of CAPTA.

Finally, to facilitate ongoing communication between CB and states on issues relating to CAPTA and child abuse and neglect, please submit the name, address, and email for the state CAPTA coordinator (also known as the State Liaison Officer) or where this information can be found on the state’s website.

Mr. BARLETTA. Mr. Speaker, I yield 2 minutes to the gentleman from Pennsylvania (Mr. THOMPSON).

Mr. THOMPSON of Pennsylvania. Mr. Speaker, I rise in support of H.R. 4843, the Infant Plan of Safe Care Improvement Act. Introduced by my colleague and friend, Mr. BARLETTA, this bill takes steps to strengthen protections for our Nation’s most precious and vulnerable population: infants and children.

In Pennsylvania alone, nearly 8,000 infants were diagnosed with neonatal abstinence syndrome between 2010 and 2014, and that number is increasing every day.

□ 1545

Neonatal abstinence syndrome, or NAS, is defined by the National Institutes of Health as a set of problems that occurs in a newborn who was exposed to addictive opiate drugs while in the mother’s womb. Infants experiencing NAS can endure fevers, rapid breathing, seizures, and even death.

While States are currently required to certify to the Department of Health and Human Services that they have developed a safe care plan for infants born under these conditions, it has come to light that HHS does not independently verify State plans unless there is a specific reason to do so.

My cosponsorship of this bill is a direct assertion of my belief that our Nation’s infants deserve more from legislators, Federal agencies, and the administration. This valuable legislation will help clarify the intent of safe care plans, provide States with best practices for keeping infants safe, and improve accountability across the board.

Mr. Speaker, every district in every State in the United States has been affected by what has been referred to as a substance abuse epidemic. While

there is hope in the fact that the House is taking up more than a dozen opioid bills this week, we must not lose sight of the long road ahead of us.

I urge my colleagues to support H.R. 4843 and join the fight to defend our Nation’s children.

Ms. CLARK of Massachusetts. Mr. Speaker, I reserve the balance of my time.

Mr. BARLETTA. Mr. Speaker, I yield 1 minute to the gentleman from Georgia (Mr. CARTER).

Mr. CARTER of Georgia. I thank the gentleman for yielding.

Mr. Speaker, I rise in support of H.R. 4843, the Infant Plan of Safe Care Improvement Act, because when newborn infants are tragically affected by illegal substance abuse, they deserve the best possible care and treatment.

The Child Abuse Prevention and Treatment Act, which was enacted in 1974, set the groundwork for Federal coordination in addressing the issues of neglect and child abuse that is present in our country. H.R. 4843 builds on that by updating and improving existing laws to ensure that States are utilizing Federal dollars in a safe and effective way in providing care for children who suffer from illegal substance abuse, withdrawal symptoms, or fetal alcohol spectrum disorders.

Under this bill, infants who are born with having had exposure to illegal substances will have strengthened protections through improved safe care plans and best practices. As a lifelong pharmacist and healthcare professional, I have seen firsthand families as they struggle to provide the care that is needed by infants who suffer from these conditions.

I commend Congressman BARLETTA and the Committee on Education and the Workforce for their leadership on this important legislation, and I encourage my colleagues to support this bill so we can care for precious newborn infants across the country.

Ms. CLARK of Massachusetts. Mr. Speaker, I reserve the balance of my time.

Mr. BARLETTA. Mr. Speaker, I yield 2 minutes to the gentleman from Michigan (Mr. WALBERG).

Mr. WALBERG. I thank Mr. BARLETTA for what he is doing here today.

Mr. Speaker, I rise as a proud original cosponsor of H.R. 4843, the Infant Plan of Safe Care Improvement Act, which takes important steps in protecting our most vulnerable citizens from the damaging effects of addiction.

As communities in Michigan and around the country fight against the growing opioid epidemic, it is important for stakeholders at all levels to work together to reverse the trends of addiction and find solutions for the families who are swept up by this public health crisis. Tragically, we know that, every 25 minutes, a baby is born in our country having been exposed to drugs and suffering from opioid withdrawal.

A Federal law is already in place to help ensure these newborns have the necessary protections and care once they are born, but the system is still failing some of our most defenseless children and their families. Recent investigations have uncovered the failure of the Department of Health and Human Services to effectively monitor the implementation of State-level plans to prevent child abuse and neglect, and some States are still receiving taxpayer dollars despite their not following the laws that are in place to ensure the safe care of newborns.

The bill we are considering today would require HHS to review and confirm that States are properly following and enforcing the policies that are outlined in Federal law to protect infants who are affected by drug dependency. It also strengthens protections for infants who have been exposed to illegal substances, and it ensures best practices are disseminated to States for developing plans to keep infants and their caregivers safe.

Mr. Speaker, we must do better to provide these babies and their mothers with the help they need.

I thank my colleagues, Representatives BARLETTA and CLARK, for their leadership in crafting this bipartisan bill, and I encourage all of my colleagues to vote in support.

Ms. CLARK of Massachusetts. Mr. Speaker, I yield myself the balance of my time.

Again, many thanks to the gentleman from Pennsylvania for his partnership and his leadership on this issue.

Mr. Speaker, I am particularly proud that this legislation takes a comprehensive look at not only protecting our newborns and infants but at putting the supports in place to ensure that their mothers and fathers and grandparents and families have the services they need and deserve to have the best outcomes for these babies and children and their family units. I am very pleased that this bill is before us today, and I urge my colleagues to support this bill.

Mr. Speaker, I yield back the balance of my time.

Mr. BARLETTA. Mr. Speaker, I yield myself the remainder of my time.

In closing, I reiterate the purpose and the importance of this legislation. No government, Federal or State, should be allowed to skirt its responsibilities on the taxpayers' dime, especially when those responsibilities involve the health and safety of children. We have seen what can happen when they do, and none of us should be okay with allowing those kinds of consequences to continue. Making sure they don't is a responsibility that we all share.

In the end, this bill is not about pointing fingers or about placing blame. It is about the kids who need help, not only the infants who are affected by the opioid crisis, but all of the victims of child abuse and neglect.

This bill is about ensuring that we work together to strengthen the protections for our country's most vulnerable children and their families.

I urge my colleagues to support this legislation.

Mr. Speaker, I yield back the balance of my time.

Ms. JACKSON LEE. Mr. Speaker, I rise in support of H.R. 4843, the "Improving Safe Care for the Prevention of Infant Abuse and Neglect Act," approved by the Education and the Workforce Committee.

In the past decade and a half, the growth in the number of physicians prescribing opioids to help patients deal with pain from surgeries, dental work and chronic conditions has resulted in an increasing number of patients becoming dependent on the powerful and highly addictive painkillers—with patients not only abusing the use of those painkillers but often turning to heroin once their opioid prescription ended.

The Centers for Disease Control and Prevention reports that nearly 259 million opioid prescriptions were written in 2012, more than enough for every adult in the United States, and it is estimated that in 2013 nearly 4.5 million people in the United States without a valid medical need were using prescription painkillers.

The Health and Human Services Department estimates that the number of unintentional overdose deaths from prescription painkillers almost quadrupled between 1999 and 2013 and that abuse of prescription opioids now kills nearly 30,000 Americans each year.

The "Child Abuse Prevention and Treatment Act" (CAPTA; PL 93-247) was enacted in 1974 to coordinate federal and state efforts to prevent and respond to child abuse and neglect.

The law provides states with federal funds to improve their child protective services systems; however, to receive the funds, states are supposed to implement certain child welfare policies.

CAPTA was amended in 2003 by the "Keeping Children and Families Safe Act," (PL 108-36) that requires health care providers to notify child protective services agencies when a child is born with prenatal substance exposure or addiction.

The protective services agencies are supposed to develop a "safe care plan" to protect the babies.

The law explicitly states that it is meant to protect drug-dependent newborns and not to punish mothers who are dealing with addiction.

In December 2015, Reuters published the first in a series of articles documenting the failure of health care providers and state child protective services to help these infants.

Based on information from 2013, the latest year for which data are available, there were 27,000 cases of drug-dependent babies born that year, up from 5,000 in 2003 when CAPTA's notification requirements were enacted.

However, more than 30 states do not require doctors to report cases of infants born with addictions.

Some states have interpreted the law to mean that only addiction to illegal substances need be reported.

This means that if the mother is taking prescribed drugs, even if the infant is born with

an addiction, they do not require that the addiction be reported.

In addition, even in states where infants born with drug dependencies must be reported to child protective services agencies, these agencies often take no steps toward developing a safe care plan for these infants.

As a result, infants die because of neglect or abuse in their homes.

Reuters identified 110 fatalities since 2010 of babies and toddlers whose mother used opioids during pregnancy and who later died from causes that could have been prevented.

I recognize that infant mortality is at unprecedentedly high rates in our nation.

Seeking to right the same wrongs as H.R. 4843, the "Improving Safe Care for the Prevention of Infant Abuse and Neglect Act," I introduced the "Stop Infant Mortality and Recidivism Reduction Act of 2016," or the "SIMARRA Act," which will help the Federal Bureau of Prisons to improve the effectiveness and efficiency of the Federal prison system for pregnant offenders, by establishing a pilot program of critical-stage, developmental nurseries in Federal prisons for children born to inmates.

It is time that our nation recognizes a long-persistent need to break the cycle of generational, institutional incarceration amongst mothers serving time for non-violent crimes and the children they birth behind prison bars.

H.R. 5130, the "SIMARRA Act of 2016," gives those infants born to incarcerated mothers a chance to succeed in life.

"SIMARRA" is not merely yet another second chance program, demanding leniency from the criminal justice system.

Instead, H.R. 5130 asks our national criminal justice system what it can do for those young Americans born and relegated to a life of nearly impossible odds of survival.

"SIMARRA" provides that first chance—a first chance for American infants—that many of their mothers, born themselves to mothers behind bars, never received.

H.R. 4843 requires the Health and Human Services Department (HHS) to review and confirm that states have enacted and implemented the child protection policies required by the Child Abuse and Treatment Act, including the requirement that addicted newborns are cared for.

Specifically, in order to receive a grant for its child protective services system, a state must certify that it has a law or statewide program for child abuse and neglect that includes a safe care plan for an infant born with substance addiction after the infant is released from the care of health care providers.

HHS must monitor the compliance of each state that receives a grant.

Under the measure, states must also develop and implement monitoring systems to follow the safe care plans and determine whether local entities are providing referrals to, and delivery of, appropriate services for the infant and the affected family or caregiver.

States must include in their annual data reports the total number of affected infants for whom a safe care plan was developed and for whom there were referrals to appropriate services, including services for the affected family or caregiver.

The bill requires HHS to maintain and disseminate information regarding the requirements and best practices relating to the development of safe care plans for infants born with substance addiction.

H.R. 4843, the "Improving Safe Care for the Prevention of Infant Abuse and Neglect Act," is a valuable piece of legislation that I encourage my colleagues to support.

Additionally, I urge my colleagues to join me in sponsoring and supporting all legislation targeting the improvement of care for the prevention of infant abuse and neglect, such as H.R. 5130, the "Stop Infant Mortality and Recidivism Reduction Act of 2016" or the "SIMARRA Act."

The SPEAKER pro tempore. The question is on the motion offered by the gentleman from Pennsylvania (Mr. BARLETTA) that the House suspend the rules and pass the bill, H.R. 4843, as amended.

The question was taken.

The SPEAKER pro tempore. In the opinion of the Chair, two-thirds being in the affirmative, the yeas have it.

Mr. BARLETTA. Mr. Speaker, on that I demand the yeas and nays.

The yeas and nays were ordered.

The SPEAKER pro tempore. Pursuant to clause 8 of rule XX, further proceedings on this motion will be postponed.

ANNOUNCEMENT BY THE SPEAKER PRO TEMPORE

The SPEAKER pro tempore. Pursuant to clause 8 of rule XX, proceedings will resume on questions previously postponed.

Votes will be taken in the following order:

Passage of H.R. 4641, and suspending the rules and passing H.R. 4843.

The first electronic vote will be conducted as a 15-minute vote. The second electronic vote will be conducted as a 5-minute vote.

ESTABLISHING PAIN MANAGEMENT BEST PRACTICES INTER-AGENCY TASK FORCE

The SPEAKER pro tempore. The unfinished business is the vote on passage of the bill (H.R. 4641) to provide for the establishment of an inter-agency task force to review, modify, and update best practices for pain management and prescribing pain medication, and for other purposes, on which the yeas and nays were ordered.

The Clerk read the title of the bill.

The SPEAKER pro tempore. The question is on the passage of the bill.

The vote was taken by electronic device, and there were—yeas 412, nays 4, not voting 17, as follows:

[Roll No. 184]

YEAS—412

Abraham, Adams, Aderholt, Aguilar, Allen, Amodei, Ashford, Babin, Barletta, Barr, Barton, Bass, Beatty, Becerra, Benishek, Bera, Beyer, Bilirakis, Bishop (GA), Bishop (MI), Bishop (UT), Black, Blackburn, Blum, Blumenauer, Bonamici, Bost, Boyle, Brendan F., Brady (PA), Brady (TX), Brat, Bridenstine, Brooks (IN), Brown (FL), Brownley (CA), Buchanan, Buck, Bucshon, Frankel (FL), Frelinghuysen, Fudge, Gabbard, Gallego, Garamendi, Garrett, Gibbs, Gibson, Gohmert, Gosar, Gowdy, Graham, Kinzinger (IL), Kline, Knight, Kuster, LaHood, LaMalfa, Lamborn, Lance, Langevin, Larsen (WA), Larson (CT), Lawrence, Lee, Levin, Lewis, Lieu, Ted, Lipinski, LoBiondo, Loebsack, Lofgren, Long, Loudermilk, Love, Lowenthal, Lowey, Lucas, Luetkemeyer, Lujan Grisham (NM), Lujan, Ben Ray (NM), Lummis, Lynch, MacArthur, Price (NC), Tom, Quigley, Rangel, Ratcliffe, Reed, Reichert, Renacci, Ribble, Rice (NY), Rice (SC), Richmond, Rigell, Roby, Roe (TN), Rogers (AL), Rogers (KY), Rohrabacher, Rokita, Rooney (FL), Ros-Lehtinen, Roskam, Ross, Rothfus, Rouzer, Roybal-Allard, Royce, Ruiz, Ruppertsberger, Rush, Russell, Ryan (OH), Salmon, Sanchez, Linda T., Sanchez, Loretta, Amash, Brooks (AL), Boustany, Cartwright, Castor (FL), Collins (GA), Fattah, Fincher, Franks (AZ), Goodlatte, Hastings, Herrera Beutler, Latta, Maloney, Carolyn, Mooney (WV), Pitts, Sewell (AL), Takai, Whitfield, Walorski, Walters, Mimi, Walz, Wasserman, Schultz, Waters, Maxine, Watson Coleman, Weber (TX), Webster (FL), Welch, Wenstrup, Westerman, Westmoreland, Williams, Wilson (FL), Wilson (SC), Wittman, Womack, Woodall, Yarmuth, Yoder, Yoho, Young (AK), Young (IA), Young (IN), Zeldin, Zinke

Burgess, Bustos, Butterfield, Byrne, Calvert, Capps, Capuano, Cárdenas, Carney, Carson (IN), Carter (GA), Carter (TX), Castro (TX), Chabot, Chaffetz, Chu, Judy, Cicilline, Clark (MA), Clarke (NY), Clawson (FL), Clay, Cleaver, Clyburn, Coffman, Cohen, Cole, Collins (NY), Comstock, Conaway, Connolly, Conyers, Cook, Cooper, Costa, Costello (PA), Courtney, Cramer, Crawford, Crenshaw, Crowley, Cuellar, Culberson, Cummings, Curbelo (FL), Davis (CA), Davis, Danny, Davis, Rodney, DeFazio, DeGette, Delaney, DeLauro, DeBene, Denham, Dent, DeSantis, DeSaulnier, DesJarlais, Deutch, Diaz-Balart, Dingell, Doggett, Dold, Donovan, Doyle, Michael F., Duckworth, Duffy, Duncan (SC), Duncan (TN), Edwards, Ellison, Ellmers (NC), Emmer (MN), Engel, Eshoo, Esty, Farenthold, Farr, Fitzpatrick, Fleischmann, Fleming, Flores, Forbes, Fortenberry, Foster, Foxx, Frankel (FL), Frelinghuysen, Fudge, Gabbard, Gallego, Garamendi, Garrett, Gibbs, Gibson, Gohmert, Gosar, Gowdy, Graham, Granger, Graves (GA), Graves (LA), Graves (MO), Grayson, Green, Al, Green, Gene, Griffith, Grijalva, Grothman, Guinta, Guthrie, Gutiérrez, Hahn, Hanna, Hardy, Harper, Harris, Hartzler, Heck (NV), Heck (WA), Hensarling, Hice, Jody B., Higgins, Hill, Himes, Hinojosa, Holding, Honda, Hoyer, Hudson, Huelskamp, Huffman, Huizenga (MI), Hultgren, Hunter, Hurd (TX), Hurt (VA), Israel, Issa, Jackson Lee, Jeffries, Jenkins (KS), Jenkins (WV), Johnson (GA), Johnson (OH), Johnson, E. B., Johnson, Sam, Jolly, Jones, Jordan, Joyce, Kaptur, Katko, Keating, Kelly (IL), Kelly (MS), Kelly (PA), Kennedy, Kildee, Kilmer, Kind, King (IA), King (NY), Kinzinger (IL), Kirkpatrick, Kline, Knight, Kuster, LaHood, LaMalfa, Lamborn, Lance, Langevin, Larsen (WA), Larson (CT), Lawrence, Lee, Levin, Lewis, Lieu, Ted, Lipinski, LoBiondo, Loebsack, Lofgren, Long, Loudermilk, Love, Lowenthal, Lowey, Lucas, Luetkemeyer, Lujan Grisham (NM), Lujan, Ben Ray (NM), Lummis, Lynch, MacArthur, Maloney, Sean, Marchant, Marino, Matsui, McCarthy, McCaul, McClintock, McCollum, McDermott, McGovern, McHenry, McKinley, McMorris, Rodgers, McNerney, McSally, Meadows, Meehan, Meeks, Meng, Messer, Mica, Miller (FL), Miller (MI), Moolenaar, Moore, Moulton, Mullin, Mulvaney, Murphy (FL), Murphy (PA), Nadler, Napolitano, Neal, Neugebauer, Newhouse, Noem, Nolan, Norcross, Nugent, Nunes, O'Rourke, Olson, Palazzo, Pallone, Palmer, Pascrell, Paulsen, Payne, Pearce, Pelosi, Perlmutter, Perry, Peters, Peterson, Pingree, Pittenger, Pocan, Poe (TX), Poliquin, Polis, Pompeo, Posey, Price (NC), Tom, Quigley, Rangel, Ratcliffe, Reed, Reichert, Renacci, Ribble, Rice (NY), Rice (SC), Richmond, Rigell, Roby, Roe (TN), Rogers (AL), Rogers (KY), Rohrabacher, Rokita, Rooney (FL), Ros-Lehtinen, Roskam, Ross, Rothfus, Rouzer, Roybal-Allard, Royce, Ruiz, Ruppertsberger, Rush, Russell, Ryan (OH), Salmon, Sanchez, Linda T., Sanchez, Loretta, Sanford, Sarbanes, Scalise, Schakowsky, Schiff, Schrader, Schweikert, Scott (VA), Scott, Austin, Scott, David, Sensenbrenner, Serrano, Sessions, Sherman, Shimkus, Shuster, Simpson, Sinema, Sires, Slaughter, Smith (MO), Smith (NE), Smith (NJ), Smith (TX), Smith (WA), Speier, Stefanik, Stewart, Stivers, Stutzman, Swalwell (CA), Takano, Thompson (CA), Thompson (MS), Thompson (PA), Thornberry, Tiberi, Tipton, Titus, Tonko, Torres, Trott, Tsongas, Turner, Upton, Valadao, Van Hollen, Vargas, Veasey, Vela, Velázquez, Visclosky, Wagner, Walberg, Walden, Walker, Amash, Brooks (AL), Boustany, Cartwright, Castor (FL), Collins (GA), Fattah, Fincher, Franks (AZ), Goodlatte, Hastings, Herrera Beutler, Latta, Maloney, Carolyn, Mooney (WV), Pitts, Sewell (AL), Takai, Whitfield, Walorski, Walters, Mimi, Walz, Wasserman, Schultz, Waters, Maxine, Watson Coleman, Weber (TX), Webster (FL), Welch, Wenstrup, Westerman, Westmoreland, Williams, Wilson (FL), Wilson (SC), Wittman, Womack, Woodall, Yarmuth, Yoder, Yoho, Young (AK), Young (IA), Young (IN), Zeldin, Zinke

NAYS—4

Amash, Brooks (AL), Labrador, Massie

NOT VOTING—17

Boustany, Cartwright, Castor (FL), Collins (GA), Fattah, Fincher, Franks (AZ), Goodlatte, Hastings, Herrera Beutler, Latta, Maloney, Carolyn, Mooney (WV), Pitts, Sewell (AL), Takai, Whitfield

□ 1615

Mr. ELLISON, Ms. WASSERMAN SCHULTZ, and Mr. ENGEL changed their vote from "nay" to "yea."

So the bill was passed.

The result of the vote was announced as above recorded.

A motion to reconsider was laid on the table.

Stated for:

Mr. BOUSTANY. Mr. Speaker, on rollcall No. 184, I was unavoidably detained. Had I been present, I would have voted "yes."

Mr. GOODLATTE. Mr. Speaker, on rollcall No. 184, I was unavoidably detained. Had I been present, I would have voted "yea."

INFANT PLAN OF SAFE CARE IMPROVEMENT ACT

The SPEAKER pro tempore (Mr. VALADAO). The unfinished business is the vote on the motion to suspend the rules and pass the bill (H.R. 4843) to amend the Child Abuse Prevention and Treatment Act to require certain monitoring and oversight, and for other purposes, as amended, on which the yeas and nays were ordered.

The Clerk read the title of the bill.

The SPEAKER pro tempore. The question is on the motion offered by the gentleman from Pennsylvania (Mr. BARLETTA) that the House suspend the rules and pass the bill, as amended.

This is a 5-minute vote.

The vote was taken by electronic device, and there were—yeas 421, nays 0, not voting 12, as follows:

[Roll No. 185]

YEAS—421

Abraham, Adams, Aderholt, Aguilar, Allen, Amodei, Ashford, Babin, Becerra, Benishek, Bera, Beyer, Bilirakis, Bishop (GA), Bishop (MI), Bishop (UT), Black, Blackburn, Blum, Blumenauer, Bonamici, Bost, Boyle, Brendan F., Brady (PA), Brady (TX), Brat, Bridenstine, Brooks (IN), Brown (FL), Brownley (CA), Buchanan, Buck, Bucshon, Frankel (FL), Frelinghuysen, Fudge, Gabbard, Gallego, Garamendi, Garrett, Gibbs, Gibson, Gohmert, Gosar, Gowdy, Graham, Kinzinger (IL), Kline, Knight, Kuster, LaHood, LaMalfa, Lamborn, Lance, Langevin, Larsen (WA), Larson (CT), Lawrence, Lee, Levin, Lewis, Lieu, Ted, Lipinski, LoBiondo, Loebsack, Lofgren, Long, Loudermilk, Love, Lowenthal, Lowey, Lucas, Luetkemeyer, Lujan Grisham (NM), Lujan, Ben Ray (NM), Lummis, Lynch, MacArthur, Price (NC), Tom, Quigley, Rangel, Ratcliffe, Reed, Reichert, Renacci, Ribble, Rice (NY), Rice (SC), Richmond, Rigell, Roby, Roe (TN), Rogers (AL), Rogers (KY), Rohrabacher, Rokita, Rooney (FL), Ros-Lehtinen, Roskam, Ross, Rothfus, Rouzer, Roybal-Allard, Royce, Ruiz, Ruppertsberger, Rush, Russell, Ryan (OH), Salmon, Sanchez, Linda T., Sanchez, Loretta, Amash, Brooks (AL), Boustany, Cartwright, Castor (FL), Collins (GA), Fattah, Fincher, Franks (AZ), Goodlatte, Hastings, Herrera Beutler, Latta, Maloney, Carolyn, Mooney (WV), Pitts, Sewell (AL), Takai, Whitfield, Walorski, Walters, Mimi, Walz, Wasserman, Schultz, Waters, Maxine, Watson Coleman, Weber (TX), Webster (FL), Welch, Wenstrup, Westerman, Westmoreland, Williams, Wilson (FL), Wilson (SC), Wittman, Womack, Woodall, Yarmuth, Yoder, Yoho, Young (AK), Young (IA), Young (IN), Zeldin, Zinke

Barletta	Duckworth	Kinzinger (IL)	Polis	Scalise	Tsongas
Barr	Duffy	Kirkpatrick	Pompeo	Schakowsky	Turner
Barton	Duncan (SC)	Kline	Posey	Schiff	Upson
Bass	Duncan (TN)	Knight	Price (NC)	Schrader	Valadao
Beatty	Edwards	Kuster	Price, Tom	Schweikert	Van Hollen
Becerra	Ellison	Labrador	Quigley	Scott (VA)	Vargas
Benishkek	Ellmers (NC)	LaHood	Rangel	Scott, Austin	Veasey
Bera	Emmer (MN)	LaMalfa	Ratcliffe	Scott, David	Vela
Beyer	Engel	Lamborn	Reed	Sensenbrenner	Velázquez
Bilirakis	Eshoo	Lance	Reichert	Serrano	Visclosky
Bishop (GA)	Esty	Langevin	Renacci	Sessions	Wagner
Bishop (MI)	Farenthold	Larsen (WA)	Ribble	Sewell (AL)	Walberg
Bishop (UT)	Farr	Larson (CT)	Rice (NY)	Sherman	Walden
Black	Fitzpatrick	Lawrence	Rice (SC)	Shimkus	Walker
Blackburn	Fleischmann	Lee	Richmond	Shuster	Walorski
Blum	Fleming	Levin	Rigell	Simpson	Walters, Mimi
Blumenauer	Flores	Lewis	Roby	Sinema	Walz
Bonamici	Forbes	Lieu, Ted	Roe (TN)	Sires	Wasserman
Bost	Fortenberry	Lipinski	Rogers (AL)	Slaughter	Schultz
Boustany	Foster	LoBiondo	Rogers (KY)	Smith (MO)	Waters, Maxine
Boyle, Brendan F.	Fox	Loeb sack	Rohrabacher	Smith (NE)	Watson Coleman
Brady (PA)	Frankel (FL)	Lofgren	Rokita	Smith (NJ)	Weber (TX)
Brady (TX)	Frelinghuysen	Long	Rooney (FL)	Smith (TX)	Webster (FL)
Brat	Fudge	Loudermilk	Ros-Lehtinen	Smith (WA)	Welch
Bridenstine	Gabbard	Love	Roskam	Speier	Wenstrup
Brooks (AL)	Gallego	Lowenthal	Ross	Stefanik	Westerman
Brooks (IN)	Garamendi	Lowe y	Rothfus	Stewart	Westmoreland
Brown (FL)	Garrett	Lucas	Rouzer	Stivers	Williams
Brownley (CA)	Gibbs	Luetkemeyer	Roybal-Allard	Stutzman	Wilson (FL)
Buchanan	Gibson	Lujan Grisham (NM)	Royce	Swalwell (CA)	Wilson (SC)
Buck	Gohmert	Lujan, Ben Ray (NM)	Ruiz	Takano	Wittman
Bucshon	Goodlatte	Lynch	Ruppersberger	Thompson (CA)	Womack
Burgess	Gosar	MacArthur	Rush	Thompson (MS)	Woodall
Bustos	Gowdy	Maloney, Carolyn	Russell	Thompson (PA)	Yarmuth
Butterfield	Graham	Maloney, Sean	Ryan (OH)	Thornberry	Yoder
Byrne	Granger	Marchant	Salmon	Tiberi	Yoho
Calvert	Graves (GA)	Marino	Sánchez, Linda T.	Tipton	Young (AK)
Capps	Graves (LA)	Massie	Sanchez, Loretta	Titus	Young (IA)
Capuano	Graves (MO)	Matsui	Sanford	Tonko	Young (IN)
Cárdenas	Green, Al	McCarthy	Sarbanes	Torres	Zeldin
Carney	Green, Gene	McCaul		Trott	Zinke
Carson (IN)	Griffith	McClintock	Cartwright	Franks (AZ)	Mooney (WV)
Carter (GA)	Grijalva	McCollum	Castor (FL)	Hastings	Pitts
Carter (TX)	Grothman	McDermott	Fattah	Herrera Beutler	Takai
Castro (TX)	Guinta	McGovern	Fincher	Latta	Whitfield
Chabot	Guthrie	McHenry			
Chaffetz	Gutiérrez	McKinley			
Chu, Judy	Hahn	McMorris			
Cicilline	Hanna	McMorris-Rodgers			
Clark (MA)	Hardy	McNerney			
Clarke (NY)	Harper	McSally			
Clawson (FL)	Harris	Meadows			
Clay	Hartzler	Meehan			
Cleaver	Heck (NV)	Meeks			
Clyburn	Heck (WA)	Meng			
Coffman	Hensarling	Messer			
Cohen	Hice, Jody B.	Mica			
Cole	Higgins	Miller (FL)			
Collins (GA)	Hill	Miller (MI)			
Collins (NY)	Himes	Moolenaar			
Comstock	Hinojosa	Moore			
Conaway	Holding	Moulton			
Cannolly	Honda	Mullin			
Conyers	Hoyer	Mulvaney			
Cook	Hudson	Murphy (FL)			
Cooper	Huelskamp	Murphy (PA)			
Costa	Huffman	Nadler			
Costello (PA)	Huizenga (MI)	Napolitano			
Courtney	Hultgren	Neal			
Cramer	Hunter	Neugebauer			
Crawford	Hurd (TX)	Newhouse			
Crenshaw	Hurt (VA)	Noem			
Crowley	Israel	Nolan			
Cuellar	Issa	Norcross			
Culberson	Jackson Lee	Nugent			
Cummings	Jeffries	Nunes			
Curbelo (FL)	Jennings (KS)	O'Rourke			
Davis (CA)	Jenkins (WV)	Olson			
Davis, Danny	Johnson (GA)	Palazzo			
Davis, Rodney	Johnson (OH)	Pallone			
DeFazio	Johnson, E. B.	Palmer			
DeGette	Johnson, Sam	Pascarell			
Delaney	Jolly	Paulsen			
DeLauro	Jones	Payne			
DelBene	Jordan	Pearce			
Denham	Joyce	Pelosi			
Dent	Kaptur	Perlmutter			
DeSantis	Katko	Perry			
DeSaulnier	Keating	Peters			
DesJarlais	Kelly (IL)	Peterson			
Deutch	Kelly (MS)	Pingree			
Diaz-Balart	Kelly (PA)	Pittenger			
Dingell	Kennedy	Pocan			
Doggett	Kildee	Poe (TX)			
Dold	Kilmer	Poliquin			
Donovan	Kind				
Doyle, Michael F.	King (IA)				
	King (NY)				

The SPEAKER pro tempore. Is there objection to the request of the gentleman from Louisiana?

There was no objection.

A motion to reconsider was laid on the table.

ANNOUNCEMENT BY THE SPEAKER PRO TEMPORE

The SPEAKER pro tempore. Pursuant to clause 8 of rule XX, the Chair will postpone further proceedings today on additional motions to suspend the rules on which a recorded vote or the yeas and nays are ordered, or on which the vote incurs objection under clause 6 of rule XX.

Any record votes on postponed questions will be taken later.

OPIOID REVIEW MODERNIZATION ACT OF 2016

Mr. GUTHRIE. Mr. Speaker, I move to suspend the rules and pass the bill (H.R. 4976) to require the Commissioner of Food and Drugs to seek recommendations from an advisory committee of the Food and Drug Administration before approval of certain new drugs that are opioids without abuse-deterrent properties, and for other purposes.

The Clerk read the title of the bill.

The text of the bill is as follows:

H.R. 4976

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

SECTION 1. SHORT TITLE.

This Act may be cited as the “Opioid Review Modernization Act of 2016”.

SEC. 2. FDA OPIOID ACTION PLAN.

Chapter V of the Federal Food, Drug, and Cosmetic Act is amended by inserting after section 569 of such Act (21 U.S.C. 350bbb-8) the following:

“SEC. 569-1. OPIOID ACTION PLAN.

“(a) NEW DRUG APPLICATION.—

“(1) IN GENERAL.—Subject to paragraph (2), prior to the approval pursuant to an application under section 505(b) of a new drug that is an opioid and does not have abuse-deterrent properties, the Secretary shall refer the application to an advisory committee of the Food and Drug Administration to seek recommendations from such advisory committee.

“(2) PUBLIC HEALTH EXEMPTION.—A referral to an advisory committee under paragraph (1) is not required with respect to a new drug if the Secretary—

“(A) finds that such a referral is not in the interest of protecting and promoting public health;

“(B) finds that such a referral is not necessary based on a review of the relevant scientific information; and

“(C) submits a notice containing the rationale for such findings to the Committee on Health, Education, Labor, and Pensions of the Senate and the Committee on Energy and Commerce of the House of Representatives.

“(b) PEDIATRIC OPIOID LABELING.—The Secretary shall convene the Pediatric Advisory Committee of the Food and Drug Administration to seek recommendations from such Committee regarding a framework for the inclusion of information in the labeling of

NOT VOTING—12

Cartwright	Franks (AZ)	Mooney (WV)
Castor (FL)	Hastings	Pitts
Fattah	Herrera Beutler	Takai
Fincher	Latta	Whitfield

□ 1622

So (two-thirds being in the affirmative) the rules were suspended and the bill, as amended, was passed.

The result of the vote was announced as above recorded.

A motion to reconsider was laid on the table.

WOMEN AIRFORCE SERVICE PILOT ARLINGTON INURNMENT RESTORATION ACT

Mr. ABRAHAM. Mr. Speaker, I ask unanimous consent to take from the Speaker's table the bill (H.R. 4336) to amend title 38, United States Code, to provide for the burial in Arlington National Cemetery of the cremated remains of certain persons whose service has been determined to be active service, with the Senate amendments thereto, and concur in the Senate amendments.

The Clerk read the title of the bill.

The SPEAKER pro tempore. The Clerk will report the Senate amendments.

The Clerk read as follows:

Senate amendments:

(1) On page 2, line 1, strike “BURIAL” and insert “INURNMENT”.

(2) On page 2, line 8, strike “that” and insert “that.”

(3) On page 2, line 11, insert “above ground” before “inurnment”.

Amend the title so as to read: “An Act to amend title 38, United States Code, to provide for the inurnment in Arlington National Cemetery of the cremated remains of certain persons whose service has been determined to be active service.”.

drugs that are opioids relating to the use of such drugs in pediatric populations before the Secretary approves any labeling or change to labeling for any drug that is an opioid intended for use in a pediatric population.

“(c) SUNSET.—The requirements of subsections (a) and (b) shall cease to be effective on October 1, 2022.”.

SEC. 3. PRESCRIBER EDUCATION.

Not later than 1 year after the date of the enactment of this Act, the Secretary of Health and Human Services, acting through the Commissioner of Food and Drugs, as part of the Food and Drug Administration’s evaluation of the Extended-Release/Long-Acting Opioid Analgesics Risk Evaluation and Mitigation Strategy, and in consultation with relevant stakeholders, shall develop recommendations regarding education programs for prescribers of opioids pursuant to section 505-1 of the Federal Food, Drug, and Cosmetic Act (21 U.S.C. 355-1), including recommendations on—

(1) which prescribers should participate in such programs; and

(2) how often participation in such programs is necessary.

SEC. 4. GUIDANCE ON EVALUATING THE ABUSE DETERRENCE OF GENERIC SOLID ORAL OPIOID DRUG PRODUCTS.

Not later than 2 years after the end of the period for public comment on the draft guidance entitled “General Principles for Evaluating the Abuse Deterrence of Generic Solid Oral Opioid Drug Products” issued by the Center for Drug Evaluation and Research of the Food and Drug Administration in March 2016, the Commissioner of Food and Drugs shall publish in the Federal Register a final version of such guidance.

The SPEAKER pro tempore. Pursuant to the rule, the gentleman from Kentucky (Mr. GUTHRIE) and the gentleman from Texas (Mr. GENE GREEN) each will control 20 minutes.

The Chair recognizes the gentleman from Kentucky.

GENERAL LEAVE

Mr. GUTHRIE. Mr. Speaker, I ask unanimous consent that all Members have 5 legislative days in which to revise and extend their remarks and insert extraneous materials in the RECORD on the bill.

The SPEAKER pro tempore. Is there objection to the request of the gentleman from Kentucky?

There was no objection.

Mr. GUTHRIE. Mr. Speaker, I yield myself such time as I may consume.

Mr. Speaker, I rise in support of H.R. 4976, the Opioid Review Modernization Act of 2016, introduced by the gentleman from New York (Mr. SEAN PATRICK MALONEY) and the gentleman from New Jersey (Mr. LANCE).

□ 1630

Opioid use disorder and overdose deaths have reached epidemic levels. A comprehensive approach is needed to reverse these trends and the tragic toll they have taken on families and communities across our country.

The Food and Drug Administration does have a critical role to play in such an approach. Patients living with serious pain must have access to safe and effective therapies to help them function and lead productive lives. FDA reviews prescription pain relievers, like

all new drug products, to determine whether their benefits outweigh their risks.

It is important that the FDA hear recommendations from expert advisory committees prior to making key product and labeling decisions, particularly to ensure that any such risks are effectively communicated, understood, and mitigated.

Specifically, H.R. 4976 requires that FDA receives input from an advisory committee regarding approval of new opioids that do not utilize abuse-deterrent properties, in addition to developing a framework for labeling any opioid intended for pediatric use.

The bill also requires the agency to finalize guidance on evaluating abuse deterrence in generic opioid medications and issue recommendations regarding prescriber education tied to the risk evaluation mitigation strategy programs.

This bill would strengthen FDA’s Opioid Action Plan, defining outcomes with meaningful timeframes. I urge my colleagues to support H.R. 4976.

Mr. Speaker, I reserve the balance of my time.

Mr. GENE GREEN of Texas. Mr. Speaker, I yield myself such time as I may consume.

Mr. Speaker, I rise in support of H.R. 4976, the Opioid Review Modernization Act.

We know that there is not one solution addressing the opioid crisis that is striking communities across the country. A comprehensive approach that balances the appropriate use of opioids, while deterring misuse and diversion, requires the involvement of many government agencies, including the Food and Drug Administration.

As the agency tasked with reviewing pain medications for safety and effectiveness, we know that the FDA can play a critical role in addressing the safe use of these products for patients with chronic or acute pain.

I was pleased when the FDA announced earlier this year that the agency developed a comprehensive action plan to help reduce the burden of opioid abuse on American families and communities. In this plan, the FDA outlined concrete steps it intended to take, including:

Expanding its use of advisory committees before approving any new opioid drug that does not have abuse-deterrent properties;

Updating the risk evaluation and mitigation strategy program to incorporate advisory committee recommendations regarding medical training on pain management and safe prescribing of opioids; and

Taking actions to expand patient access to abuse-deterrent formulations for opioids to help discourage their abuse.

The Opioid Review Modernization Act builds on these efforts and would require the FDA to work closely with expert advisory committees before making critical opioid approach and la-

beling decisions, develop recommendations regarding prescriber education programs that address extended-release and long-acting opioids, including those who should participate and how often, and encouraging development and approval of generic opioids with abuse-deterrent properties.

H.R. 4976 will engage a key public agency, the FDA, to help address our current opioid crisis by improving regulatory oversight of opioids early in the process while also assisting prescribers in the safe dispensing of these products.

I would like to thank Representative SEAN PATRICK MALONEY and Congressman LEONARD LANCE for their leadership in introducing this bill. I encourage my colleagues to support H.R. 4976.

I reserve the balance of my time.

Mr. GUTHRIE. Mr. Speaker, I yield 3 minutes to the gentleman from New Jersey (Mr. LANCE), my good friend and a fellow member of the Energy and Commerce Committee.

Mr. LANCE. Mr. Speaker, I certainly thank Mr. GUTHRIE of Kentucky and Mr. GENE GREEN of Texas for their leadership on this overall issue. We on the Energy and Commerce Committee have worked in a completely bipartisan fashion on this terrible crisis that affects the American people.

Mr. Speaker, I rise in strong support of H.R. 4976, the Opioid Review Modernization Act. I thank Congressman SEAN PATRICK MALONEY from the State of New York for his partnership on this legislation, and I certainly thank Chairman UPTON and Ranking Member PALLONE of the Energy and Commerce Committee for leading this and many other bipartisan bills to passage today that address this pressing national issue.

This bill and the larger package together are a great step forward in the fight against the scourge of drug addiction. In my home State of New Jersey, we face a drug epidemic that is hitting many communities hard, and that is true across the entire Nation. This crisis strains law enforcement and taxpayer resources, and, of course, tragically, it cuts too many lives short.

H.R. 4976 targets opioid addiction’s strong ties to prescription drug abuse and the issue of overprescription. Studies have shown healthcare providers write nearly 300 million opioid prescriptions a year in this country. That number is truly staggering.

Our legislation will make sure that the Food and Drug Administration rigorously reviews the benefits and risks of opioid pain medications and how they are communicated to prescribers and patients. The bill reforms critical product approval and labeling decisions and encourages the development and approval of opioids with abuse-deterrent properties.

Our Federal health agencies must be working in concert with the medical and pharmaceutical communities to combat drug abuse, and this legislation helps make that happen.

Just last week I met with Hunterdon County, New Jersey, Prosecutor Anthony Kearns on what law enforcement is doing on the ground level to fight this epidemic. In New Jersey, Mr. Speaker, the county prosecutor is the equivalent of the county district attorney in most States across the Nation.

Public servants like Prosecutor Kearns and others are doing all they can to protect our children and keep our local communities drug free, but this legislative package will help in their efforts and give them and other governmental entities more critical tools.

Those in Washington and local leaders need to be working together for the benefit of the American people. H.R. 4976 and the larger package will work toward that goal and ultimately help combat this drug abuse crisis.

Mr. GENE GREEN of Texas. Mr. Speaker, I yield 3 minutes to the gentleman from New York (Mr. SEAN PATRICK MALONEY), a cosponsor of this bill.

Mr. SEAN PATRICK MALONEY of New York. Mr. Speaker, I thank my good friend from Texas for yielding. I want to echo my thanks as well to Chairman UPTON and Ranking Member PALLONE and my good friend, Mr. LANCE of New Jersey.

I rise in support of my legislation, H.R. 4976, the Opioid Review Modernization Act.

Heroin and opioid addiction is a serious and growing epidemic, especially in the communities I represent in the lower Hudson Valley of New York. After more than 55 townhalls with my neighbors across the Hudson Valley in the last 3½ years, I can say there is no subject I have heard about more in visits to communities throughout my district. Really, everywhere I go, I hear heartbreaking stories of addiction and of loss, and we have had far too many funerals.

I spoke to a woman named Cynthia in Newburgh who told me her son struggles every day with addiction. He is trying to stay clean, but he can't find a meeting locally to visit.

A woman named Samantha from Brewster said she is worried about the basic lack of options for treating addicts like her son.

Patricia in Warwick has said the facilities there lack the basic necessities for treating addicts like her son.

We have a shortage of beds for patients who are seeking treatment. In Dutchess County, New York, alone, we have seen a 160 percent increase in the number of drug overdoses since 2009. This epidemic is being felt nationwide. It doesn't care about the color of your skin or the size of your paycheck.

Deaths from heroin overdoses have more than tripled since 2010 in our country, and it is often driven by an addiction first to prescription pain medicine. We now have more than 47,000 people dying a year, the equivalent of 125 Americans every day. It is a staggering figure, Mr. Speaker, and we in Congress can and must do more to fight this growing epidemic.

So my bill takes an important, but simple, step to avoid opioid addiction and to avoid further loss by using both new technologies and a little common sense.

Specifically, it would require the Food and Drug Administration to consult with expert advisory committees for the approval of new opioids that do not use deterrent properties, such as extended-release capsules. We know this can thwart the misuse of these products by people who are struggling with addiction.

Additionally, the legislation will encourage the development of generic opioids that utilize these abuse-deterrent properties. And, of course, the FDA can do more.

We can require them to evaluate and make recommendations on better programs to prevent prescribers of opioids from overprescribing, since we often hear that it is that overprescription that leads people into trouble with opioids and, later, with heroin.

As part of a comprehensive package of legislation to combat the opioid epidemic, my bill is just one more tool in our toolkit, providing incentives for pharmaceutical companies to use antiabuse technologies and create a plan to educate our well-meaning doctors about the potential dangers of prescription opioids.

I urge my colleagues to vote "yes" on this important measure.

Mr. GENE GREEN of Texas. Mr. Speaker, I yield back the balance of my time.

Mr. GUTHRIE. Mr. Speaker, I yield myself the balance of my time.

Mr. Speaker, this bill, the FDA's Opioid Action Plan, is important in our larger package of bills. I urge my colleagues to support this measure, H.R. 4976.

Mr. Speaker, I yield back the balance of my time.

Mr. PALLONE. Mr. Speaker, I wish to voice my support for H.R. 4976, which would complement the efforts taken by the Food and Drug Administration to combat the opioid abuse crisis.

The opioid epidemic has hit nearly all communities across the country—young and old, rich and poor, urban and rural. The Energy and Commerce Committee has held a number of hearings on this issue, inviting a wide range of stakeholders to come and share with us their suggestions on how Congress can help to address this crisis. What has been made clear is that there is not one solution. It will take the collaboration and expertise of a variety of agencies, and it must not only appropriately account for the need for access to opioids for those with acute and chronic pain, but it must also discourage misuse and diversion.

As the public health agency responsible for reviewing pain medications for safety and efficacy, the Food and Drug Administration should play a critical role in making clear how prescription opioids can be safely used, in encouraging the development of technologies to prevent abuse, and identifying what education would assist prescribers who treat patients with opioids.

In February, FDA outlined an action plan that included a number of steps focused on the agency's regulatory approach to opioids.

These actions included: reassessing the risk-benefit approval framework for opioid use; convening an expert advisory committee before approving any new drug application for an opioid that does not have abuse-deterrent properties; consulting with the Pediatric Advisory Committee regarding recommendations for pediatric opioid labeling before any new labeling is approved; updating the Risk Evaluation and Mitigation Strategy or REMS program for extended-release and long-acting opioids regarding prescriber training; developing changes to immediate-release opioid labeling to include additional warnings and safety information; reviewing options to make naloxone more accessible, such as availability over-the-counter; and strengthening post-market requirements, among other steps.

I was pleased by the agency's announcement as I believe it was an important step forward in improving regulatory oversight of opioids, and would help to take another step towards addressing the opioid crisis holistically.

H.R. 4976, the Opioid Review Modernization Act, was introduced by Representatives SEAN PATRICK MALONEY and LEONARD LANCE to build on the actions announced by the FDA. The legislation would require the agency to work closely with expert advisory committees before making critical product approval and labeling decisions, make recommendations regarding education programs for prescribers of extended-release and long-acting opioids, and would encourage the development and approval of generic opioids with abuse-deterrent properties.

These actions will be critical to improving the way we regulate opioids to ensure that these products are used safely and appropriately and I urge my colleagues to support this legislation.

The SPEAKER pro tempore (Mr. STEWART). The question is on the motion offered by the gentleman from Kentucky (Mr. GUTHRIE) that the House suspend the rules and pass the bill, H.R. 4976.

The question was taken; and (two-thirds being in the affirmative) the rules were suspended and the bill was passed.

A motion to reconsider was laid on the table.

CO-PRESCRIBING TO REDUCE OVERDOSES ACT OF 2016

Mr. GUTHRIE. Mr. Speaker, I move to suspend the rules and pass the bill (H.R. 3680) to provide for the Secretary of Health and Human Services to carry out a grant program for co-prescribing opioid overdose reversal drugs, as amended.

The Clerk read the title of the bill.

The text of the bill is as follows:

H.R. 3680

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

SECTION 1. SHORT TITLE.

This Act may be cited as the "Co-Prescribing to Reduce Overdoses Act of 2016".

SEC. 2. OPIOID OVERDOSE REVERSAL DRUGS PRESCRIBING GRANT PROGRAM.

(a) ESTABLISHMENT.—

(1) IN GENERAL.—Not later than six months after the date of the enactment of this Act, the Secretary of Health and Human Services may establish, in accordance with this section, a five-year opioid overdose reversal drugs prescribing grant program (in this Act referred to as the “grant program”).

(2) MAXIMUM GRANT AMOUNT.—A grant made under this section may not be for more than \$200,000 per grant year.

(3) ELIGIBLE ENTITY.—For purposes of this section, the term “eligible entity” means a federally qualified health center (as defined in section 1861(aa) of the Social Security Act (42 U.S.C. 1395x(aa)), an opioid treatment program under part 8 of title 42, Code of Federal Regulations, any practitioner dispensing narcotic drugs pursuant to section 303(g) of the Controlled Substances Act (21 U.S.C. 823(g)), or any other entity that the Secretary deems appropriate.

(4) PRESCRIBING.—For purposes of this section and section 3, the term “prescribing” means, with respect to an opioid overdose reversal drug, such as naloxone, the practice of prescribing such drug—

(A) in conjunction with an opioid prescription for patients at an elevated risk of overdose;

(B) in conjunction with an opioid agonist approved under section 505 of the Federal Food, Drug, and Cosmetic Act (21 U.S.C. 355) for the treatment of opioid abuse disorder;

(C) to the caregiver or a close relative of patients at an elevated risk of overdose from opioids; or

(D) in other circumstances, as identified by the Secretary, in which a provider identifies a patient is at an elevated risk for an intentional or unintentional drug overdose from heroin or prescription opioid therapies.

(b) APPLICATION.—To be eligible to receive a grant under this section, an eligible entity shall submit to the Secretary of Health and Human Services, in such form and manner as specified by the Secretary, an application that describes—

(1) the extent to which the area to which the entity will furnish services through use of the grant is experiencing significant morbidity and mortality caused by opioid abuse;

(2) the criteria that will be used to identify eligible patients to participate in such program; and

(3) how such program will work to try to identify State, local, or private funding to continue the program after expiration of the grant.

(c) USE OF FUNDS.—An eligible entity receiving a grant under this section may use the grant for any of the following activities, but may use not more than 20 percent of the grant funds for activities described in paragraphs (4) and (5):

(1) To establish a program for prescribing opioid overdose reversal drugs, such as naloxone.

(2) To train and provide resources for health care providers and pharmacists on the prescribing of opioid overdose reversal drugs, such as naloxone.

(3) To establish mechanisms and processes for tracking patients participating in the program described in paragraph (1) and the health outcomes of such patients.

(4) To purchase opioid overdose reversal drugs, such as naloxone, for distribution under the program described in paragraph (1).

(5) To offset the co-pays and other cost sharing associated with opioid overdose reversal drugs, such as naloxone, to ensure that cost is not a limiting factor for eligible patients.

(6) To conduct community outreach, in conjunction with community-based organizations, designed to raise awareness of prescribing practices, and the availability of

opioid overdose reversal drugs, such as naloxone.

(7) To establish protocols to connect patients who have experienced a drug overdose with appropriate treatment, including medication assisted treatment and appropriate counseling and behavioral therapies.

(d) EVALUATIONS BY RECIPIENTS.—As a condition of receipt of a grant under this section, an eligible entity shall, for each year for which the grant is received, submit to the Secretary of Health and Human Services information on appropriate outcome measures specified by the Secretary to assess the outcomes of the program funded by the grant, including—

(1) the number of prescribers trained;

(2) the number of prescribers who have co-prescribed an opioid overdose reversal drug, such as naloxone, to at least one patient;

(3) the total number of prescriptions written for opioid overdose reversal drugs, such as naloxone;

(4) the percentage of patients at elevated risk who received a prescription for an opioid overdose reversal drug, such as naloxone;

(5) the number of patients reporting use of an opioid overdose reversal drug, such as naloxone; and

(6) any other outcome measures that the Secretary deems appropriate.

(e) REPORTS BY SECRETARY.—For each year of the grant program under this section, the Secretary of Health and Human Services shall submit to the appropriate committees of the House of Representatives and of the Senate a report aggregating the information received from the grant recipients for such year under subsection (d) and evaluating the outcomes achieved by the programs funded by grants made under this section.

SEC. 3. PROVIDING INFORMATION TO PRESCRIBERS IN CERTAIN FEDERAL HEALTH CARE AND MEDICAL FACILITIES ON BEST PRACTICES FOR PRESCRIBING OPIOID OVERDOSE REVERSAL DRUGS.

(a) IN GENERAL.—Not later than 180 days after the date of enactment of this Act, the Secretary of Health and Human Services (in this section referred to as the “Secretary”) may, as appropriate, provide information to prescribers within Federally qualified health centers (as defined in paragraph (4) of section 1861(aa) of the Social Security Act (42 U.S.C. 1395x(aa))), and the health care facilities of the Indian Health Service, on best practices for prescribing opioid overdose reversal drugs, such as naloxone, for patients receiving chronic opioid therapy, patients being treated for opioid use disorders, and other patients that a provider identifies as having an elevated risk of overdose from heroin or prescription opioid therapies.

(b) NOT ESTABLISHING A MEDICAL STANDARD OF CARE.—The information on best practices provided under this section shall not be construed as constituting or establishing a medical standard of care for prescribing opioid overdose reversal drugs, such as naloxone, for patients described in subsection (a).

(c) ELEVATED RISK OF OVERDOSE DEFINED.—In this section, the term “elevated risk of overdose” has the meaning given such term by the Secretary, which—

(1) may be based on the criteria provided in the Opioid Overdose Toolkit published by the Substance Abuse and Mental Health Services Administration (SAMHSA); and

(2) may include patients on a first course opioid treatment, patients using extended-release and long-acting opioid analgesics, and patients with a respiratory disease or other co-morbidities.

SEC. 4. AUTHORIZATION OF APPROPRIATIONS.

There is authorized to be appropriated to carry out this Act \$5,000,000 for the period of fiscal years 2017 through 2021.

SEC. 5. CUT-GO COMPLIANCE.

Subsection (f) of section 319D of the Public Health Service Act (42 U.S.C. 247d-4) is amended by inserting before the period at the end the following: “(except such dollar amount shall be reduced by \$5,000,000 for fiscal year 2018)”.

The SPEAKER pro tempore. Pursuant to the rule, the gentleman from Kentucky (Mr. GUTHRIE) and the gentleman from Texas (Mr. GENE GREEN) each will control 20 minutes.

The Chair recognizes the gentleman from Kentucky.

GENERAL LEAVE

Mr. GUTHRIE. Mr. Speaker, I ask unanimous consent that all Members may have 5 legislative days in which to revise and extend their remarks and insert extraneous materials in the RECORD on the bill.

The SPEAKER pro tempore. Is there objection to the request of the gentleman from Kentucky?

There was no objection.

Mr. GUTHRIE. Mr. Speaker, I yield myself such time as I may consume.

Mr. Speaker, I rise today in support of H.R. 3680, the Co-Prescribing to Reduce Overdoses Act of 2016, introduced by my colleague on the Energy and Commerce Committee, Mr. SARBANES of Maryland.

In 1999, there were 6.1 overdose deaths per 100,000 Americans involving opioid analgesics and heroin. By 2014, that number doubled to 14.7 overdose deaths. The rate of overdose for individuals aged 24 to 34 nearly tripled, going from 8.1 overdose deaths per 100,000 to 23.1 overdose deaths.

Naloxone is an opioid antagonist that can prevent opioid overdose deaths by binding to the opioid receptors in the body and preventing the overdose. The World Health Organization estimated that, if naloxone was more widely available in the United States, more than 20,000 overdose deaths could be prevented annually.

H.R. 3680 is a step in promoting wider access of naloxone or other opioid-overdose reversal drugs that may come to market. It directs the Secretary of Health and Human Services to carry out a grant program for coprescribing opioid reversal drugs and helps develop best practices for doing so.

Mr. Speaker, I urge my colleagues to support this legislation.

I reserve the balance of my time.

Mr. GENE GREEN of Texas. Mr. Speaker, I yield myself such time as I may consume.

Mr. Speaker, I rise to voice my support for H.R. 3680, the Co-Prescribing to Reduce Overdoses Act. We must do more to prevent opioid addiction and ensure those currently suffering have access to potentially lifesaving treatments.

Naloxone has been proven effective in reversing opioid overdoses, and it is a cost-effective public health intervention. Naloxone blocks and reverses the effects of opioid medication and is used to treat narcotic overdose in emergency situations.

In addition to recent efforts to improve access to naloxone through first responders and community-based health organizations, providing naloxone to at-risk patients in a healthcare setting may reduce overdoses and encourage patients to use prescription drugs more safely.

□ 1645

The Co-Prescribing to Reduce Overdoses Act would create a demonstration grant program to facilitate coprescribing of naloxone when appropriate.

Coprescribing refers to the practice of prescribing that naloxone alongside an opioid prescription to patients with heightened risk of overdose. This could include patients who take significant doses of opioids for long-term chronic pain management, patients with a history of substance abuse, or patients who have been discharged from emergency care following poisoning or intoxication from an opiate.

The bill would further authorize funding to train healthcare providers and pharmacists on coprescribing, establish mechanisms for tracking patients and their health outcomes, and other efforts to expand access to naloxone.

We must act swiftly in order to save lives and stem the growing prescription drug epidemic in our country. The Co-Prescribing to Reduce Overdoses Act is an important step toward preventing overdose deaths, which is a critical part of the fight against our devastating drug crisis.

I want to thank the bill's sponsor, the gentleman from Maryland, Representative JOHN SARBANES, who is a member of our Subcommittee on Health, for his leadership in introducing this bill.

I urge my colleagues to support the Co-Prescribing to Reduce Overdoses Act.

Mr. Speaker, I reserve the balance of my time.

Mr. GUTHRIE. Mr. Speaker, I yield 3 minutes to the gentleman from Pennsylvania (Mr. SHUSTER), the distinguished chairman of the Committee on Transportation and Infrastructure.

Mr. SHUSTER. I thank the gentleman for yielding.

Mr. Speaker, I rise today in support of H.R. 3680, which is one of several initiatives being taken up by the House this week to combat the devastating opioid epidemic our Nation is facing.

Every person in my district knows someone who has been impacted by this crisis, and each day that we wait is another day we go without taking action to save the lives of the people feeling the terrible effects of this addiction.

Each day without action is another day that our communities are ravaged by these drugs.

We can combat this crisis and repair our communities. This is a needed step that both Republicans and Democrats are working together to achieve.

I strongly support this legislation because it will provide funding to our health centers to coprescribe naloxone, a lifesaving drug.

My entire district has been plagued by the scourge of this crisis. The alarming rise in overdose deaths show the urgent need for naloxone to be readily available to both healthcare professionals and those with increased risk of overdose.

These efforts are one part of a broader solution that will undoubtedly save lives. I applaud my colleagues on both sides of the aisle for taking these steps, and I look forward to continuing to work to make our communities a safer place by ridding them of this epidemic.

I urge all my colleagues to support H.R. 3680.

Mr. GENE GREEN of Texas. Mr. Speaker, I am happy to yield 3 minutes to the gentleman from Maryland (Mr. SARBANES), my colleague on the committee.

Mr. SARBANES. I thank the gentleman for yielding.

Mr. Speaker, I first want to thank Ranking Members PALLONE and GREEN, as well as Chairmen UPTON and PITTS, for working diligently with me to bring this bill to the floor today.

This bipartisan bill, the Co-Prescribing to Reduce Overdoses Act, would create a demonstration project to encourage prescribing opioid overdose reversal drugs like naloxone to patients at an elevated risk of overdose, as well as to a close relative of such a patient.

Why is this bill needed, Mr. Speaker?

More than 100 Americans are dying every single day of preventable drug overdose, and overdose fatality is now the leading cause of accidental death in the Nation.

In 2014, in my home State of Maryland, there were 887 opioid-related deaths. In Baltimore, 192 people died from heroin overdoses. In Anne Arundel County in 2014, there were 360 opioid overdoses, fatal and nonfatal; 49 of those were fatal.

The problem is getting worse. From 2001 to 2013, there was a fivefold increase in the total number of deaths from heroin. This is an epidemic, but it is an epidemic that we can begin to stem if we take action.

Naloxone is a drug that safely and effectively reverses both opioid and heroin-induced overdoses, if administered in time. It has been used by nonmedical personnel with only minimal training for over 15 years, and has been proven to lower overdose mortality by almost 50 percent.

More people need access to this lifesaving medication. One part of that proactive approach is the idea of coprescribing naloxone to patients, or their caregivers, who are taking opioids and are at high risk of overdose.

The Co-Prescribing to Reduce Overdoses Act would create a demonstration project for federally qualified health centers, opioid treatment centers, and other providers, to encour-

age coprescribing of naloxone and other opioid reversal drugs.

This bill has been endorsed by the AMA, the American Society of Addiction Medicine; the American Academy of Family Physicians; and the Harm Reduction Coalition.

There are five Republican cosponsors, I am pleased to say, proving that this is a bipartisan issue affecting virtually every part of the country.

I am pleased as well to note that the bill received unanimous support in the Committee on Energy and Commerce.

I urge support of this bill today because I know that it will save lives and help begin to stem the tide of this terrible epidemic.

I also support the other bills being debated this evening, and believe that these are all important initiatives to address the opioid crisis.

However, it is just as critical that we provide adequate resources for all aspects of this epidemic to prevent addiction, to provide effective treatment, and to increase access to lifesaving opioid reversal drugs in order to truly bring an end to this epidemic.

Mr. Speaker, I urge support of this important legislation.

Mr. GUTHRIE. Mr. Speaker, one of the great privileges of the people's House, people come here from all walks of life with all different expertise.

I yield such time as he may consume to the gentleman from Georgia (Mr. CARTER), the only registered pharmacist that serves in the House of Representatives, who is here to speak on this and several of the bills today.

Mr. CARTER of Georgia. I thank the gentleman for yielding.

Mr. Speaker, I rise today in support of H.R. 3680, the Co-Prescribing to Reduce Overdoses Act, which gives patients the tools they need to protect themselves from opioid overdoses.

H.R. 3680 calls for the Department of Health and Human Services to create a grant program that will increase the ability for healthcare providers to coprescribe opioid reversal medication like naloxone when those providers prescribe opioid-based medications for patients.

This new direction by HHS will work to decrease the risk of fatally overdosing on opioids while also allowing healthcare providers to learn more about the opioid reversal medication benefits.

In addition, with the grant money, providers will be able to track patient outcomes to make sure that the reversal medication has the desired effect.

As a lifelong pharmacist, I consider it my duty to always care for my patients and give them every tool I can to protect and serve them the best way I can, and I have carried this duty to the United States House of Representatives.

The Co-Prescribing to Reduce Overdoses Act does just this and is a major step in the right direction to ending the opioid addiction deaths in America.

I encourage all of my colleagues to support this bill.

Mr. GENE GREEN of Texas. Mr. Speaker, I yield back the balance of my time.

Mr. GUTHRIE. Mr. Speaker, I appreciate the gentleman from Maryland (Mr. SARBANES) bringing this forward and all the bipartisan work that was put into it. I urge my colleagues to support this legislation.

I yield back the balance of my time.

Ms. JACKSON LEE. Mr. Speaker, I rise in support of H.R. 3680 the "Co-Prescribing To Reduce Overdoses Act of 2015."

This bill requires the Department of Health and Human Services (HHS) to establish a grant program to support prescribing opioid overdose reversal drugs, such as naloxone, for patients at an elevated risk of overdose, including patients prescribed an opioid.

Opioids are drugs with effects similar to opium, such as heroin and certain pain medications.

The Centers for Disease Control and Prevention reports that nearly 259 million opioid prescriptions were written in 2012, more than enough for every adult in the United States.

In 2013 nearly 4.5 million people in the United States without a valid medical need were using prescription painkillers.

Both states and the federal government have begun responding to this growing public health crisis.

The Obama administration has awarded \$94 million to community health centers to improve and expand the delivery of substance abuse services.

H.R. 3680 would encourage and train health care providers to prescribe lifesaving overdose reversal drugs.

Enacting this legislation will help reduce drug overdoses across the country by giving at-risk patients better access to lifesaving overdose reversal drugs.

The plague of opioid overdose deaths across the nation is disturbing, but there are ways to combat this trend.

H.R. 3680 is supported by the American Medical Association, the American Society of Addiction Medicine and the Harm Reduction Coalition.

A party, or organization receiving a grant under this legislation will use the grant for the following reasons:

1. To establish a program for co-prescribing opioid overdose reversal drugs.
2. To train and provide resources for health care providers and pharmacists on the co-prescribing of opioid reversal drugs.
3. To establish mechanisms and processes for tracking patients participating in the program.
4. To purchase opioid overdose reversal drugs for distribution.
5. To offset the copays and other cost sharing associated with opioid overdose reversal drugs to ensure that cost is not a limiting factor for eligible patients.
6. To conduct community outreach, in conjunction with community based organizations, designed to raise awareness of co-prescribing practices and the availability of opioid overdose reversal drugs.
7. To establish protocols to connect patients who have experienced a drug overdose with appropriate treatment, including medications assisted treatment and appropriate counseling and behavioral therapies.

Mr. Speaker, the mounting number of people adversely affected and the over 25,000 lives lost expressly demonstrates the need for this type of legislation.

H.R. 3680 is a positive step in the right direction and I urge all members to support this important legislation.

The SPEAKER pro tempore. The question is on the motion offered by the gentleman from Kentucky (Mr. GUTHRIE) that the House suspend the rules and pass the bill, H.R. 3680, as amended.

The question was taken; and (two-thirds being in the affirmative) the rules were suspended and the bill, as amended, was passed.

A motion to reconsider was laid on the table.

NURTURING AND SUPPORTING HEALTHY BABIES ACT

Mr. GUTHRIE. Mr. Speaker, I move to suspend the rules and pass the bill (H.R. 4978) to require the Government Accountability Office to submit to Congress a report on neonatal abstinence syndrome (NAS) in the United States and its treatment under Medicaid, as amended.

The Clerk read the title of the bill.

The text of the bill is as follows:

H.R. 4978

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

SECTION 1. SHORT TITLE.

This Act may be cited as the "Nurturing And Supporting Healthy Babies Act" or as the "NAS Healthy Babies Act".

SEC. 2. GAO REPORT ON NEONATAL ABSTINENCE SYNDROME (NAS).

(a) IN GENERAL.—Not later than one year after the date of the enactment of this Act, the Comptroller General of the United States shall submit to the Committee on Energy and Commerce of the House of Representatives and the Committee on Finance and the Committee on Health, Education, Labor and Pensions of the Senate a report on neonatal abstinence syndrome (in this section referred to as "NAS") in the United States.

(b) INFORMATION TO BE INCLUDED IN REPORT.—Such report shall include information on the following:

- (1) The prevalence of NAS in the United States, including the proportion of children born in the United States with NAS who are eligible for medical assistance under State Medicaid programs under title XIX of the Social Security Act at birth and the costs associated with NAS through such programs.
- (2) The services for which coverage is available under State Medicaid programs for treatment of infants with NAS.
- (3) The settings (including inpatient, outpatient, hospital-based, and other settings) for the treatment of infants with NAS and the reimbursement methodologies and costs associated with such treatment in such settings.
- (4) The prevalence of utilization of various care settings under State Medicaid programs for treatment of infants with NAS and any Federal barriers to treating such infants under such programs, particularly in non-hospital-based settings.
- (5) What is known about best practices for treating infants with NAS.

(c) RECOMMENDATIONS.—Such report also shall include such recommendations as the

Comptroller General determines appropriate for improvements that will ensure access to treatment for infants with NAS under State Medicaid programs.

SEC. 3. EXCLUDING ABUSE-DETERRENT FORMULATIONS OF PRESCRIPTION DRUGS FROM THE MEDICAID ADDITIONAL REBATE REQUIREMENT FOR NEW FORMULATIONS OF PRESCRIPTION DRUGS.

(a) IN GENERAL.—The last sentence of section 1927(c)(2)(C) of the Social Security Act (42 U.S.C. 1396r-8(c)(2)(C)) is amended by inserting before the period at the end the following: "; but does not include an abuse-deterrent formulation of the drug (as determined by the Secretary), regardless of whether such abuse-deterrent formulation is an extended release formulation".

(b) EFFECTIVE DATE.—The amendment made by subsection (a) shall apply to drugs that are paid for by a State in calendar quarters beginning on or after the date of the enactment of this Act.

SEC. 4. LIMITING DISCLOSURE OF PREDICTIVE MODELING AND OTHER ANALYTICS TECHNOLOGIES TO IDENTIFY AND PREVENT WASTE, FRAUD, AND ABUSE.

(a) IN GENERAL.—Title XI of the Social Security Act is amended by inserting after section 1128J (42 U.S.C. 1320a-7k) the following new section:

"SEC. 1128K. DISCLOSURE OF PREDICTIVE MODELING AND OTHER ANALYTICS TECHNOLOGIES TO IDENTIFY AND PREVENT WASTE, FRAUD, AND ABUSE.

"(a) REFERENCE TO PREDICTIVE MODELING TECHNOLOGIES REQUIREMENTS.—For provisions relating to the use of predictive modeling and other analytics technologies to identify and prevent waste, fraud, and abuse with respect to the Medicare program under title XVIII, the Medicaid program under title XIX, and the Children's Health Insurance Program under title XXI, see section 4241 of the Small Business Jobs Act of 2010 (42 U.S.C. 1320a-7m).

"(b) LIMITING DISCLOSURE OF PREDICTIVE MODELING TECHNOLOGIES.—In implementing such provisions under such section 4241 with respect to covered algorithms (as defined in subsection (c)), the following shall apply:

"(1) NONAPPLICATION OF FOIA.—The covered algorithms used or developed for purposes of such section (including by the Secretary or a State (or an entity operating under a contract with a State)) shall be exempt from disclosure under section 552(b)(3) of title 5, United States Code.

"(2) LIMITATION WITH RESPECT TO USE AND DISCLOSURE OF INFORMATION BY STATE AGENCIES.—

"(A) IN GENERAL.—A State agency may not use or disclose covered algorithms used or developed for purposes of such section except for purposes of administering the State plan (or a waiver of the plan) under the Medicaid program under title XIX or the State child health plan (or a waiver of the plan) under the Children's Health Insurance Program under title XXI, including by enabling an entity operating under a contract with a State to assist the State to identify or prevent waste, fraud, and abuse with respect to such programs.

"(B) INFORMATION SECURITY.—A State agency shall have in effect data security and control policies that the Secretary finds adequate to ensure the security of covered algorithms used or developed for purposes of such section 4241 and to ensure that access to such information is restricted to authorized persons for purposes of authorized uses and disclosures described in subparagraph (A).

"(C) PROCEDURAL REQUIREMENTS.—State agencies to which information is disclosed pursuant to such section 4241 shall adhere to

uniform procedures established by the Secretary.

“(c) COVERED ALGORITHM DEFINED.—In this section, the term ‘covered algorithm’—

“(1) means a predictive modeling or other analytics technology, as used for purposes of section 4241(a) of the Small Business Jobs Act of 2010 (42 U.S.C. 1320a-7m(a)) to identify and prevent waste, fraud, and abuse with respect to the Medicare program under title XVIII, the Medicaid program under title XIX, and the Children’s Health Insurance Program under title XXI; and

“(2) includes the mathematical expressions utilized in the application of such technology and the means by which such technology is developed.”.

(b) CONFORMING AMENDMENTS.—

(1) MEDICAID STATE PLAN REQUIREMENT.—Section 1902(a) of the Social Security Act (42 U.S.C. 1396a(a)) is amended—

(A) in paragraph (80), by striking “and” at the end;

(B) in paragraph (81), by striking the period at the end and inserting “; and”; and

(C) by inserting after paragraph (81) the following new paragraph:

“(82) provide that the State agency responsible for administering the State plan under this title provides assurances to the Secretary that the State agency is in compliance with subparagraphs (A), (B), and (C) of section 1128K(b)(2).”.

(2) STATE CHILD HEALTH PLAN REQUIREMENT.—Section 2102(a)(7) of the Social Security Act (42 U.S.C. 1397bb(a)(7)) is amended—

(A) in subparagraph (A), by striking “, and” at the end and inserting a semicolon;

(B) in subparagraph (B), by striking the period at the end and inserting “; and”; and

(C) by adding at the end the following new subparagraph:

“(C) to ensure that the State agency involved is in compliance with subparagraphs (A), (B), and (C) of section 1128K(b)(2).”.

SEC. 5. MEDICAID IMPROVEMENT FUND.

Section 1941(b)(1) of the Social Security Act (42 U.S.C. 1396w-1(b)(1)) is amended to read as follows:

“(1) IN GENERAL.—There shall be available to the Fund, for expenditures from the Fund for fiscal year 2021 and thereafter, \$5,000,000.”.

The SPEAKER pro tempore. Pursuant to the rule, the gentleman from Kentucky (Mr. GUTHRIE) and the gentleman from Texas (Mr. GENE GREEN) each will control 20 minutes.

The Chair recognizes the gentleman from Kentucky.

Mr. GUTHRIE. Mr. Speaker, I yield myself such time as I may consume.

Mr. Speaker, I rise in support of H.R. 4978, the Nurturing and Supporting Healthy Babies Act, sponsored by Representative EVAN JENKINS. This commonsense, bipartisan piece of legislation contains two important policies which will help strengthen our efforts to curb opioid abuse.

First, the bill requires the Government Accountability Office to carefully study ways to improve care for babies born with neonatal abstinence syndrome, NAS. NAS is a drug-withdrawal syndrome that most commonly occurs after an in-utero exposure to opioids that has, sadly, grown into prevalence in recent years.

As the New England Journal of Medicine noted last year, from 2000 through 2009, the incidence of neonatal abstinence syndrome in the United States

nearly tripled, with several States reporting even larger recent increases.

That same study noted that, in 2013, the number of NICU hospital days nationwide attributed to the care of infants with NAS was six to seven times greater than it was in 2004.

So this bill will expand our knowledge of care of NAS babies by requiring GAO to study what is known about the prevalence of NAS in the United States, the number of NAS babies covered by Medicaid, the settings for care of NAS babies, and access to care for NAS babies under State Medicaid programs.

Based on the recommendation of Representative ANDY BARR, the bill also directs GAO to identify what is known about best practices providing care for infants with NAS.

This comprehensive study, including the research focusing on best practices, can help us improve our efforts to provide care for some of the most vulnerable among us.

This bill takes a second important step to help combat opioid abuse by fixing an unintended consequence with the Medicaid drug rebate program that effectively discourages drug manufacturers from producing opioids that are harder to abuse.

Specifically, this second policy would exempt abuse-deterrent formulations of drugs from the definition of “line extension” for the purpose of calculating Medicaid rebates.

Abuse-deterrent formulations of drugs represent a critically important tool in the Federal policy toolbox. In its Opioids Action Plan, FDA said its goal is to “expand access to abuse-deterrent formulations to discourage abuse.” And in its ADF guidance to manufacturers, the agency said it “considers the development of these products a high public health priority.”

This policy enjoys bipartisan support, and was introduced by Representative BILIRAKIS previously. This policy was also included in the President’s FY 2017 budget, which noted that correcting the law would “incentivize continued development of abuse-deterrent formulations.”

This policy can help save lives. Currently, more than 4 million Americans misuse or abuse prescription painkillers and more than 16,000 individuals die from prescription painkiller overdoses each year. This change will help ensure there is continued investment in important abuse-deterrent drug technologies to help reduce the number of patients who abuse opioid drugs.

Finally, to help offset the cost of the Medicaid drug rebate change, this bill includes a third policy that was introduced by Representative BILIRAKIS in the past, and recently was included in the President’s 2017 budget.

It would protect from public disclosure the program integrity algorithms CMS uses to identify and predict waste, fraud, and abuse in Medicare, Medicaid, and CHIP.

Today the mathematical algorithms and predictive technologies that CMS uses in Medicare, Medicaid, and CHIP are vital to uncovering fraud, waste, and abuse.

However, if various aspects of these algorithms were to become publicly known, fraudsters could utilize the information to redirect their schemes to avoid detection.

This policy would simply prevent the disclosure of these anti-fraud tools from freedom of information-related laws while still allowing CMS and State Medicaid and CHIP programs to freely share algorithms and other predictive analytic tools. Doing so saves taxpayers money and offsets the cost of the rebate policy.

Mr. Speaker, this bill would enhance our knowledge about how to care for infants with NAS, encourage more abuse-deterrent formulations of drugs, and prevent powerful, anti-fraud tools from falling into the wrong hands.

I urge support for this commonsense, bipartisan piece of legislation.

Mr. Speaker, I reserve the balance of my time.

Mr. GENE GREEN of Texas. Mr. Speaker, I yield myself such time as I may consume.

Mr. Speaker and Members, I rise to voice my support for H.R. 4978, the Nurturing and Supporting Healthy Babies Act.

Nearly every community in every State has been impacted by heroin and opioid addiction. Tragically, newborns are the most vulnerable victims of this epidemic. It is estimated that every 25 minutes, a baby is born suffering from neonatal abstinence syndrome, or opioid withdrawal. According to a study by the New England Journal of Medicine, from 2004 to 2013, the incidence of NAS has quadrupled.

Neonatal abstinence syndrome, or NAS, arises from the exposure to opioids during pregnancy and impacts far too many of our Nation’s newborns. Maternal exposure to opioids can be caused by both nonprescription and prescription medication, and the subsequent neonatal withdrawal can result in extended hospital stays and severe, heartbreaking symptoms.

□ 1700

NAS is associated with preterm births and low birth weight complications such as respiratory distress and seizures.

H.R. 4978, the Nurturing and Supporting Healthy Babies Act, is an important part of our efforts to combat drug abuse. The legislation will expand our knowledge of care and treatment for babies with NAS. It will direct the GAO to identify the prevalence of NAS and the number of cases covered by Medicaid, the setting of care for these infants, and identify access barriers to treatment. H.R. 4978 will further our ability to meet this crisis head-on and provide America’s children the healthy start they deserve.

I want to thank the bill’s sponsor, Representative CHERI BUSTOS, for her

leadership in introducing this bill and urge my colleagues to support the Nurturing and Supporting Healthy Babies Act.

Mr. Speaker, I reserve the balance of my time.

Mr. GUTHRIE. Mr. Speaker, I yield 2 minutes to the gentleman from West Virginia (Mr. JENKINS), my friend and the sponsor of this legislation.

Mr. JENKINS of West Virginia. Mr. Speaker, as you have just heard, every 25 minutes in this Nation a baby is born who was exposed to drugs during pregnancy. This is called neonatal abstinence syndrome, or NAS, and it is a devastating way to begin one's life.

Today before the House is the Nurturing and Supporting Healthy Babies Act. I am proud to sponsor this bipartisan legislation that will expand our knowledge of care for babies born with NAS.

Hearing the sounds of babies crying as they experience drug withdrawal is heartbreaking. We can only truly address this crisis by working together. For the past 5 years, I have worked tirelessly in my hometown of Huntington, West Virginia, to help those treating newborns with NAS and to help find new and innovative treatment methods.

This firsthand experience highlighted the many challenges facing hospitals, doctors, nurses, and others seeking to treat these babies, and it has shown me the suffering these babies experience and just how much we need to help them. This bill will bring much-needed information on best practice models of care to our healthcare providers for the most vulnerable impacted by this drug crisis.

Through this bill, we will also learn more about just how many newborns are suffering from withdrawal and more about the Federal obstacles to treating them. This bill will bring us closer to guaranteeing a healthy and happy start to life for every newborn.

I thank the Energy and Commerce Committee's chairmen, Chairman UPTON and Chairman PITTS, for their tireless work to find solutions to the drug crisis and to help NAS babies start their lives healthy and happy. I thank Congresswoman CHERI BUSTOS for joining me in cosponsoring this legislation.

We are making progress. We must continue to strive for solutions to this tragic epidemic.

Mr. GENE GREEN of Texas. Mr. Speaker, I yield 3 minutes to the gentlewoman from Illinois (Mrs. BUSTOS).

Mrs. BUSTOS. Mr. Speaker, I thank Congressman GENE GREEN for yielding me time and for working with me to find better treatment for babies born with neonatal abstinence syndrome, also known as NAS.

Mr. Speaker, every 25 minutes, as we have heard, every 25 minutes in America, another baby is born addicted to heroin or other deadly opioids. It results from their mother's struggle with addiction.

As the heroin epidemic sweeps our towns and our cities throughout the United States and impacts far too many families, many of the most overlooked victims have been the most vulnerable among us. It is heart-wrenching and it is terrible that an innocent newborn, trembling, crying uncontrollably, clenching her small fists, and gasping for air, again, is born every 25 minutes.

These are just a few of the symptoms babies face when they are born addicted to opioids, and nothing from my perspective as a mother and as a grandmother could be more demanding of our immediate attention. That is why I joined Congressman EVAN JENKINS from West Virginia to introduce the Nurturing and Supporting Healthy Babies Act.

This bipartisan legislation will improve care for babies born with neonatal abstinence syndrome. It will expand our knowledge of care for NAS babies, including its prevalence in the United States. It will also examine access to care for NAS babies under the State Medicaid programs and direct the Government Accountability Office to identify any Federal obstacles to care for NAS babies.

In short, this legislation will do a top-to-bottom review to make sure we are doing everything we can to help babies born with addiction and withdrawal.

Mr. Speaker, we must do our part to help all children reach their full potential.

Mr. GUTHRIE. Mr. Speaker, I yield 2 minutes to the gentleman from Florida (Mr. BILIRAKIS), my friend and colleague from the Committee on Energy and Commerce.

Mr. BILIRAKIS. Mr. Speaker, I rise in support of H.R. 4978, the Nurturing and Supporting Healthy Babies Act. This bill will help our most vulnerable Americans.

H.R. 4978 will require the GAO to study and report on the prevalence of neonatal abstinence syndrome to help determine the size and scope of this prescription drug problem and its impact on newborns.

Neonatal abstinence syndrome refers to a group of conditions that occur when a child is born addicted to narcotics and is going through withdrawal. This, unfortunately, affects my district in Florida and all over the country.

I visited babies in the hospital. In 2013, during a drug summit in Pasco County, health officials discussed the growing problem of babies born addicted to prescription drugs. Pinellas County, my home county, at that time ranked first in the State for babies born addicted. We must do all we can to help those struggling infants and their families.

This bill also includes two provisions I have worked on to reform Medicaid payments for abuse deterrent formulations and fight fraud in Medicare and Medicaid. Currently, Medicaid does not

sufficiently cover abuse deterrent formulations for generic drugs. During a hearing, I spoke to Secretary Burwell about this problem, and she expressed to me the need for a legislative fix to this payment issue. This bill provides a solution and helps prevent drug abuse within Medicaid.

This bill also includes a provision to protect the predictive analytic algorithm which identifies and prevents the payment of improper claims in Medicare. These tools, designed to prevent fraud, need to be protected from being disclosed to bad actors.

Back in 2013, I introduced legislation to protect these predictive analytic algorithms from the Freedom of Information Act disclosure, and H.R. 4978 includes this important legislation.

This legislation will help protect our newborns and all those facing prescription drug abuse and addiction.

Mr. Speaker, again, I thank Representative JENKINS and the Energy and Commerce Committee, and I urge my colleagues to support H.R. 4978.

Mr. GENE GREEN of Texas. Mr. Speaker, I reserve the balance of my time.

Mr. GUTHRIE. Mr. Speaker, I yield 2 minutes to the gentleman from Kentucky (Mr. BARR), my good friend and fellow Kentuckian.

Mr. BARR. Mr. Speaker, I thank my colleague from Kentucky (Mr. GUTHRIE) for his leadership on this issue, and I want to thank my colleague from West Virginia (Mr. JENKINS) for his leadership on this important legislation.

Mr. Speaker, I rise today to encourage my colleagues to support his bill, H.R. 4978, the NAS Healthy Babies Act, which seeks to increase our understanding of neonatal abstinence syndrome and would help further strengthen best practices for treating this dangerous but preventable condition.

According to the National Institute on Drug Abuse, there has been a dramatic increase in maternal opioid use; and as a tragic result, a baby is born suffering from neonatal abstinence syndrome, or NAS, every 25 minutes in the United States.

To help address this public health challenge, this legislation contains language drafted in coordination with my constituent, University of Kentucky pediatrician, Dr. Henrietta Bada-Ellzey, and members of the Sixth Congressional District Drug Abuse Task Force. Specifically, this provision would mandate a study which would gain critical data about the specific treatment options given to newborns with NAS during and after their hospital stay and identify treatment outcomes. This vital information would help lead pediatricians to provide improved care for the most vulnerable in our society.

I would like to thank the leader's office and the Energy and Commerce Committee staff for giving me an opportunity to include this important recommendation from the Sixth Congressional District Drug Abuse Task

Force in this legislation. The opioid heroin crisis in America impacts every congressional district, and my district is not immune. So I am proud that the people's House is taking up a series of important measures to combat this scourge in our society, and I can't think of any more important measure than dealing with these innocent victims of NAS.

GENERAL LEAVE

Mr. GUTHRIE. Mr. Speaker, I ask unanimous consent that all Members have 5 legislative days in which to revise and extend their remarks and insert extraneous materials in the RECORD on the bill.

The SPEAKER pro tempore. Is there objection to the request of the gentleman from Kentucky?

There was no objection.

Mr. GUTHRIE. Mr. Speaker, I yield 2 minutes to the gentlewoman from Missouri (Mrs. WAGNER), my good friend.

Mrs. WAGNER. I thank the gentleman for yielding.

Mr. Speaker, I rise today in support of the Nurturing and Supporting Healthy Babies Act, which will improve care for babies who are so sadly suffering from exposure to opioids while in their mother's womb.

Hospital usage for opioid overuse in Missouri increased 137 percent between 2005 and 2014, with the highest rates being in the St. Louis region. We must do everything we can to combat this epidemic from all angles.

Mr. Speaker, it is absolutely heart-breaking to stand in front of you knowing that in the United States an opioid-dependent baby is born every 20 minutes, immediately suffering from withdrawal: trembling, crying inconsolably, and clenching their tiny muscles as they gasp for breath.

My principal mission as a Member of this Chamber is to provide a voice to the voiceless, and it is our duty to defend the most vulnerable. Ensuring babies have access to care and allowing them to recover from these horrible physical and emotional circumstances is not only common sense, but, Mr. Speaker, it is simply the right thing to do.

Mr. Speaker, I urge the passage of H.R. 4978, and I thank Representative EVAN JENKINS for introducing this legislation.

Mr. GUTHRIE. Mr. Speaker, I yield 2 minutes to the gentleman from Georgia (Mr. CARTER), my good friend.

Mr. CARTER of Georgia. I thank the gentleman from Kentucky for yielding and for his work on this most important subject, as well as the gentleman from West Virginia.

Mr. Speaker, I rise today in support of H.R. 4978, the NAS Healthy Babies Act because newborn infants deserve every opportunity to live a happy and healthy life.

H.R. 4978 requires the Government Accountability Office to compile a report on the amount of babies born each year with NAS, Medicaid insurance coverage for families that have an NAS

baby, and Federal obstacles for children who seek treatments for NAS. With this new information, we can increase our understanding of NAS and our ability to provide care for babies born with NAS. This new understanding is vital, considering the number of newborns with NAS has increased with the rise in the number of Americans addicted to opioids.

As a lifelong pharmacist, I believe we should take every step possible to fight the addiction crisis in America, and the protection of our children should be our top priority. I encourage all of my colleagues to support this measure.

Mr. GUTHRIE. Mr. Speaker, I yield such time as he may consume to the gentleman from Maine (Mr. POLIQUIN).

Mr. POLIQUIN. Mr. Speaker, it cannot be said enough that every 25 minutes in this great country, there is a baby born addicted to drugs. Last year alone, 1,000 of those babies were born in the great State of Maine.

Now, 80 percent of these addicted infants are covered by Medicaid and treated at local hospitals, but our hospitals are overwhelmed. They are not equipped to provide the specialized care that these babies desperately need to recover from the drugs in their tiny bodies. I am very proud to serve as an original cosponsor of the Nurturing and Supporting Healthy Babies Act.

□ 1715

I am thrilled that this bill, Mr. Speaker, is being considered today on the floor. I want to congratulate Congressman EVAN JENKINS from West Virginia, a Republican, and I want to congratulate Congresswoman BUSTOS from Illinois, a Democrat, for their leadership on this issue. This is not a political issue, Mr. Speaker. This is about our kids. This is about our babies. This is about that generation.

H.R. 4978 made sure that we get the information we need as to how hospitals and other medical facilities are currently treating these addicted babies, such that we can fill in the gap with Medicaid coverage.

Mr. Speaker, every baby born into this world deserves our compassion and our care. This bill offers real hope for a healthy and a safe and a loving start for thousands of American babies born addicted to drugs.

Let's all get together and get this done, Mr. Speaker. This is not a political issue. This is about our kids.

Mr. GENE GREEN from Texas. Mr. Speaker, I yield back the balance of my time.

Mr. GUTHRIE. Mr. Speaker, I appreciate my friend from West Virginia and our colleague from Illinois for moving this forward.

I urge the passage of H.R. 4978, and I would like for my colleagues to vote for this.

I yield back the balance of my time.

Ms. JACKSON LEE. Mr. Speaker, I rise in support of H.R. 4978, the "Nurturing & Supporting Healthy Babies Act," approved by the Energy and Commerce Committee.

In the past decade and a half, the growth in the number of physicians prescribing opioids to help patients deal with pain from surgeries, dental work and chronic conditions has resulted in an increasing number of patients becoming dependent on the powerful and highly addictive painkillers—with patients not only abusing the use of those painkillers but often turning to heroin once their opioid prescription ended.

The Centers for Disease Control and Prevention reports that nearly 259 million opioid prescriptions were written in 2012, more than enough for every adult in the United States.

It is estimated that in 2013 nearly 4.5 million people in the United States without a valid medical need were using prescription painkillers.

The Health and Human Services Department estimates that the number of unintentional overdose deaths from prescription painkillers almost quadrupled between 1999 and 2013 and that abuse of prescription opioids now kills nearly 30,000 Americans each year.

Both states and the federal government have begun responding to this growing public health crisis, with many states moving to make anti-overdose drugs more available and shield first-responders from liability in administering those drugs.

President Obama, meanwhile, has updated prescribing guidelines to encourage doctors to be more cautious when prescribing opioid painkillers and to emphasize non-opioid therapies for certain conditions.

Additionally, the Obama administration has awarded \$94 million to community health centers to improve and expand the delivery of substance abuse services.

In the president's FY 2017 budget the administration proposed \$1.1 billion to combat drug addiction and is also considering modifying certain rules to improve treatment.

Our counterparts in the Senate, on March 10, 2016, passed S. 524, an antiopioid abuse bill that would authorize grants for opioid treatment services and first-responder training in using anti-overdose drug by a 94–1 vote, as well as create a task force to review and update best practices for prescribing pain medication.

S. 524 also mandates investigations into heroin distribution and unlawful distribution of prescription opioids, and requires the creation of a national drug awareness campaign that takes into account the association between prescription opioid abuse and heroin use.

The science indicates that opioids can have particularly harrowing effects on infants whose mothers took the drugs during pregnancy, including medical issues stemming from drug withdrawal known as neonatal abstinence syndrome.

Advocacy groups note that the incidence of neonatal abstinence syndrome almost tripled from 1.20 per 1,000 hospital births in 2000 to 3.39 per 1,000 hospital births in 2009.

In conjunction with H.R. 4978, the "Nurturing & Supporting Healthy Babies Act," the Congressional Budget Office (CBO) has estimated that 45 percent of births in the United States are now covered by the joint federal-state Medicaid program.

This bill directs the Government Accountability Office (GAO) to report to Congress on neonatal abstinence syndrome among children covered by Medicaid, including any federal barriers to treating such infants.

The GAO must also provide recommendations for improvements that will ensure access to treatment for infants with neonatal abstinence syndrome under state Medicaid programs.

Additionally, the measure modifies Medicaid to provide incentives for the development of abuse-deterrent formulations of prescription drugs and to prevent disclosure of Medicaid anti-fraud algorithms.

The bill requires that GAO's report identify the prevalence of neonatal abstinence syndrome in the United States, including the proportion of affected children who are eligible for Medicaid at birth and the costs associated with neonatal abstinence syndrome.

GAO will also be required to examine Medicaid-eligible services that are available for treatment of infants with neonatal abstinence syndrome, settings for such treatment, related reimbursement methodologies and costs, and the utilization of various care settings under state Medicaid programs for such treatment.

This GAO's report must be submitted to Congress within one year of the bill's enactment.

Seeking to right the same wrongs as H.R. 4978, the "Nurturing And Supporting Healthy Babies Act," I introduced the, "Stop Infant Mortality and Recidivism Reduction Act of 2016," or the "SIMARRA Act," which will help the Federal Bureau of Prisons to improve the effectiveness and efficiency of the Federal prison system for pregnant offenders, by establishing a pilot program of critical-stage, developmental nurseries in Federal prisons for children born to inmates.

It is time that our nation recognizes a long-persistent need to break the cycle of generational, institutional incarceration amongst mothers serving time for non-violent crimes and the children they birth behind prison bars.

H.R. 5130, the, "SIMARRA Act of 2016," gives those infants born to incarcerated mothers a chance to succeed in life.

"SIMARRA" is not merely yet another second chance program, demanding leniency from the criminal justice system.

Instead, H.R. 5130 asks our national criminal justice system what it can do for those young Americans born and relegated to a life of nearly impossible odds of survival.

"SIMARRA" provides that first chance—a first chance for American infants—that many of their mothers, born themselves to mothers behind bars, never received.

The bill excludes abuse-deterrent formulations of prescription drugs from Medicaid's additional rebate requirement for new prescription drug formulations, which is intended to encourage the development of these drugs by allowing drug companies to reduce the rebates they otherwise must pay to Medicaid.

The measure also limits disclosure of predictive modeling and other analytics technologies that are used to identify and prevent waste, fraud and abuse in Medicaid, including by exempting covered program integrity algorithms from the Freedom of Information Act (FOIA) and requiring state Medicaid and Children's Health Insurance Program (CHIP) agencies to have adequate data security policies to ensure the security of covered algorithms.

Finally, the measure makes \$5 million available to the Medicaid Improvement Fund for expenditures for FY 2021 and beyond.

CBO estimates that enacting H.R. 4978 would not, on net, change direct spending over the 2017–2026 period.

While opponents argue that some provisions of the bill will increase direct spending by \$80 million over that period, I point out that other provisions would decrease direct spending by the same amount balancing the total cost.

Enacting the legislation would affect direct spending, rather than revenues.

Under current law, pharmaceutical manufacturers are required to pay rebates to states for prescription drugs provided through Medicaid.

The formula which determines rebate amounts in the Medicaid program has several components, with some components generating rebates that are paid to states and shared with the federal government, and others generating rebates that are paid to states and subsequently transferred in their entirety to the federal government.

Abuse deterrent formulation, or ADF, is a new technology that is being implemented by the pharmaceutical industry to prevent the abuse of prescription pain medications.

For example, some ADFs make it more difficult for an individual to crush, break, or dissolve a drug to inappropriately extract and use its active ingredient.

Under the bill, the component of the rebate formula that would no longer apply to ADFs of brand-name drugs is one that is paid to states and transferred in full to the federal government.

Therefore, states would not be directly affected by this section of the bill.

CBO estimates that this section would increase federal Medicaid costs by about \$75 million over the 2017–2026 period by reducing rebates.

CBO anticipates that an increasing number of ADFs of brand name drugs will launch over time; therefore, the component of the rebate affected by H.R. 4978 would also grow over time.

CBO estimates that enacting the legislation would not increase net direct spending or on-budget deficits by more than \$5 billion in any of the four consecutive 10-year periods beginning in 2026.

H.R. 4978 contains no intergovernmental or private-sector mandate as defined in UMRA and would impose no costs on state, local, or tribal governments.

In sum, H.R. 4978, the "Nurturing & Supporting Healthy Babies Act," is a valuable piece of legislation that I encourage my colleagues to support.

Additionally, I urge my colleagues to join me in sponsoring and supporting all legislation targeting the improvement of care for the prevention of infant abuse and neglect, such as H.R. 5130, the, "Stop Infant Mortality and Recidivism Reduction Act of 2016" or the "SIMARRA Act."

The SPEAKER pro tempore. The question is on the motion offered by the gentleman from Kentucky (Mr. GUTHRIE) that the House suspend the rules and pass the bill, H.R. 4978, as amended.

The question was taken; and (two-thirds being in the affirmative) the rules were suspended and the bill, as amended, was passed.

The title of the bill was amended so as to read: "A bill to require the Government Accountability Office to sub-

mit to Congress a report on neonatal abstinence syndrome (NAS) in the United States and its treatment under Medicaid, and for other purposes."

A motion to reconsider was laid on the table.

IMPROVING TREATMENT FOR PREGNANT AND POSTPARTUM WOMEN ACT OF 2016

Mr. GUTHRIE. Mr. Speaker, I move to suspend the rules and pass the bill (H.R. 3691) to amend the Public Health Service Act to reauthorize the residential treatment programs for pregnant and postpartum women and to establish a pilot program to provide grants to State substance abuse agencies to promote innovative service delivery models for such women, as amended.

The Clerk read the title of the bill.

The text of the bill is as follows:

H.R. 3691

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

SECTION 1. SHORT TITLE.

This Act may be cited as the "Improving Treatment for Pregnant and Postpartum Women Act of 2016".

SEC. 2. REAUTHORIZATION OF RESIDENTIAL TREATMENT PROGRAMS FOR PREGNANT AND POSTPARTUM WOMEN.

Section 508 of the Public Health Service Act (42 U.S.C. 290bb-1) is amended—

(1) in subsection (p), in the first sentence, by inserting "(other than subsection (r))" after "section"; and

(2) in subsection (r), by striking "such sums" and all that follows through "2003" and inserting "\$16,900,000 for each of fiscal years 2017 through 2021".

SEC. 3. PILOT PROGRAM GRANTS FOR STATE SUBSTANCE ABUSE AGENCIES.

(a) IN GENERAL.—Section 508 of the Public Health Service Act (42 U.S.C. 290bb-1) is amended—

(1) by redesignating subsection (r), as amended by section 2, as subsection (s); and

(2) by inserting after subsection (q) the following new subsection:

"(r) PILOT PROGRAM FOR STATE SUBSTANCE ABUSE AGENCIES.—

"(1) IN GENERAL.—From amounts made available under subsection (s), the Director of the Center for Substance Abuse Treatment shall carry out a pilot program under which competitive grants are made by the Director to State substance abuse agencies to—

"(A) enhance flexibility in the use of funds designed to support family-based services for pregnant and postpartum women with a primary diagnosis of a substance use disorder, including opioid use disorders;

"(B) help State substance abuse agencies address identified gaps in services furnished to such women along the continuum of care, including services provided to women in nonresidential based settings; and

"(C) promote a coordinated, effective, and efficient State system managed by State substance abuse agencies by encouraging new approaches and models of service delivery.

"(2) REQUIREMENTS.—In carrying out the pilot program under this subsection, the Director shall—

"(A) require State substance abuse agencies to submit to the Director applications, in such form and manner and containing such information as specified by the Director, to be eligible to receive a grant under the program;

"(B) identify, based on such submitted applications, State substance abuse agencies that are eligible for such grants;

“(C) require services proposed to be furnished through such a grant to support family-based treatment and other services for pregnant and postpartum women with a primary diagnosis of a substance use disorder, including opioid use disorders;

“(D) not require that services furnished through such a grant be provided solely to women that reside in facilities;

“(E) not require that grant recipients under the program make available through use of the grant all services described in subsection (d); and

“(F) consider not applying requirements described in paragraphs (1) and (2) of subsection (f) to applicants, depending on the circumstances of the applicant.”

“(3) REQUIRED SERVICES.—

“(A) *IN GENERAL.*—The Director shall specify a minimum set of services required to be made available to eligible women through a grant awarded under the pilot program under this subsection. Such minimum set—

“(i) shall include requirements described in subsection (c) and be based on the recommendations submitted under subparagraph (B); and

“(ii) may be selected from among the services described in subsection (d) and include other services as appropriate.

“(B) *STAKEHOLDER INPUT.*—The Director shall convene and solicit recommendations from stakeholders, including State substance abuse agencies, health care providers, persons in recovery from substance abuse, and other appropriate individuals, for the minimum set of services described in subparagraph (A).

“(4) *DURATION.*—The pilot program under this subsection shall not exceed 5 years.

“(5) *EVALUATION AND REPORT TO CONGRESS.*—The Director of the Center for Behavioral Health Statistics and Quality shall fund an evaluation of the pilot program at the conclusion of the first grant cycle funded by the pilot program. The Director of the Center for Behavioral Health Statistics and Quality, in coordination with the Director of the Center for Substance Abuse Treatment shall submit to the relevant committees of jurisdiction of the House of Representatives and the Senate a report on such evaluation. The report shall include at a minimum outcomes information from the pilot program, including any resulting reductions in the use of alcohol and other drugs; engagement in treatment services; retention in the appropriate level and duration of services; increased access to the use of medications approved by the Food and Drug Administration for the treatment of substance use disorders in combination with counseling; and other appropriate measures.

“(6) *STATE SUBSTANCE ABUSE AGENCIES DEFINED.*—For purposes of this subsection, the term ‘State substance abuse agency’ means, with respect to a State, the agency in such State that manages the Substance Abuse Prevention and Treatment Block Grant under part B of title XIX.”.

(b) *FUNDING.*—Subsection (s) of section 508 of the Public Health Service Act (42 U.S.C. 290bb–1), as amended by section 2 and redesignated by subsection (a), is further amended by adding at the end the following new sentence: “Of the amounts made available for a year pursuant to the previous sentence to carry out this section, not more than 25 percent of such amounts shall be made available for such year to carry out subsection (r), other than paragraph (5) of such subsection. Notwithstanding the preceding sentence, no funds shall be made available to carry out subsection (r) for a fiscal year unless the amount made available to carry out this section for such fiscal year is more than the amount made available to carry out this section for fiscal year 2016.”.

SEC. 4. CUT-GO COMPLIANCE.

Subsection (f) of section 319D of the Public Health Service Act (42 U.S.C. 247d–4) is amended by striking “through 2018” and inserting

“through 2016, \$133,300,000 for fiscal year 2017, and \$138,300,000 for fiscal year 2018”.

The SPEAKER pro tempore. Pursuant to the rule, the gentleman from Kentucky (Mr. GUTHRIE) and the gentleman from Texas (Mr. GENE GREEN) each will control 20 minutes.

The Chair recognizes the gentleman from Kentucky.

GENERAL LEAVE

Mr. GUTHRIE. Mr. Speaker, I ask unanimous consent that all Members may have 5 legislative days in which to revise and extend their remarks and insert extraneous materials in the RECORD on the bill.

The SPEAKER pro tempore. Is there objection to the request of the gentleman from Kentucky?

There was no objection.

Mr. GUTHRIE. Mr. Speaker, I yield myself such time as I may consume.

Mr. Speaker, I rise in support of H.R. 3691, the Improving Treatment for Pregnant and Postpartum Women Act of 2015, introduced by my colleagues on the Energy and Commerce Committee, Mr. BEN RAY LUJÁN of New Mexico, Mr. TONKO of New York, Ms. CLARKE of New York, Ms. MATSUI of California, and Mr. CÁRDENAS of California.

In most instances, withdrawal or detoxification is not clinically appropriate for pregnant women with opioid use disorders. The withdrawal symptoms associated with discontinuing opioid use in pregnant women can lead to miscarriage or other negative birth outcomes. Buprenorphine and methadone can be used to treat a woman’s opioid use disorder while pregnant. Such treatment can result in improved outcomes for both mothers and babies.

Unfortunately, babies exposed to opioids in utero may be born with neonatal abstinence syndrome, NAS, which refers to medical issues associated with opioid withdrawal in newborns. Mothers suffering from opioid use disorder may be sent home with babies who have NAS with very little guidance or support, which can have negative consequences for their babies.

NAS can result from the use of prescription opioids as prescribed for medical reasons, abuse of prescription opioid medication, or the use of illegal opioids like heroin.

The grant program reauthorized in H.R. 3691 helps support residential treatment facilities where women and their children receive support, education, treatment, and counseling that they need to address opioid addiction and NAS. The newly created pilot program will allow States more flexibility in providing these services for women and children in need.

Mr. Speaker, I urge my colleagues to support this legislation.

I reserve the balance of my time.

Mr. GENE GREEN of Texas. Mr. Speaker, I yield myself such time as I may consume.

Mr. Speaker, I rise and voice my support for H.R. 3691, the Improving Treatment for Pregnant and Postpartum

Women Act. The Pregnant and Postpartum Women—PPW—program is administered by the Substance Abuse and Mental Health Services Administration—SAMHSA—Center for Substance Abuse Treatment.

The program was designed to expand the availability of comprehensive residential substance abuse treatment, prevention, and recovery support services for pregnant and postpartum women and their children. The program provides grants to public and nonprofit private entities to provide substance use disorder treatment to women in residential facilities.

For too long our laws have taken a punitive approach with pregnant women and new mothers suffering from addiction. Criminal approaches have failed to work. Solutions should emphasize a nonpunitive, public health approach like the PPW program.

Substance abuse treatment that supports the family as a unit has proven effective for maintaining sobriety and enhancing child well-being. Given the magnitude of this epidemic, there is a need for increased availability of treatment options that are responsive to women’s complex responsibilities.

H.R. 3691 reauthorizes residential treatment programs for pregnant and postpartum women. This vital program provides for substance use treatment for women in need as well as their minor children. Family-based treatment services include individual and family counseling, prenatal and postpartum care, and training on parenting.

The bill will also create a pilot program to allow up to 25 percent of the grants to be made for outpatient treatment services. This will give State substance abuse agencies greater flexibility to provide access to treatment and address gaps in delivery of care for pregnant and postpartum women, including services in nonresidential settings, and encourage new approaches of services available to pregnant women along the continuum of care.

I want to thank the bill’s sponsor, Representative BEN RAY LUJÁN, who is a member of the Energy and Commerce Committee and the Health Subcommittee, for his leadership in introducing this bill.

I urge my colleagues to support the Improving Treatment for Pregnant and Postpartum Women Act.

I reserve the balance of my time.

Mr. GUTHRIE. Mr. Speaker, I yield 3 minutes to the gentleman from Georgia (Mr. CARTER).

Mr. CARTER of Georgia. Mr. Speaker, I thank the gentleman for yielding.

Mr. Speaker, I rise today in support of H.R. 3691 so that pregnant and postpartum women can receive comprehensive, residential substance abuse treatment when fighting opioid drug addiction.

According to the National Perinatal Association, 4 percent of all live births in the U.S. occur in women who abuse illicit or prescription drugs, such as

opioid pain relievers. This would equate to 159,436 births in 2014 from women who abuse illicit or prescription drugs.

This is simply unacceptable. We must take action to ensure that pregnant and postpartum women receive the care they need to protect American families.

H.R. 3691 simply states that support should be extended for residential substance abuse treatment programs for pregnant and postpartum women through 2020 and the Center for Substance Abuse Treatment should carry out a pilot program to make grants to State substance abuse agencies to support services for pregnant and postpartum women who have a substance abuse disorder.

By extending these services and working through this pilot program, we can ensure that pregnant and postpartum women can receive the care that they need so that they can care for their families. That is why I am supporting H.R. 3691.

I encourage my colleagues to support this bill so we can extend care to all mothers and soon-to-be mothers who fight drug addiction.

Mr. GENE GREEN of Texas. Mr. Speaker, I yield 5 minutes to the gentleman from New Mexico (Mr. BEN RAY LUJÁN), the cosponsor of the bill.

Mr. BEN RAY LUJÁN of New Mexico. Mr. Speaker, I would like to start by thanking the chairman and ranking member of the Energy and Commerce Committee and the Subcommittee on Health for their bipartisan efforts to address the Nation's drug crisis and for advancing my legislation, the Improving Treatment for Pregnant and Postpartum Women Act.

Our Nation continues to face a substance abuse crisis that is tearing apart communities and families. In New Mexico, we have seen a crisis that is multi-generational, with people growing up in communities where abuse is commonplace.

The grant program for residential treatment that my bill enhances is an important part of our effort to break the cycle of drug abuse that grips our communities. My bill would also increase funding for the Pregnant and Postpartum Women grant.

As originally written, my bill contained an authorization of \$40 million, significantly above the current level, to avoid any cuts to existing residential programs. Through bipartisan cooperation, we arrived at a small increase over the next 5 years.

By focusing on women with young children and soon-to-be mothers, we help ensure that these families get on the right path from the very beginning. People want to be better. But, unfortunately, too often there are too few resources and avenues for help.

Certainly this is true in New Mexico, which is among the States most impacted by the epidemic plaguing our country. Too many people are suffering, and too many people are being shut out from access to help.

This bill helps address this by creating a demonstration project in the existing Pregnant and Postpartum Women grant program to allow grants to be used for nonresidential care.

Residential programs are critically important where they are available. In my home State of New Mexico, there are far too few residential programs to serve the needs of my constituents. In addition, many of the existing facilities have wait lists. With New Mexico's vastness, residential facilities are out of reach for too many.

That is why this demonstration project is critical. It will allow us, while continuing to support residential treatment programs, to explore how to ensure the services and care we are providing work for those in need.

While I am pleased that we have been able to work together across the aisle in an effort to authorize increased funding and ensure the inclusion of the demonstration project, I think it is important to say more must be done.

Supporting residential facilities and innovation to make treatment more available is essential, and both will require significant investments.

Mr. Speaker, in 2014, 47,055 people died from drug overdoses. That is 129 people per day. We must do more.

I hope that, as we continue this conversation beyond today, we can all come to recognize the need for funding above and beyond what we are doing today.

I respectfully ask for support of this bill.

Mr. GUTHRIE. Mr. Speaker, I reserve the balance of my time.

Mr. GENE GREEN of Texas. Mr. Speaker, I yield 5 minutes to the gentlewoman from Texas (Ms. JACKSON LEE), my colleague and neighbor from Houston.

Ms. JACKSON LEE. Mr. Speaker, let me congratulate the gentleman from Texas for his leadership and the gentleman from New Mexico for his outstanding leadership on this important legislation and his concern and passion.

Let me thank my friends who are managing the legislation and let the American people know and our colleagues know that we are continuing our commitment on dealing with the issues of addiction, in this instance, opioid. And, of course, we know that there are other forms of addiction, from alcohol, to crack, to cocaine, but we are moving forward.

I rise to support H.R. 3691, the Improving Treatment for Pregnant and Postpartum Women Act of 2015. It is clear that this is an issue that has plagued both the woman and as well the newborn baby.

Let me offer to say that President Obama has updated that guideline to encourage doctors to be more cautious when prescribing opioid painkillers and to emphasize nonopioid therapies for certain conditions. Many times women who are pregnant are under treatment.

Additionally, the Obama administration has awarded \$94 million to com-

munity health centers to improve and expand the delivery of substance abuse services. In the President's FY 2017 budget, the administration proposed \$1.1 billion to combat drug addiction considering modifying certain rules to improve treatment.

As misuse of opioids have increased over the past decade, so has the incidence of neonatal abstinence syndrome, referring to the medical effects on newborn infants suffering from drug withdrawal because their mothers were drug addicts.

The GAO report found that a lack of available treatment programs for pregnant women and newborns with neonatal abstinence syndrome, including the availability of comprehensive care and enabling services, such as transportation and child care, has hampered Federal efforts to address the issue.

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I am glad that this bill, which is why I rise to support it, reauthorizes residential treatment grant programs for pregnant and postpartum women who have substance abuse problems—programs that are administered by the Health and Human Service Department's Center for Substance Abuse Treatment, increasing the authorized funding level by 6 percent. This gives me an opportunity to say that, with regard to all of these bills, I know that we will all join together to make sure the right funding is available for these bills to really work.

I join in support of this legislation and add to it legislation that I have introduced, Improving Safe Care for the Prevention of Infant Abuse and Neglect Act, and, which I introduced recently, the Stop Infant Mortality and Recidivism Reduction Act of 2016, which will help the Federal Bureau of Prisons to improve the effectiveness and efficiency of the Federal prison system for pregnant offenders by establishing a pilot program of critical stage development nurseries in Federal prisons for children born to inmates. Likewise, at that time, one may discover the concerns that are being expressed here today.

However, the Improving Treatment for Pregnant and Postpartum Women Act of 2016, also establishes a pilot program to provide grants to State substance abuse agencies to promote innovative service delivery models for pregnant women who have a substance use disorder, such as opioid addiction, including for family-based services in nonresidential settings.

This is a good bill because it is more than the adult who is being treated here. It is a good bill because we are concerned about the newborn, the innocent baby who needs to have a start in life. In this instance, this legislation will both treat the mother and provide assistance—residential and nonresidential care—so that these individuals can have the starts in life that they need.

Let us be reminded of the fact that this addiction of these drugs becomes

an illness. We have seen overdoses that cause the loss of life. Let us be part of stemming the tide, but, more importantly, let us help those who are trying to hang onto life and to start a new life. This legislation does that, and I ask my colleagues to support it.

Again, I thank the gentleman from Texas for his leadership, and I thank him for yielding to me.

Mr. Speaker, I rise in support of H.R. 3691, the "Improving Treatment for Pregnant & Postpartum Women Act of 2015," that was approved by the Energy and Commerce Committee.

In the past decade and a half, the growth in the number of physicians prescribing opioids to help patients deal with pain from surgeries, dental work and chronic conditions has resulted in an increasing number of patients becoming dependent on the powerful and highly addictive painkillers—with patients not only abusing the use of those painkillers but often turning to heroin once their opioid prescription ended.

The Centers for Disease Control and Prevention reports that nearly 259 million opioid prescriptions were written in 2012, more than enough for every adult in the United States.

It is estimated that in 2013 nearly 4.5 million people in the United States without a valid medical need were using prescription painkillers.

The Health and Human Services Department estimates that the number of unintentional overdose deaths from prescription painkillers almost quadrupled between 1999 and 2013.

Abuse of prescription opioids now kills nearly 30,000 Americans each year.

Both states and the federal government have begun responding to this growing public health crisis, with many states moving to make anti-overdose drugs more available and shield first-responders from liability in administering those drugs.

President Obama, meanwhile, has updated prescribing guidelines to encourage doctors to be more cautious when prescribing opioid painkillers and to emphasize non-opioid therapies for certain conditions.

Additionally, the Obama administration has awarded \$94 million to community health centers to improve and expand the delivery of substance abuse services.

In the president's FY 2017 budget the administration proposed \$1.1 billion to combat drug addiction, considering modifying certain rules to improve treatment.

As misuse of opioids has increased over the past decade, so has the incidence of neonatal abstinence syndrome, referring to the medical effects on newborn infants suffering from drug withdrawal because their mothers were drug addicts.

A 2015 Government Accountability Office (GAO) report found that a lack of available treatment programs for pregnant women and newborns with neonatal abstinence syndrome, including the availability of comprehensive care and enabling services such as transportation and child care, has hampered federal efforts to address the issue.

This bill reauthorizes residential treatment grant programs for pregnant and postpartum women who have substance abuse problems that are administered by the Health and Human Services (HHS) Department's Center

for Substance Abuse Treatment, increasing the authorized funding level by 6%.

Seeking to right the same wrongs as H.R. 4843, the "Improving Safe Care for the Prevention of Infant Abuse and Neglect Act," I introduced the, "Stop Infant Mortality and Recidivism Reduction Act of 2016," or the "SIMARRA Act," which will help the Federal Bureau of Prisons to improve the effectiveness and efficiency of the Federal prison system for pregnant offenders, by establishing a pilot program of critical-stage, developmental nurseries in Federal prisons for children born to inmates.

It is time that our nation recognizes a long-persistent need to break the cycle of generational, institutional incarceration amongst mothers serving time for non-violent crimes and the children they birth behind prison bars.

H.R. 5130, the, "SIMARRA Act of 2016," gives those infants born to incarcerated mothers a chance to succeed in life.

"SIMARRA" is not merely yet another second chance program, demanding leniency from the criminal justice system.

Instead, H.R. 5130 asks our national criminal justice system what it can do for those young Americans born and relegated to a life of nearly impossible odds of survival.

"SIMARRA" provides that first chance—a first chance for American infants—that many of their mothers, born themselves to mothers behind bars, never received.

The "Improving Treatment for Pregnant & Postpartum Women Act of 2015," also establishes a pilot program to provide grants to state substance abuse agencies to promote innovative service delivery models for pregnant women who have a substance use disorder, such as opioid addiction, including for family-based services in nonresidential settings.

Of the amounts appropriated for the HHS residential treatment program, up to 25% would be available to carry out the pilot program.

No funds would be made available to carry out the pilot program for a fiscal year, however, unless the amount made available to carry out the residential treatment program for the fiscal year is more than the comparable amount made available for FY 2016.

The Senate on March 10, 2016, passed by a 94–1 vote, S 524, an antiopioid abuse bill that would authorize grants for opioid treatment services and first-responder training in using anti-overdose drugs, as well as create a task force to review and update best practices for prescribing pain medication.

The measure offsets the increased authorization through a \$5 million reduction in the existing FY 2017 authorization for Centers for Disease Control (CDC) public health capability enhancement activities.

Under current law, \$138.3 million is authorized for those activities each year through FY 2018.

The Congressional Budget Office (CBO) has not yet released a cost estimate for the bill.

H.R. 3691 would also mandate investigations into heroin distribution and unlawful distribution of prescription opioids, and require the creation of a national drug awareness campaign that takes into account the association between prescription opioid abuse and heroin use.

This week we are scheduled to consider a series of more than a dozen bills that address the opioid abuse problem facing America.

This measure reauthorizes grants from HHS's Center for Substance Abuse Treatment to public and nonprofit private entities that provide residential substance abuse treatment for pregnant and postpartum women, authorizing \$16.9 million each year through FY 2021—\$1 million (6%) more than the current \$15.9 million authorization.

Under the pilot grant program, proposed services for eligible pregnant and postpartum women would not have to be provided solely to women who reside in facilities.

However, the center must specify a minimum set of services, including substance abuse counseling, and it must solicit stakeholder input.

The bill directs HHS's Center for Behavioral Health Statistics and Quality to fund an evaluation of the pilot program at the conclusion of the first grant cycle.

Under the program, grant recipients are required to provide an individualized plan of services for each participating woman that includes substance abuse counseling and certain supplemental services, such as pediatric health care for the woman's children.

The measure directs the Center for Substance Abuse Treatment to carry out a five-year pilot grant program to help state substance abuse agencies address identified gaps in the services that are furnished to pregnant and postpartum women with substance abuse issues, and encourage new approaches and models of service delivery.

H.R. 3691, the "Improving Treatment for Pregnant & Postpartum Women Act of 2015," is a valuable piece of legislation that I encourage my colleagues to support.

Additionally, I urge my colleagues to join me in sponsoring and supporting all legislation targeting the improvement of care for the prevention of infant abuse and neglect, such as H.R. 5130, the, "Stop Infant Mortality and Recidivism Reduction Act of 2016" or the "SIMARRA Act."

Mr. GENE GREEN of Texas. Mr. Speaker, I have no further requests for time.

I yield back the balance of my time.

Mr. GUTHRIE. Mr. Speaker, I encourage all of my colleagues to vote for H.R. 3691.

I yield back the balance of my time.

The SPEAKER pro tempore (Mr. JODY B. HICE of Georgia). The question is on the motion offered by the gentleman from Kentucky (Mr. GUTHRIE) that the House suspend the rules and pass the bill, H.R. 3691, as amended.

The question was taken; and (two-thirds being in the affirmative) the rules were suspended and the bill, as amended, was passed.

A motion to reconsider was laid on the table.

VETERAN EMERGENCY MEDICAL TECHNICIAN SUPPORT ACT OF 2016

Mr. GUTHRIE. Mr. Speaker, I move to suspend the rules and pass the bill (H.R. 1818) to amend the Public Health Service Act to provide grants to States to streamline State requirements and procedures for veterans with military emergency medical training to become civilian emergency medical technicians, as amended.

The Clerk read the title of the bill.
The text of the bill is as follows:

H.R. 1818

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

SECTION 1. SHORT TITLE.

This Act may be cited as the “Veteran Emergency Medical Technician Support Act of 2016”.

SEC. 2. ASSISTING VETERANS WITH MILITARY EMERGENCY MEDICAL TRAINING TO MEET REQUIREMENTS FOR BECOMING CIVILIAN EMERGENCY MEDICAL TECHNICIANS.

Part B of title III of the Public Health Service Act (42 U.S.C. 243 et seq.) is amended by inserting after section 314 the following:

“SEC. 315. ASSISTING VETERANS WITH MILITARY EMERGENCY MEDICAL TRAINING TO MEET REQUIREMENTS FOR BECOMING CIVILIAN EMERGENCY MEDICAL TECHNICIANS.

“(a) PROGRAM.—The Secretary shall establish a program consisting of awarding demonstration grants to States to streamline State requirements and procedures in order to assist veterans who completed military emergency medical technician training while serving in the Armed Forces of the United States to meet certification, licensure, and other requirements applicable to becoming an emergency medical technician in the State.

“(b) USE OF FUNDS.—Amounts received as a demonstration grant under this section shall be used to prepare and implement a plan to streamline State requirements and procedures as described in subsection (a), including by—

“(1) determining the extent to which the requirements for the education, training, and skill level of emergency medical technicians in the State are equivalent to requirements for the education, training, and skill level of military emergency medical technicians; and

“(2) identifying methods, such as waivers, for military emergency medical technicians to forgo or meet any such equivalent State requirements.

“(c) ELIGIBILITY.—To be eligible for a grant under this section, a State shall demonstrate that the State has a shortage of emergency medical technicians.

“(d) REPORT.—The Secretary shall submit to the Congress an annual report on the program under this section.

“(e) FUNDING.—No additional funds are authorized to be appropriated for the purpose of carrying out this section. This section shall be carried out using amounts otherwise available for such purpose.”.

The SPEAKER pro tempore. Pursuant to the rule, the gentleman from Kentucky (Mr. GUTHRIE) and the gentleman from Texas (Mr. GENE GREEN) each will control 20 minutes.

The Chair recognizes the gentleman from Kentucky.

GENERAL LEAVE

Mr. GUTHRIE. Mr. Speaker, I ask unanimous consent that all Members may have 5 legislative days in which to revise and extend their remarks and to insert extraneous materials into the RECORD.

The SPEAKER pro tempore. Is there objection to the request of the gentleman from Kentucky?

There was no objection.

Mr. GUTHRIE. Mr. Speaker, I yield myself such time as I may consume.

I rise in support of H.R. 1818, the Veteran Emergency Medical Technician Support Act of 2016, introduced by my colleagues on the Committee on Energy and Commerce—Mr. KINZINGER from Illinois and Mrs. CAPPS from California.

Members of the U.S. military who trained as combat medics face State licensing challenges when they try to find similar work after discharge. Many States do not recognize their qualifications as being applicable to the licensing requirements of the civilian healthcare system for emergency medical services, such as EMTs or paramedics. State licensing laws vary, and while some States make exceptions for former military medics to allow for reciprocity and a chance to sit for the licensing exam without repeating their training, many States do not.

This legislation would provide grants to States with emergency medical technician shortages so as to help streamline State requirements for veterans to enter the EMT workforce without there being an unnecessary duplication of their training. This will help them more easily transition to their becoming civilian EMTs.

I urge my colleagues to support this legislation.

Mr. Speaker, I reserve the balance of my time.

Mr. GENE GREEN of Texas. Mr. Speaker, I yield myself such time as I may consume.

I rise in support of H.R. 1818, the Veteran Emergency Medical Technician Support Act.

Our Nation’s servicemen and -women receive some of the best medical training and experience in emergency medicine while serving our country. Their commitment to duty, training, real-world experience, and ability to work effectively in challenging environments make them exceptionally well suited for working as emergency medical technicians, EMTs, upon their return to civilian life.

However, experienced military medics who want to work in civilian EMT jobs are often required to repeat their medical training at the most basic level to receive certification in order to be hired. Depending on the State, a returning veteran may have to obtain or renew their EMS license. The requirements can vary significantly by State. This is an unnecessary impediment for both our service personnel and our communities that are in need of qualified emergency medical service personnel. We should not be keeping veterans out of the workforce and withholding valuable medical personnel from supporting our communities.

According to the Bureau of Labor Statistics’ Occupational Outlook Handbook, approximately 55,000 new civilian EMT and paramedic jobs have already been or will be created between 2012 and 2022. Highly skilled and properly trained veterans are well positioned to fill these essential provisions.

H.R. 1818 will authorize a demonstration grant program for States to streamline certification and licensure requirements for returning veterans with military EMT training so they can work as civilian EMTs as quickly

as possible. Streamlining the licensing process will make it easier for the civilian EMS community to hire experienced combat medics. This is not only beneficial to our veterans, but also to our communities, and it will enhance the level of care that is provided to our citizens.

I thank the bill’s sponsors—Representative LOIS CAPPS, who is a member of the Committee on Energy and Commerce and of our Subcommittee on Health, and Congressman ADAM KINZINGER—for introducing and championing this legislation.

I urge my colleagues to support the Veteran Emergency Medical Technician Support Act.

Mr. Speaker, I reserve the balance of my time.

Mr. GUTHRIE. Mr. Speaker, I yield 3 minutes to the gentleman from Illinois (Mr. KINZINGER), my colleague and good friend on the Committee on Energy and Commerce, who is a veteran Air Force pilot himself.

Mr. KINZINGER of Illinois. I appreciate the gentleman for yielding.

Mr. Speaker, the Veteran Emergency Medical Technician Support Act will help our veterans and our communities by assisting States in reducing burdens for military medics who want to become civilian EMTs.

Emergency medical technicians are an important part of the medical workforce and, as first responders, are critical to our goal of combating the thousands of opioid overdoses each year. EMTs respond to hundreds of thousands of overdoses. In 2014 alone, EMTs responded to 240,000 calls at which naloxone was administered.

According to the Department of Labor, the demand for EMTs and paramedics is expected to increase by 33 percent by the year 2020. This expected shortage is on top of some communities that are already reporting a shortage of EMTs.

My legislation, H.R. 1818, the Veteran EMT Support Act, works to address this by helping States to streamline requirements and procedures in order to assist veterans who completed military EMT training in the Armed Forces to meet the certification, the licensure, and other requirements to become civilian EMTs.

Although some service branches train military medics to EMT national certification standards, States generally have required additional training for State licensure. This creates a barrier for servicemembers who have received some of the best EMT training and have practiced their profession on the battlefield.

The Veteran EMT Support Act is a commonsense way to help veterans transition into the civilian workforce, improve public health, and ensure communities have highly qualified, professional men and women to answer challenging emergency calls like opioid overdoses.

I thank Congresswoman CAPPS for her strong support and advocacy of this

legislation, and I thank my colleagues on both sides of the aisle. I urge my colleagues on both sides of the aisle to vote in favor of this legislation.

Mr. GENE GREEN of Texas. Mr. Speaker, I yield 3 minutes to the gentlewoman from California (Mrs. CAPPS).

Mrs. CAPPS. I thank my colleague for yielding.

Mr. Speaker, I rise in support of H.R. 1818, the Veteran Emergency Medical Technician Support Act.

As the ranking member of our committee just said, our military medics receive some of the best technical training in emergency medicine on the battlefield, and it is proven in extreme circumstances. However, when these medics return home and attempt to apply their skills to work in the civilian EMT sector, they are often forced to start back at square one. Repeating coursework isn't just a waste of time, it is also incredibly expensive. Similarly, civilian EMTs who are also in the military or in the reserves often must let their civilian certifications lapse when they are deployed.

In either circumstance, this is an unfair burden on our military men and women who have bravely defended our country. It is also so shortsighted for our communities, which could benefit from their expertise. We need these valuable medical personnel to be working in our communities, especially as we now deal with this opioid crisis.

That is why I am so pleased to have again joined with my Republican colleague, Representative KINZINGER, to introduce the Veteran EMT Support Act. The bill is a small but straightforward effort to help States streamline their EMT certification processes to take military medic training into account for civilian licensure. It is the least we can do to help ensure that our military medics' transition home is a little bit easier, and it is the least we can do to ensure that our communities have the best civilian first responder personnel working for them.

I thank Chairmen UPTON and PITTS and Ranking Members PALLONE and GREEN and their staffs for their support in getting this bill to the floor. I urge my colleagues to support it.

Mr. GUTHRIE. Mr. Speaker, I yield 3 minutes to the gentleman from Pennsylvania (Mr. COSTELLO).

Mr. COSTELLO of Pennsylvania. Mr. Speaker, I rise in support of H.R. 1818, the Veteran Emergency Medical Technician Support Act. I thank Congressman KINZINGER for his leadership on this bill. I also recognize the chief operations officer for the Western Berks EMS, in my district, Ed Moreland, who came to my office and shared with me what this bill was all about.

It is a very easy bill to support. Not only is it an easy bill to support, but it is a very important, valuable bill for me and other Members to support because in my State of Pennsylvania where I used to be a county commissioner and, before that, a township su-

pervisor, we would see firsthand the very valuable role that EMTs and paramedics provide to local communities. We also know that there is a demand for more EMTs and paramedics. In fact, over the next 8 years, it is estimated that there will be another 40,000 EMTs and paramedics that we will need in this country.

I have the honor to serve on the House Committee on Veterans' Affairs. One of the things on which we focus on that committee is to work to find innovative solutions to help our veterans find successful careers when they return home and to utilize the skills that many servicemen and servicewomen obtain and possess during their service. Indeed, many of the best training and experience that military men and women get overseas is in the area of emergency medicine.

When one looks at what it takes to be an EMT—the education, training, skill level, and what is required in the Commonwealth of Pennsylvania and in many other States—you realize that there is an equivalency that many veterans already have, which they obtained while serving in the military.

This bill seeks to streamline the process so that if a veteran already has the training, the education, the skill level, the experience, we can basically not require that veteran to spend more time and more money going through the process of obtaining a certification. Instead, we can get him into the practice of actually serving his community and working in a professional environment. It gets qualified veterans to work quicker. It also fills the communities' safety needs quicker.

It is commonsense, bipartisan legislation to address the demand for qualified professionals in our communities, and it provides veterans with good job opportunities. It is why I encourage my colleagues to support it. It is why I commend Congressman KINZINGER and why I thank Ed Moreland of the Western Berks EMS for bringing this to my attention.

□ 1745

Mr. GENE GREEN of Texas. Mr. Speaker, I have no further speakers.

I yield back the balance of my time.

Mr. GUTHRIE. Mr. Speaker, I urge all my colleagues to vote for H.R. 1818.

I yield back the balance of my time.

Ms. JACKSON LEE. Mr. Speaker, I rise in support of H.R. 1818, the "Veteran Emergency Medical Technician Support Act of 2015," which emphasizes the necessity to add requirements and procedures that assist veterans with military EMT training to meet state EMT certification, licensure, and other requirements.

I support this legislation, because it benefits states with a shortage of emergency medical technicians.

H.R. 1818 allows veterans to reenter society and assist the helpless within the emergency medical community.

The bill enables the Public Health Service Act to direct the Department of Health and Human Services in an efficient approach for veteran assistance.

Specifically, H.R. 1818 requires the secretary to establish a program consisting of awarding demonstration grants to states to streamline state requirements and procedures.

H.R. 1818 determines the extent to which the requirements for education, training, and skill level of emergency medical technicians are equivalent to the requirements for military emergency medical technicians.

The bill identifies methods to facilitate the attainment of state requirements for military emergency medical technicians.

For proper usage of the grant provided by the bill, a state shall demonstrate its shortage of emergency medical technicians.

This bill introduces a feasible alternative for veterans within the community.

With consistent experience in high pressure situations and emergency environments, veterans are the appropriate choice for this profession.

This is a comprehensive bill that will simultaneously provide opportunity for veterans while alleviating the shortage of staff in a medical specialty involving care for undifferentiated and unscheduled patients with illnesses or injuries requiring immediate medical attention.

I urge all Members to join me in support of H.R. 1818.

The SPEAKER pro tempore. The question is on the motion offered by the gentleman from Kentucky (Mr. GUTHRIE) that the House suspend the rules and pass the bill, H.R. 1818, as amended.

The question was taken.

The SPEAKER pro tempore. In the opinion of the Chair, two-thirds being in the affirmative, the ayes have it.

Mr. GUTHRIE. Mr. Speaker, on that I demand the yeas and nays.

The yeas and nays were ordered.

The SPEAKER pro tempore. Pursuant to clause 8 of rule XX, further proceedings on this motion will be postponed.

JOHN THOMAS DECKER ACT OF 2016

Mr. GUTHRIE. Mr. Speaker, I move to suspend the rules and pass the bill (H.R. 4969) to amend the Public Health Service Act to direct the Centers for Disease Control and Prevention to provide for informational materials to educate and prevent addiction in teenagers and adolescents who are injured playing youth sports and subsequently prescribed an opioid, as amended.

The Clerk read the title of the bill.

The text of the bill is as follows:

H.R. 4969

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

SECTION 1. SHORT TITLE.

This Act may be cited as the "John Thomas Decker Act of 2016".

SEC. 2. INFORMATION MATERIALS AND RESOURCES TO PREVENT ADDICTION RELATED TO YOUTH SPORTS INJURIES.

(a) TECHNICAL CLARIFICATION.—Effective as if included in the enactment of the Children's Health Act of 2000 (Public Law 106-310), section 3405(a) of such Act (114 Stat. 1221) is amended by striking "Part E of title III" and inserting "Part E of title III of the Public Health Service Act".

(b) AMENDMENT.—Title III of the Public Health Service Act is amended by inserting after part D of such title (42 U.S.C. 254b et seq.) the following new part E:

“PART E—OPIOID USE DISORDER

“SEC. 341. INFORMATIONAL MATERIALS AND RESOURCES TO PREVENT ADDICTION RELATED TO YOUTH SPORTS INJURIES.

“(a) REPORT.—The Secretary shall—

“(1) not later than 24 months after the date of the enactment of this section, make publicly available a report determining the extent to which informational materials and resources described in subsection (b) are available to teenagers and adolescents who play youth sports, families of such teenagers and adolescents, nurses, youth sports groups, and relevant health care provider groups; and

“(2) for purposes of educating and preventing addiction in teenagers and adolescents who are injured playing youth sports and are subsequently prescribed an opioid, not later than 12 months after such report is made publicly available and taking into consideration the findings of such report, develop and, in coordination with youth sports groups, disseminate informational materials and resources described in subsection (b) for teenagers and adolescents who play youth sports, families of such teenagers and adolescents, nurses, youth sports groups, and relevant health care provider groups.

“(b) MATERIALS AND RESOURCES DESCRIBED.—For purposes of this section, the informational materials and resources described in this subsection are informational materials and resources with respect to youth sports injuries for which opioids are potentially prescribed and subsequently potentially lead to addiction, including materials and resources focused on the dangers of opioid use and misuse, treatment options for such injuries that do not involve the use of opioids, and how to seek treatment for addiction.

“(c) NO ADDITIONAL FUNDS.—No additional funds are authorized to be appropriated for the purpose of carrying out this section. This section shall be carried out using amounts otherwise available for such purpose.”

The SPEAKER pro tempore. Pursuant to the rule, the gentleman from Kentucky (Mr. GUTHRIE) and the gentleman from Texas (Mr. GENE GREEN) each will control 20 minutes.

The Chair recognizes the gentleman from Kentucky.

GENERAL LEAVE

Mr. GUTHRIE. Mr. Speaker, I ask unanimous consent that all Members have 5 legislative days to revise and extend their remarks and to include any extraneous material in the RECORD on the bill.

The SPEAKER pro tempore. Is there objection to the request of the gentleman from Kentucky?

There was no objection.

Mr. GUTHRIE. Mr. Speaker, I rise today in support of H.R. 4969, the John Thomas Decker Act of 2016, introduced by my colleagues, Mr. MEEHAN of Pennsylvania, Mr. KIND of Wisconsin, Mr. ROONEY of Florida, and Mr. VEASEY of Texas.

Young athletes have been disproportionately impacted by the opioid epidemic currently plaguing our country. One study found that adolescent males who played sports were twice as likely to be prescribed opioids than their peers and four times more likely to abuse them than nonathletes. Writing a prescription for opioids in a popu-

lation that may not fully grasp the risk associated with the drugs can be dangerous and lead to unintended negative outcomes.

H.R. 4969 amends the Public Health Service Act to direct the Secretary of Health and Human Services to study what information and resources are available to youth athletes and their families regarding the dangers of opioid use and abuse, nonopioid treatment options, and how to seek additional addiction treatment.

The Secretary would then be required to report the findings and work with stakeholders to disseminate resources to students, parents, and those involved in treating a sports-related injury.

Mr. Speaker, I urge my colleagues to support this legislation.

I reserve the balance of my time.

Mr. GENE GREEN of Texas. Mr. Speaker, I yield myself such time as I may consume.

I rise in support of H.R. 4969, the John Thomas Decker Act.

A crisis of this magnitude requires a multiprong, robust response across the full continuum of those exposed to and affected by addiction. People suffering from addiction are originally prescribed or exposed to opioids in a wide variety of circumstances, one of which is through youth sports injuries.

H.R. 4969, the John Thomas Decker Act, will bring needed education on the danger of opioids and the benefits of alternative approaches to pain treatment to youth sports.

The John Thomas Decker Act will direct the Centers for Disease Control and Prevention and the National Center for Injury Prevention to examine and report on what informational materials and resources are currently available to teenagers and adolescents participating in sports on the dangers of opioid use and misuse, alternative treatment options, and how to seek treatment for addiction.

Based on the findings of this report, the legislation directs the CDC and the National Center for Injury Prevention to develop and disseminate such informational materials as necessary.

Young people playing sports who incur an injury for which painkillers are frequently prescribed can be uniquely vulnerable to addiction if they or their parents, guardians, and coaches are not well informed of the potential for misuse, abuse, and addiction.

H.R. 4969 will play a role in helping curb the epidemic opioid abuse and heroin use by ensuring adequate and appropriately tailored resources for our Nation's youth.

I thank the bill sponsor, Representative MEEHAN, for introducing this legislation. I encourage my colleagues to support the John Thomas Decker Act.

I reserve the balance of my time.

Mr. GUTHRIE. Mr. Speaker, I yield 5 minutes to the gentleman from Pennsylvania (Mr. MEEHAN).

Mr. MEEHAN. Mr. Speaker, I thank my colleagues from both sides of the

aisle for their strong support of this very, very important bill, which will use the resources of the Centers for Disease Control in very important outreach to young people, particularly student athletes.

Now, we have heard heart-wrenching stories all day long about the tremendous growth of the use of opioids. In fact, 207 million prescriptions were written in 2013 for opioids. Unfortunately, that has led to about 2.1 million Americans who are hooked on opioids.

And when the opioid is not available, we have begun to see them switch to a cheaper alternative, which is heroin. 450 million Americans are currently hooked on heroin.

I know in my own State of Pennsylvania we lose seven people a day to heroin addiction. We are seeing it in the important nature of the comprehensive bills that have been put forward today. We are seeing it in veterans. Many are coming back with traumatic injury and are finding release in the opioids. We are seeing it in pregnant mothers and the impact that it has in children. One of the single biggest increase is in women, mothers who are over 30.

One of the niches that is often underappreciated, but remarkably dangerous, is young student athletes. The reason being is that young student athletes are more inclined than just about anybody else to suffer sports-related injuries. Some of those injuries can be serious, and what we are seeing is a high rate of prescription of opioids for some of these athletes.

Now, in the NCAA, you have a little bit more oversight. Even there, we see abuse. Almost 26 percent of college-level athletes will use opioids at some point in time, many without prescriptions.

Where the real danger comes down is at the high school level. I have the good privilege of chairing one of the youth sports caucuses with my good friend, Mr. KIND of Wisconsin. We deal with a broad variety of issues promoting healthy activity and youth sports, but we are seeing a piece of this challenge right now in which we are watching the opioid addiction and problems with young athletes.

Eleven percent of high school athletes will use painkillers without a prescription. That is something that I talked to one of the trainers in my high school, a student trainer, about how kids who want to play in the game will hide their injuries and self-medicate. What a danger that is.

This brings me to the young man who inspired this bill, the John Thomas Decker Act. This is John Thomas Decker. I had the privilege of knowing John personally and knowing his wonderful family.

John was an incredible athlete. I watched him play football. He set a receiving record that was held for nearly a decade in our region of Pennsylvania.

He went on to play lacrosse at Cornell University in a program that won

a national championship. So John was the consummate blue-chip athlete and a wonderful kid to boot. He was a great student and a great leader.

But John, like so many other kids, fought through the pain because he wanted to play. So what he did was he self-medicated and began to deal with the issue of opioid addiction.

Now, John worked his way through it as an athlete, but later in life returned again to using opioids and, ultimately, heroin. Ultimately, it led to his death.

His story inspired me to say we have to do something about it because many high school kids just like John who are playing through the pain believe that, because they are using the opioids and because they are prescription medicines, somehow there is no danger of any kind of addiction or otherwise, that somehow it is nowhere near as dangerous as heroin. Yet, it is unfortunately too easy.

In fact, one of the other misconceptions is: I don't have to worry about a dependency. But the medical authorities have confirmed that daily use for even a short period of time, just a few weeks or even days, can create the kind of psychological dependency in which there is the beginning of the misuse of the opioids.

One of the things we begin to see as well is, as the opioid begins to lose its protective effect, they will take more and higher doses in order to have the same pain-killing capacity. So they start to move further on down the chain.

Oftentimes they are able to kick it for a period of time. But when they come back, they will go back to using the opioid at the higher level than they once did before. Imagine the implication of that.

The SPEAKER pro tempore. The time of the gentleman has expired.

Mr. GUTHRIE. Mr. Speaker, I yield an additional 2 minutes to the gentleman from Pennsylvania.

Mr. MEEHAN. Mr. Speaker, the CDC is in a position now to be able to utilize the resources it has to do a better study of making sure that we are aware of the information and resources that are being made available to those who are in the privy of relationship with these students—these can be coaches; these can be school nurses; these can be the students themselves—and then come up with a plan for us to be able to distribute this in an effective manner, all the way down through the network.

There can be appropriate use under medical care with the kind of attention to concerns about addiction so that, where there is legitimate pain—we don't want to suggest that there is never a use, but this will now create the kinds of guidelines in which there is genuine oversight if opioids are introduced.

This will also give the kinds of guidelines to local trainers and others, even local physicians, about taking more time to assess the backgrounds of indi-

viduals that they are giving the opioids to, not appreciating perhaps that a young man may be dealing with depression or other kinds of things, a binge drinker in association with that opioid that could lead to death.

All of these things are things that could be part of the CDC's approach to doing much better education so that we can prevent the next young star athlete like John from coming into opioid addiction and ultimately leading to his demise.

Let us let John's voice be heard. Let us use this as the opportunity to ensure that future student athletes are not addicted to opioids.

Mr. GENE GREEN of Texas. Mr. Speaker, I reserve the balance of my time.

Mr. GUTHRIE. Mr. Speaker, I yield 2 minutes to the gentleman from Georgia (Mr. CARTER).

Mr. CARTER of Georgia. Mr. Speaker, I thank the gentleman from Kentucky for his work on this bill.

I rise today in support of H.R. 4969 because opioid addiction does not discriminate based on age.

H.R. 4969 requires the CDC to report on information regarding prescription opioid abuse after youth sports injuries. According to a study by the National Council on Alcoholism and Drug Dependence, 12 percent of male athletes and 8 percent of female athletes have used prescription opioids in the last 12 months.

According to the U.S. Substance Abuse and Mental Health Services Administration, 80 percent of these teenagers and adolescents made the switch to heroin after abusing opioid painkillers, according to the U.S. Substance Abuse and Mental Health Services Administration. This is completely unacceptable and 100 percent preventable.

Every effort should be made to ensure that our youth are protected from the trap of drug abuse. That is why I am supporting H.R. 4969. We need all the information available so we can take the right steps to ensure our youth are protected.

I encourage my colleagues to support this bill.

Mr. GENE GREEN of Texas. Mr. Speaker, I have no further speakers.

I yield back the balance of my time. Mr. GUTHRIE. Mr. Speaker, I urge my colleagues to vote for H.R. 4969.

I yield back the balance of my time. Ms. JACKSON LEE. Mr. Speaker, I rise in strong support of H.R. 4969, the "John Thomas Decker Act of 2016."

Our nation values the importance of transparency and availability of public information regarding prescription drugs.

This bill amends the Public Health Service Act to require the National Center for Injury Prevention and Control at the Centers for Disease Control and Prevention to report on the availability of information regarding prescription of opioids after youth sports injury.

This report includes the information on opioid use and misuse, injury treatments that do not involve opioids, and treatment for opioid addiction.

The report must determine the extent this information is available to teenagers and adolescents who play youth sports, their families, youth sports groups, and health care providers.

Opioids are drugs with effects similar to opium, such as heroin and certain pain medications.

In addition to stimulants and central nervous system (CNS) depressants, prescription opioids are one of the three main broad categories of medications that present abuse liability.

Due to prescription opioids' similarity to heroin and morphine, they present an intrinsic abuse and addiction liability for non-medical purposes.

Opioid, heroin, and morphine act on the same brain systems.

In an effort to increase their euphoric effects, the "high", people tend to take them in their most dangerous and addictive methods.

Understanding the dangers of these addictive drugs highlight the importance of John Thomas Decker Act, which increases awareness and educating the youth people of the adverse effects of opioids.

H.R. 4969 also allows for public transparency in making available public reports, informational materials, and resources are available to teenagers, their families, and health professionals.

Our country has acknowledged the importance of preventive healthcare and education within our nation.

Providing education to those directly or indirectly associated with opioid usage enables them to have control over their thoughts and actions, offsetting the potential for drug abuse.

I support this legislation because it will help protect the integrity of consumers through implementation of effective preventative strategies.

H.R. 4969 provides the National Center for Injury Prevention and Control at the Centers for Disease Control and Prevention with specific responsibilities for dissemination.

H.R. 4969 is a positive step in the right direction and I urge my colleagues to join me in supporting its passage.

The SPEAKER pro tempore. The question is on the motion offered by the gentleman from Kentucky (Mr. GUTHRIE) that the House suspend the rules and pass the bill, H.R. 4969, as amended.

The question was taken; and (two-thirds being in the affirmative) the rules were suspended and the bill, as amended, was passed.

A motion to reconsider was laid on the table.

□ 1800

LALI'S LAW

Mr. GUTHRIE. Mr. Speaker, I move to suspend the rules and pass the bill (H.R. 4586) to amend the Public Health Service Act to authorize grants to States for developing standing orders and educating health care professionals regarding the dispensing of opioid overdose reversal medication without person-specific prescriptions, and for other purposes, as amended.

The Clerk read the title of the bill.

The text of the bill is as follows:

H.R. 4586

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

SECTION 1. SHORT TITLE.

This Act may be cited as “Lali’s Law”.

SEC. 2. OPIOID OVERDOSE REVERSAL MEDICATION ACCESS AND EDUCATION GRANT PROGRAMS.

(a) **TECHNICAL CLARIFICATION.**—Effective as if included in the enactment of the Children’s Health Act of 2000 (Public Law 106–310), section 3405(a) of such Act (114 Stat. 1221) is amended by striking “Part E of title III” and inserting “Part E of title III of the Public Health Service Act”.

(b) **AMENDMENT.**—Title III of the Public Health Service Act is amended by inserting after part D of such title (42 U.S.C. 254b et seq.) the following new part E:

“PART E—OPIOID USE DISORDER

“SEC. 341. OPIOID OVERDOSE REVERSAL MEDICATION ACCESS AND EDUCATION GRANT PROGRAMS.

“(a) **GRANTS TO STATES.**—The Secretary may make grants to States for—

“(1) developing standing orders for pharmacies regarding opioid overdose reversal medication;

“(2) encouraging pharmacies to dispense opioid overdose reversal medication pursuant to a standing order;

“(3) implementing best practices for persons authorized to prescribe medication regarding—

“(A) prescribing opioids for the treatment of chronic pain;

“(B) co-prescribing opioid overdose reversal medication with opioids; and

“(C) discussing the purpose and administration of opioid overdose reversal medication with patients;

“(4) developing or adapting training materials and methods for persons authorized to prescribe or dispense medication to use in educating the public regarding—

“(A) when and how to administer opioid overdose reversal medication; and

“(B) steps to be taken after administering opioid overdose reversal medication; and

“(5) educating the public regarding—

“(A) the public health benefits of opioid overdose reversal medication; and

“(B) the availability of opioid overdose reversal medication without a person-specific prescription.

“(b) **CERTAIN REQUIREMENT.**—A grant may be made under this section only if the State involved has authorized standing orders regarding opioid overdose reversal medication.

“(c) **PREFERENCE IN MAKING GRANTS.**—In making grants under this section, the Secretary shall give preference to States that—

“(1) have not issued standing orders regarding opioid overdose reversal medication;

“(2) authorize standing orders that permit community-based organizations, substance abuse programs, or other nonprofit entities to acquire, dispense, or administer opioid overdose reversal medication;

“(3) authorize standing orders that permit police, fire, or emergency medical services agencies to acquire and administer opioid overdose reversal medication;

“(4) have a higher per capita rate of opioid overdoses than other applicant States; or

“(5) meet any other criteria deemed appropriate by the Secretary.

“(d) **GRANT TERMS.**—

“(1) **NUMBER.**—A State may not receive more than 1 grant under this section.

“(2) **PERIOD.**—A grant under this section shall be for a period of 3 years.

“(3) **AMOUNT.**—A grant under this section may not exceed \$500,000.

“(4) **LIMITATION.**—A State may use not more than 20 percent of a grant under this section for

educating the public pursuant to subsection (a)(5).

“(e) **APPLICATIONS.**—To be eligible to receive a grant under this section, a State shall submit an application to the Secretary in such form and manner and containing such information as the Secretary may require, including detailed proposed expenditures of grant funds.

“(f) **REPORTING.**—Not later than 3 months after the Secretary disburses the first grant payment to any State under this section and every 6 months thereafter for 3 years, such State shall submit a report to the Secretary that includes the following:

“(1) The name and ZIP Code of each pharmacy in the State that dispenses opioid overdose reversal medication under a standing order.

“(2) The total number of opioid overdose reversal medication doses dispensed by each such pharmacy, specifying how many were dispensed with or without a person-specific prescription.

“(3) The number of pharmacists in the State who have participated in training pursuant to subsection (a)(4).

“(g) **DEFINITIONS.**—In this section:

“(1) **OPIOID OVERDOSE REVERSAL MEDICATION.**—The term ‘opioid overdose reversal medication’ means any drug, including naloxone, that—

“(A) blocks opioids from attaching to, but does not itself activate, opioid receptors; or

“(B) inhibits the effects of opioids on opioid receptors.

“(2) **STANDING ORDER.**—The term ‘standing order’ means a document prepared by a person authorized to prescribe medication that permits another person to acquire, dispense, or administer medication without a person-specific prescription.

“(h) **AUTHORIZATION OF APPROPRIATIONS.**—

“(1) **IN GENERAL.**—To carry out this section, there is authorized to be appropriated \$5,000,000 for the period of fiscal years 2017 through 2019.

“(2) **ADMINISTRATIVE COSTS.**—Not more than 3 percent of the amounts made available to carry out this section may be used by the Secretary for administrative expenses of carrying out this section.”.

SEC. 3. CUT-GO COMPLIANCE.

Subsection (f) of section 319D of the Public Health Service Act (42 U.S.C. 247d–4) is amended by inserting before the period at the end the following: “(except such dollar amount shall be reduced by \$5,000,000 for fiscal year 2017)”.

The SPEAKER pro tempore. Pursuant to the rule, the gentleman from Kentucky (Mr. GUTHRIE) and the gentleman from Texas (Mr. GENE GREEN) each will control 20 minutes.

The Chair recognizes the gentleman from Kentucky.

GENERAL LEAVE

Mr. GUTHRIE. Mr. Speaker, I ask unanimous consent that all Members have 5 legislative days in which to revise and extend their remarks and insert extraneous materials in the RECORD on the bill.

The SPEAKER pro tempore. Is there objection to the request of the gentleman from Kentucky?

There was no objection.

Mr. GUTHRIE. Mr. Speaker, I yield myself such time as I may consume.

Mr. Speaker, I rise today in support of H.R. 4586, Lali’s Law, introduced by my colleagues in the House, the gentleman from Illinois (Mr. DOLD) and the gentlewoman from Massachusetts (Ms. CLARK).

The rate of overdose for individuals age 24 to 34 has nearly tripled, going from 8.1 overdose deaths per 100,000 to

23.1 overdose deaths per 100,000. Families across the country are losing loved ones to reversible opioid overdose. Naloxone is an opioid antagonist that can prevent opioid overdose deaths by binding to the opioid receptors in the body and preventing the overdose.

H.R. 4586 amends the Public Health Service Act to authorize grants to States for developing standing orders and educating healthcare professionals regarding the dispensing of opioid overdose reversal medication without person-specific prescriptions.

This legislation is a first step in promoting wider access of naloxone or other opioid overdose reversal drugs that may come to market. Standing orders are prescriptions that are not person-specific. If a pharmacy has a standing order, anyone needing the medication may come and fill a prescription for it.

Naloxone, while incredibly effective at stopping opioid overdose, does not have severe side effects if used incorrectly or if used when not needed. Many States have standing order laws in place but need help bridging the gap between law and a functioning program. The grants funded by this legislation will help aid that process.

Mr. Speaker, I urge my colleagues to support this legislation.

I reserve the balance of my time.

Mr. GENE GREEN of Texas. Mr. Speaker, I yield myself such time as I may consume. I rise in support of H.R. 4586, Lali’s Law.

Mr. Speaker, between 2001 and 2014, there was a threefold increase in prescription drug overdoses and a sixfold increase in heroin overdoses in the United States. We must do more to prevent drug misuse and abuse to avoid these tragedies in the first place. We must also ensure that those suffering from addiction to prescription and non-prescription drugs have access to potentially lifesaving treatments when and where they need it.

Naloxone has proven to be a successful lifesaving intervention for patients presenting with overdose if administered quickly. When used, naloxone helps restore breathing that has been stopped by the overdose and has potential for saving thousands of lives each year.

H.R. 4586 would create a competitive grant program to help States increase access to overdose reversal medications. The primary purpose of the grant is to fund State programs that allow pharmacists to distribute overdose reversal drugs without a person-prescription to qualified individuals or entities.

To be effective, overdose reversal drugs must be given to the patient almost immediately. In an emergency situation, the ability for emergency medical technicians, law enforcement, substance abuse treatment providers, and qualified individuals to have such medications on hand can make the difference between life and death. Qualified individuals and entities often need

to possess treatment before a specific patient is identified.

Many States have established and use these programs to allow local law enforcement officers or emergency medical technicians to carry and use the overdose reversal drug naloxone. H.R. 4586 would expand these programs by helping States develop standing orders and educate healthcare professionals about dispensing these medications without person-specific prescriptions.

I want to thank the bill's sponsors, the gentlewoman from Massachusetts (Ms. CLARK) and the gentleman from Illinois (Mr. DOLD), for introducing this legislation. I urge my colleagues to join me in supporting H.R. 4586.

Mr. Speaker, I reserve the balance of my time.

Mr. GUTHRIE. Mr. Speaker, I yield 2 minutes to the gentleman from Georgia (Mr. CARTER), my friend.

Mr. CARTER of Georgia. Mr. Speaker, I rise today in support of H.R. 4586 because it is critical that we educate healthcare professionals about opioid overdose reversal medications.

This bill allows the CDC to authorize grants to States based on their ability to educate healthcare professionals in dispensing opioid reversal medication. Specifically, this opioid reversal medication, called naloxone, can be used in emergency situations to stop an opioid overdose death.

Also, through this bill, pharmacists will be able to dispense naloxone to patients without a prescription, increasing access to this lifesaving antidote. This access will help save lives in emergency situations when patients do not have the time or ability to seek or receive professional medical care. The World Health Organization states that this increased access will save up to 200,000 lives.

As a lifelong pharmacist, I believe it is our duty to always educate Americans about the lifesaving tools available to them. I encourage my colleagues to support H.R. 4586 so more people can be educated and have access to lifesaving medication related to opioid overdose.

Mr. GENE GREEN of Texas. Mr. Speaker, I yield 3 minutes to the gentlewoman from Massachusetts (Ms. CLARK), a cosponsor of the bill.

Ms. CLARK of Massachusetts. Mr. Speaker, I thank Representative DOLD for joining me in this legislation, and I also thank the family of Alex Laliberte for sharing their story. We offer our deepest sympathies.

Mr. Speaker, across Massachusetts and the Nation, too many parents are desperately trying to save their child from the deadly grip of the opioid crisis. In the past year alone, this public health crisis has claimed nearly 1,400 lives in the Commonwealth of Massachusetts. The bill before us today, Lali's Law, is a critical part of addressing this crisis.

Naloxone, commonly known as Narcan, is a lifesaving drug. It stops

the effect of heroin within minutes after it is administered, and it allows breathing to resume. But it is critical that it is widely available.

Under this bill, States that have authorized a standing order that allows anyone to obtain naloxone from a pharmacist would be eligible for a grant that can be used for public education campaigns and training for healthcare providers and pharmacists.

I want to share the story of a family from my district that illustrates the difference training and the availability of Narcan can make.

One night, a 911 call came in, a desperate and frantic new mother with a very young baby who was unresponsive. The first responders arrived at the scene, but despite their best efforts, this baby was not reviving. A responding firefighter relied on his training and quick thinking to save this child's life by administering Narcan. It worked.

Even though the mom had not revealed that she was addicted to prescription painkillers, the first responder knew the symptoms and made the right guess and saved this child's life. If he had not been trained to administer Narcan and not had the lifesaving drug with him that night, that baby would not be alive. But the man was, and now the baby and mom have a future.

This crisis presents an urgent calling for all of us, Democrats and Republicans alike, to put aside our differences and do what we can to save lives. That is what we are talking about here: increasing the availability of Narcan will save lives.

I am happy to join with my friend from Illinois to offer this important bill. I urge all of my colleagues to support this legislation.

Mr. GUTHRIE. Mr. Speaker, I yield 5 minutes to the gentleman from Illinois (Mr. DOLD), my good friend.

Mr. DOLD. Mr. Speaker, I want to thank my good friend for yielding. I want to thank my friend from Massachusetts for her work on this legislation. Representative CLARK sharing that story is extremely powerful.

In the suburbs of Chicago, Mr. Speaker, somebody dies from using heroin every 3 days. Nationally, that statistic is 1 every 19 minutes. Every single one of them leaves behind a family in grief.

Today, Mr. Speaker, I am joined in the Chamber by Chelsea Laliberte, Jody Daitchman, and Gary Laliberte, the family of a young man from Buffalo Grove named Alex.

Alex graduated from Stevenson High School. He played sports. He got good grades and made a lot of friends. He was a typical teenager who had his whole life ahead of him. But behind his happy exterior, Alex was sick. He was struggling with escalating drug abuse.

During Alex's sophomore year in college, he came down with an unknown illness. He would go to the hospital, and he would get better—at least for a while. But then a few months later he

would get sick. He would be admitted to the hospital and again would repeat the cycle. His family didn't know it then, but Alex was dependent on prescription drugs and was suffering from withdrawal.

Alex continued this pattern until just a few days before his final exams. At that point in time, Alex actually overdosed on prescription drugs and heroin and, at the age of 20, passed away. His family never even had the chance to seek help for his dependency.

Unfortunately, this story is far too common across our country.

As a father, I can't even imagine the pain of losing a child to a drug overdose; but sadly, too many families like the Lalibertes have experienced this loss. Heroin and heroin abuse have become an epidemic in our country.

During my work as the co-chair of the Suburban Anti-Heroin Task Force, I have met countless families who have been affected by drug abuse—literally torn apart. This is not an isolated issue. It affects every community, every ZIP Code, regardless of your socioeconomic status, regardless of your educational status.

I talk to parents who say, "It is not in my community." It is. It is in your community, let me just assure you.

My work with Live4Lali and the Lake County Opioid Initiative inspired me to introduce this law with Representative CLARK. Our bipartisan bill is named in Alex Laliberte's memory.

Lali's Law increases access to a lifesaving antidote called naloxone, which, in Lake County, Illinois, has already saved nearly 100 lives since first responders and the police force requested the opportunity to be able to use this lifesaving antidote. The police officers actually would respond, would get there before the paramedics—often 5 to 7, sometimes 9 minutes faster—and refused to sit by idly as they watched these young people die from an overdose.

When used properly, naloxone helps restore breathing that has been stopped by an overdose. You have heard the statistics, but the World Health Organization predicts that increased access to naloxone could save another 20,000 lives each and every year.

Lali's Law is a decisive step to not only save young people like Alex Laliberte from falling victim to drug abuse, but also to help those in our communities struggling to get their lives back on track. Our bill—and, frankly, the work that has been done here in this body today, and I think we have got some 18 different bipartisan bills coming together to try to solve this prescription drug epidemic, this heroin epidemic that is sweeping our country—is proof of what is possible when we set aside partisanship and get to work for the people that we all represent.

Lali's Law has already brought Alex's story to the United States Congress and has amplified the lifesaving

benefit of Live4Lali's amazing work. Now, by passing this overwhelming bipartisan bill, we can ensure that Alex's lasting legacy includes helping countless others get a second chance at recovery and saving their families from the unbearable heartbreak.

Mr. Speaker, together, we truly can save lives.

Again, I want to thank Representative CLARK. I want to thank the Laliberte family. I want to thank the first responders, the stakeholders back in Lake County, and all those here in this body who are working to try to create an environment, create the opportunity for us to be able to take a huge step forward in combating this prescription drug and heroin epidemic.

I thank the gentleman for yielding the time.

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Mr. GENE GREEN of Texas. Mr. Speaker, I yield back the balance of my time.

Mr. GUTHRIE. Mr. Speaker, I encourage my colleagues to vote for H.R. 4586.

I yield back the balance of my time. Ms. JACKSON LEE. Mr. Speaker, I rise in support of H.R. 4586, also known as Lali's Law.

Sadly, Lali's Law was named after Alex Laliberte: a Buffalo Grove, Illinois resident who tragically passed away seven years ago from a drug overdose.

Alex was a good kid. He was an athlete during high school, and also did well academically.

During his sophomore year in college, he began being hospitalized for a mysterious illness.

Unknown to his friends and family, Alex soon developed an addiction to the prescription drugs and was being hospitalized for withdrawal.

He would stay in the hospital until his symptoms subsided only to leave the hospital and repeat the cycle.

Alex continued this cycle until he died of an opioid overdose a few days before his final exams.

He was only 20 years old.

Our lack of education on opioids and harm reduction contributed to Alex's early death, and we must act to prevent a repeat of this tragedy.

Lali's Law is an important piece of legislation that would authorize grants to states to develop standing orders and educate health care professionals about the dispensing of opioid overdose reversal medication without person-specific prescriptions.

In addition, this bill would encourage pharmacies to dispense opioid overdose reversal medication pursuant to a standing order.

According to the National Institute on Drug Abuse, 2.1 million people nationwide abuse opioids.

Mr. Speaker, Lali's Law is instrumental in helping these victims reverse their addiction.

Lali's Law would also implement the following guidelines and practices for those people authorized to prescribe the medication:

Only prescribe opioids for chronic pain

Opioid overdose reversal medication must be co-prescribed with opioids; and

the purpose and administration of opioid overdose reversal medication must be discussed with the patients.

Furthermore, H.R. 4586 would require the development and adaptation of training materials and methods for the people authorized to prescribe or dispense the medication to use in educating the public, which includes:

When and how to administer opioid overdose reversal medication, and

The steps that should be taken after administering the opioid overdose reversal medication.

Lastly, Lali's Law would educate the public regarding the health benefits of the opioid reversal medication and the availability of the medication without a person-specific prescription.

In 2014, rates of opioid overdose deaths jumped significantly, from 7.9 per 100,000 in 2013 to 9.0 per 100,000, which is a 14 percent increase.

Mr. Speaker, I join my colleagues in support of H.R. 4586.

This legislation is vital for reducing opioid-related deaths across our nation, protecting the lives of those at risk to opioid abuse.

It is our job to make sure that Alex's lasting legacy includes helping others get a second chance at recovery and a second chance at life.

The SPEAKER pro tempore. The question is on the motion offered by the gentleman from Kentucky (Mr. GUTHRIE) that the House suspend the rules and pass the bill, H.R. 4586, as amended.

The question was taken.

The SPEAKER pro tempore. In the opinion of the Chair, two-thirds being in the affirmative, the ayes have it.

Mr. GUTHRIE. Mr. Speaker, on that I demand the yeas and nays.

The yeas and nays were ordered.

The SPEAKER pro tempore. Pursuant to clause 8 of rule XX, further proceedings on this motion will be postponed.

REDUCING UNUSED MEDICATIONS ACT OF 2016

Mr. GUTHRIE. Mr. Speaker, I move to suspend the rules and pass the bill (H.R. 4599) to amend the Controlled Substances Act to permit certain partial fillings of prescriptions, as amended.

The Clerk read the title of the bill.

The text of the bill is as follows:

H.R. 4599

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

SECTION 1. SHORT TITLE.

This Act may be cited as the "Reducing Unused Medications Act of 2016".

SEC. 2. PARTIAL FILLS OF SCHEDULE II CONTROLLED SUBSTANCES.

(a) IN GENERAL.—Section 309 of the Controlled Substances Act (21 U.S.C. 829) is amended by adding at the end the following:

“(f) PARTIAL FILLS OF SCHEDULE II CONTROLLED SUBSTANCES.—

“(1) PARTIAL FILLS.—

“(A) IN GENERAL.—A prescription for a controlled substance in schedule II may be partially filled if—

“(i) it is not prohibited by State law;

“(ii) the prescription is written and filled in accordance with the Controlled Substances Act (21 U.S.C. 801 et seq.), regulations prescribed by the Attorney General, and State law;

“(iii) the partial fill is requested by the patient or the practitioner that wrote the prescription; and

“(iv) the total quantity dispensed in all partial fillings does not exceed the total quantity prescribed.

“(B) OTHER CIRCUMSTANCES.—A prescription for a controlled substance in schedule II may be partially filled in accordance with section 1306.13 of title 21, Code of Federal Regulations (as in effect on the date of enactment of the Reducing Unused Medications Act of 2016).

“(2) REMAINING PORTIONS.—

“(A) IN GENERAL.—Except as provided in subparagraph (B), remaining portions of a partially filled prescription for a controlled substance in schedule II—

“(i) may be filled; and

“(ii) shall be filled not later than 30 days after the date on which the prescription is written.

“(B) EMERGENCY SITUATIONS.—In emergency situations, as described in subsection (a), the remaining portions of a partially filled prescription for a controlled substance in schedule II—

“(i) may be filled; and

“(ii) shall be filled not later than 72 hours after the prescription is issued.”.

(b) RULE OF CONSTRUCTION.—Nothing in this section shall be construed to affect the authority of the Attorney General to allow a prescription for a controlled substance in schedule III, IV, or V of section 202(c) of the Controlled Substances Act (21 U.S.C. 812(c)) to be partially filled.

The SPEAKER pro tempore. Pursuant to the rule, the gentleman from Kentucky (Mr. GUTHRIE) and the gentleman from Texas (Mr. GENE GREEN) each will control 20 minutes.

The Chair recognizes the gentleman from Kentucky.

GENERAL LEAVE

Mr. GUTHRIE. Mr. Speaker, I ask unanimous consent that all Members have 5 legislative days in which to revise and extend their remarks and insert extraneous materials in the RECORD on the bill.

The SPEAKER pro tempore. Is there objection to the request of the gentleman from Kentucky?

There was no objection.

Mr. GUTHRIE. Mr. Speaker, I yield myself such time as I may consume.

Mr. Speaker, I rise in support of H.R. 4599, the Reducing Unused Medications Act of 2016, introduced by Ms. CLARK of Massachusetts and Mr. STIVERS of Ohio.

The number of prescriptions for opioids has significantly increased in recent years. While opioids can benefit patients when used appropriately, once their pain is subsided, there may be unused pills that could be misused and diverted.

Several States have considered enabling pharmacies to partially fill such prescriptions to minimize the number of pills in circulation while continuing to address the patient needs. However, current DEA regulations are not entirely clear about when such partial fills are permitted.

H.R. 4599 amends the Controlled Substances Act to clarify when schedule II controlled substances, including opioid pain medications, can be partially filled. This is a commonsense, bipartisan bill that will help save lives.

I urge my colleagues to join me in support.

I reserve the balance of my time.

Mr. GENE GREEN of Texas. Mr. Speaker, I yield myself such time as I may consume.

Mr. Speaker, I rise to voice my support for H.R. 4599, Reducing Unused Medications Act.

Opioid abuse in the United States is rising at alarming rates. In 2014, nearly 2 million Americans abused or were addicted to prescription opioids. Opioids are now one of the most prescribed classes of medications, and the National Institute on Drug Abuse estimates that over 70 percent of adults who misuse prescription opioids get them from a friend or relative.

A promising step to reduce the number of prescription opioids is a permanent partial filling of these prescriptions. Current Drug Enforcement Administration regulations allow pharmacists to partially fill prescriptions for schedule III, IV, and V substances, however, only allow partial fulfillment of schedule II substances in long-term-care settings or to terminally ill patients and when the full prescription cannot be supplied.

While these regulations do not explicitly prohibit a pharmacist from partially filling prescriptions for schedule II substances outside of these certain limited circumstances, DEA recognizes that the regulations lack clarity as to when partial filling of schedule II substances is permitted. This bill would provide clarity.

The Reducing Unused Medications Act would allow pharmacists, at the request of patients or doctors, to partially fill prescriptions for schedule II drugs, such as opioids, meaning that a patient or doctor can request to receive a 10-day supply of a 30-day prescription initially and then return later to receive the remaining portion, if needed. This flexibility may help reduce the number of unused pills in circulation and reduce the risk of substance misuse, diversion, and overdose.

The bipartisan bill before us reflects a careful compromise that holds the potential to reduce the amount of unused opioid medications in circulation and is an important step in helping curb a growing opioid epidemic.

I want to thank Representatives CLARK and STIVERS for their leadership in sponsoring this bill.

I urge my colleagues to support the Reducing Unused Medications Act.

Mr. Speaker, I yield 3 minutes to the gentlewoman from Massachusetts (Ms. CLARK), the sponsor of this bill.

Ms. CLARK of Massachusetts. Mr. Speaker, I thank the gentleman from Texas for yielding.

Mr. Speaker, over the last decade, we have seen a staggering increase of opioid overdose deaths. In 2015, this epidemic claimed 125 lives in my district alone. There are a lot of different causes of this crisis, but the number of prescription opioids in circulation is a critical factor.

Over the last 15 years, the amount of prescription painkillers has quadrupled and generic Vicodin is now the most prescribed drug to Medicare beneficiaries.

Now, we know that often patients don't use all the opioids they are prescribed. According to the National Institute on Drug Abuse, over 70 percent of adults who misuse prescription drugs get them from friends or relatives.

Millions of half-filled bottles of unused and unwanted prescription drugs line our families' medicine cabinets, and too often that is where opioid addiction begins.

One promising way to reduce the amount of unused and unwanted painkillers that are fueling this public health crisis is by allowing patients and doctors to only partially fill opioid prescriptions.

By allowing pharmacists to partially fill a prescription for opioids at the request of a patient or doctor, we can reduce the number of unused pills and help stop pill diversion and misuse.

Currently, the DEA allows partial filling of prescriptions for many drugs, but the regulations are narrower and less clear for opioid drugs. That is why I, along with Representative STIVERS, have introduced the Reducing Unused Medications Act.

This legislation will resolve any ambiguity and clearly establish that a prescription for schedule II substances, like opioid painkillers, may be partially filled upon the request of a patient or doctor.

We have all heard the stories. Just last weekend I ran into a dad whose son had been given a 30-day prescription of opioid painkillers for having a wisdom tooth taken out, and he had just received an unwanted prescription, also for 30 days, after having minor surgery.

This bill will empower patients to manage their prescriptions and can be a critical tool in an effort to address the opioid epidemic. This is a common-sense bill that will help us stop the misuse of prescription drugs that has fueled the use of heroin and this opioid epidemic.

Mr. GENE GREEN of Texas. Mr. Speaker, I yield back the balance of my time.

Mr. GUTHRIE. Mr. Speaker, I encourage all my colleagues to vote for H.R. 4599, and I yield back the balance of my time.

Mr. PALLONE. Mr. Speaker, I rise to voice my support for H.R. 4599, commonsense legislation that offers the potential to reduce the number of unused and unwanted prescription opioids that have been misused or diverted as a part of the opioid epidemic.

The number of prescription opioids dispensed in the U.S. has nearly quadrupled in the last 15 years, and over 70 percent of adults who misuse prescription opioids get them from a friend or a relative. This is often due to the fact that many patients fill legitimate prescriptions for opioids and for one reason or another do not use the entirety of the prescription.

One way to help reduce the amount of unused opioid medications in home medicine cabinets is to permit the partial filling of Schedule II prescriptions. Partial fill policies allow providers, pharmacists, and patients the option to dispense a portion of a prescription with the option of filling the total amount of the prescription at a later time. For example, a patient or practitioner could request that 10 or 15 days of a 30-day prescription be dispensed initially with the remaining portion available later if needed. It is hoped that this additional flexibility would reduce the number of unused pills in circulation and ultimately reduce misuse and diversion of these prescription opioids.

Current Drug Enforcement Administration regulations allow pharmacists to partially fill prescriptions for Schedule III, IV, and V substances, however, Schedule II substances can only be partially filled in long term care settings, for terminally ill patients, or when the full prescription cannot be supplied. While these regulations do not prohibit partially filling prescriptions for Schedule II substances in other situations, the DEA has acknowledged that the regulations may need to be amended to provide clarity as to when partial fill of Schedule II substances is allowable.

The Reducing Unused Medications Act of 2015 was introduced in the House by Representatives KATHERINE CLARK (D-MA) and STEVE STIVERS (R-OH) to do just that—provide additional clarity regarding when Schedule II prescriptions may be partially filled under the Controlled Substances Act.

In addition to the circumstances outlined in current DEA regulations, H.R. 4599 would also allow partial fill of Schedule II substances if requested by a doctor or patient, as long as the prescription is written and dispensed according to federal and state law. It further makes clear that remaining portions of a partially filled prescription for a Schedule II substance may not be filled later than 30 days after the date the prescription is written.

Partial fills would also be allowed in emergency situations, with the remaining portion to be filled not later than 72 hours after the prescription is issued. This legislation does not impact the ability of Schedule III, IV, or V prescriptions to be partially filled.

H.R. 4599 is the result of careful compromise among the authors of this legislation, the stakeholders, and our Committee members, and I urge my colleagues to support it.

Ms. JACKSON LEE. Mr. Speaker, I rise in support of H.R. 4599 the "Reducing Unused Medication Act of 2016".

This bill is an important measure that will decrease the number of unused medications available for misuse to the public by setting limitations on the most frequent avenues used to secure unused medication.

As we know, many times patients are prescribed medication far beyond their needs.

Unused prescription medication creates a lethal danger to households and communities across America, and failing to properly dispose of unfinished medications can have dire consequences on the environment and our ecosystem.

According to a new study conducted by Geisinger Health System and published in the Journal of the American Pharmacists Association just 11 percent of unused prescription drugs were disposed of via drug take-back programs, while 55 percent were left in the

medicine cabinet, 14 percent were thrown in the trash, and 9 percent were flushed down the toilet.

As we have heard many unfortunate stories as we bring greater awareness to this issue, we know that abuse of medicine among teenagers is a growing problem.

Easy access to parents' and grandparents' leftover medications is just throwing gasoline on the fire.

Meanwhile, more than 60,000 young children are taken to the emergency room each year after ingesting a family member's medication.

With respect to the environment, the FDA no longer recommends flushing drugs down the toilet because sewage treatment plants lack the capacity to remove pharmaceuticals and personal care products' residue.

H.R. 4599 will amend the Controlled Substances Act to permit certain fillings of prescriptions—such that a prescription for a controlled substance may be partially filled if:

It is not prohibited by state law;

The prescription is written and filled in accordance with the Controlled Substances Act, regulations prescribed by the Attorney General, and State law;

The partial fill is requested by the patient or the practitioner that wrote the prescription; and

The total quantity dispensed in all partial fillings does not exceed the total quantity prescribed.

Mr. Speaker, enacting this legislation will work to not only combat a number of prescription drug abuses, but also deal a debilitating blow to the mounting opioid abuse epidemic.

The SPEAKER pro tempore (Mr. ZINKE). The question is on the motion offered by the gentleman from Kentucky (Mr. GUTHRIE) that the House suspend the rules and pass the bill, H.R. 4599, as amended.

The question was taken; and (two-thirds being in the affirmative) the rules were suspended and the bill, as amended, was passed.

A motion to reconsider was laid on the table.

EXAMINING OPIOID TREATMENT INFRASTRUCTURE ACT OF 2016

Mr. GUTHRIE. Mr. Speaker, I move to suspend the rules and pass the bill (H.R. 4982) to direct the Comptroller General of the United States to evaluate and report on the in-patient and outpatient treatment capacity, availability, and needs of the United States, as amended.

The Clerk read the title of the bill.

The text of the bill is as follows:

H.R. 4982

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

SECTION 1. SHORT TITLE.

This Act may be cited as the "Examining Opioid Treatment Infrastructure Act of 2016".

SEC. 2. STUDY ON TREATMENT INFRASTRUCTURE.

Not later than 24 months after the date of enactment of this Act, the Comptroller General of the United States shall initiate an evaluation, and submit to Congress a report, of the inpatient and outpatient treatment capacity, availability, and needs of the United States, which shall include, to the extent data are available—

(1) the capacity of acute residential or inpatient detoxification programs;

(2) the capacity of inpatient clinical stabilization programs, transitional residential support services, and residential rehabilitation programs;

(3) the capacity of demographic specific residential or inpatient treatment programs, such as those designed for pregnant women or adolescents;

(4) geographical differences of the availability of residential and outpatient treatment and recovery options for substance use disorders across the continuum of care;

(5) the availability of residential and outpatient treatment programs that offer treatment options based on reliable scientific evidence of efficacy for the treatment of substance use disorders, including the use of Food and Drug Administration-approved medicines and evidence-based nonpharmacological therapies;

(6) the number of patients in residential and specialty outpatient treatment services for substance use disorders;

(7) an assessment of the need for residential and outpatient treatment for substance use disorders across the continuum of care;

(8) the availability of residential and outpatient treatment programs to American Indians and Alaska Natives through an Indian health program (as defined by section 4 of the Indian Health Care Improvement Act (25 U.S.C. 1603)); and

(9) the barriers (including technological barriers) at the Federal, State, and local levels to real-time reporting of de-identified information on drug overdoses and ways to overcome such barriers.

The SPEAKER pro tempore. Pursuant to the rule, the gentleman from Kentucky (Mr. GUTHRIE) and the gentleman from Texas (Mr. GENE GREEN) each will control 20 minutes.

The Chair recognizes the gentleman from Kentucky.

GENERAL LEAVE

Mr. GUTHRIE. Mr. Speaker, I ask unanimous consent that all Members have 5 legislative days in which to revise and extend their remarks and insert extraneous materials in the RECORD on the bill.

The SPEAKER pro tempore. Is there objection to the request of the gentleman from Kentucky?

There was no objection.

Mr. GUTHRIE. Mr. Speaker, I yield myself such time as I may consume.

Mr. Speaker, I rise today in support of H.R. 4982, Examining Opioid Treatment Infrastructure Act of 2016, introduced by my colleagues, the ranking member of the Energy and Commerce Committee, Mr. PALLONE of New Jersey, and Mr. FOSTER of Illinois.

H.R. 4982 directs the Government Accountability Office to evaluate and report on the inpatient and outpatient treatment capacity, availability, and needs of the United States. It is important to have the data necessary to assess the opioid infrastructure in our country.

Mr. Speaker, I urge my colleagues to support this bill.

I reserve the balance of my time.

Mr. GENE GREEN of Texas. Mr. Speaker, I yield myself such time as I may consume.

I rise in support of H.R. 4982, Examining Opioid Treatment Infrastructure Act.

Opioid use disorder is a chronic disease that can be effectively treated, but it requires ongoing management. As the current epidemic has drawn sharply into focus, significantly more resources are needed to ensure availability of and access to evidence-based treatment.

A public health-based approach to drug abuse and addiction requires having broad-based treatment services available for those with opioid use disorders, including both behavioral therapies and proven medication-assisted treatment and insurance coverage for such treatment.

Medication-assisted treatment is often in combination with behavioral treatment, which has been shown to be highly effective in the treatment of opioid addiction.

However, many patients in need of treatment face significant barriers. Physicians cite barriers finding and placing patients in addiction treatment and recovery programs.

Current capacity of treatment and recovery programs is inadequate to meet the population's needs. There are too few physicians and programs offering treatment and recovery services.

In order to address these shortages, better information and data is needed for our existing opioid treatment infrastructure. H.R. 4982, the Examining Opioid Treatment Infrastructure Act, will direct the GAO to conduct a study on the inpatient and outpatient treatment capacity of the United States.

It instructs the agency to examine the capacity of acute residential or inpatient detoxification programs, inpatient clinical stabilization programs, transitional residential support services, and residential rehabilitation programs.

The GAO is directed to report on geographic differences in the availability of treatment and recovery programs for substance abuse disorders; the availability of programs that offer evidence-based treatment options, including the use of FDA-approved medications; and the number of patients' different treatment settings.

Finally, the agency would include an assessment of the need for residential and outpatient treatment for substance use disorders across the continuum of care.

We must face this crisis head-on and address the serious gaps in evidence-based treatment. The Examining Opioid Treatment Infrastructure Act will help us do this.

I want to thank the bill's sponsor, Representative BILL FOSTER, for introducing this legislation.

I urge my colleagues to support the act.

I reserve the balance of my time.

Mr. GUTHRIE. Mr. Speaker, I yield 2 minutes to the gentleman from Georgia (Mr. CARTER), my friend.

Mr. CARTER of Georgia. I thank the gentleman for yielding.

Mr. Speaker, I rise today in support of H.R. 4599 because treatment of addiction to opioid painkillers and heroin

is vital in fighting the U.S. drug abuse epidemic.

H.R. 4982 requires the Government Accountability Office to report on inpatient and outpatient treatment capacities, detoxification programs, rehabilitation programs, and treatment programs for pregnant women and adolescents.

Inpatient and outpatient treatment centers are usually one of the biggest obstacles communities face when trying to help people who are fighting addiction. Unfortunately, for most communities, local treatment facilities are few and far between and many of them are full.

As a lifelong healthcare professional, I believe the only way we will be able to adequately fight this opioid abuse epidemic is if we work together.

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We need to adequately understand the treatment services that are available to people with addiction across the country so we can use these tools to their fullest extent. That is why I am supporting H.R. 4982. By understanding all the tools the community can use, we can begin to fight this epidemic.

I encourage my colleagues to support this bill so we can begin to leverage our resources to help our communities fight opioid abuse.

Mr. GENE GREEN of Texas. Mr. Speaker, I yield 3 minutes to the gentleman from Illinois (Mr. FOSTER), a cosponsor of the bill.

Mr. FOSTER. Mr. Speaker, I thank Mr. GREEN for yielding me the time.

My bill, H.R. 4982, the Examining Opioid Treatment Infrastructure Act of 2016, is straightforward, and it is bipartisan.

If we are ever going to get a handle on the heroin and opioid epidemic tearing through our communities, we have to know what we are dealing with. We need data, and we need to know what capacity we have in place and what capacity we need to treat this epidemic so that we can make smart and adequate investments, which is why we need this bill.

This important bill directs a study of the inpatient and outpatient addiction treatment capacity and availability throughout the U.S., as well as an assessment of the needed types and numbers of treatment options.

It seems simple, but there is no better place to start than at the beginning, with an understanding of the addiction treatment infrastructure that we have versus the need for that infrastructure.

When I was first elected to Congress, I was not prepared to hear the stories from family members who had lost a loved one due to substance abuse. My office often gets calls from parents wanting to share their stories of the children they have lost to addiction.

While opioid addiction may start in many ways, it ends with a scientifically understood, increasingly treat-

able medical condition in which the biochemical pathways necessary to normal decisionmaking in the brain have been hijacked, and the chemistry of the brain permanently altered.

The more we learn about the science of addiction, the more convinced we become that the best path forward is treating addiction like the medical, biochemical condition that it is. To do this successfully, we need the correct number and types of addiction treatment facilities.

That is why I introduced the Examining Opioid Treatment Infrastructure Act of 2016, with my friend from New Jersey (Mr. PALLONE).

We know that opioid use and abuse has become an epidemic, and now let's make sure that we know the real numbers we are dealing with so we can allocate the necessary resources.

I urge support of the Examining Opioid Treatment Infrastructure Act of 2016.

Mr. GENE GREEN of Texas. Mr. Speaker, having no further speakers, I yield back the balance of my time.

Mr. GUTHRIE. Mr. Speaker, I encourage my colleagues to vote for H.R. 4982.

I yield back the balance of my time.

The SPEAKER pro tempore. The question is on the motion offered by the gentleman from Kentucky (Mr. GUTHRIE) that the House suspend the rules and pass the bill, H.R. 4982, as amended.

The question was taken; and (two-thirds being in the affirmative) the rules were suspended and the bill, as amended, was passed.

A motion to reconsider was laid on the table.

OPIOID USE DISORDER TREATMENT EXPANSION AND MODERNIZATION ACT

Mr. GUTHRIE. Mr. Speaker, I move to suspend the rules and pass the bill (H.R. 4981) to amend the Controlled Substances Act to improve access to opioid use disorder treatment, as amended.

The Clerk read the title of the bill.

The text of the bill is as follows:

H.R. 4981

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

SECTION 1. SHORT TITLE.

This Act may be cited as the "Opioid Use Disorder Treatment Expansion and Modernization Act".

SEC. 2. FINDING.

The Congress finds that opioid use disorder has become a public health epidemic that must be addressed by increasing awareness and access to all treatment options for opioid use disorder, overdose reversal, and relapse prevention.

SEC. 3. OPIOID USE DISORDER TREATMENT MODERNIZATION.

(a) IN GENERAL.—Section 303(g)(2) of the Controlled Substances Act (21 U.S.C. 823(g)(2)) is amended—

(1) in subparagraph (B), by striking clauses (i), (ii), and (iii) and inserting the following:

“(i) The practitioner is a qualifying practitioner (as defined in subparagraph (G)).

“(ii) With respect to patients to whom the practitioner will provide such drugs or combinations of drugs, the practitioner has the capacity to provide directly, by referral, or in such other manner as determined by the Secretary—

“(I) all schedule III, IV, and V drugs, as well as unscheduled medications approved by the Food and Drug Administration, for the treatment of opioid use disorder, including such drugs and medications for maintenance, detoxification, overdose reversal, and relapse prevention, as available; and

“(II) appropriate counseling and other appropriate ancillary services.

“(iii)(I) The total number of such patients of the practitioner at any one time will not exceed the applicable number. Except as provided in subclause (II), the applicable number is 30.

“(II) The applicable number is 100 if, not sooner than 1 year after the date on which the practitioner submitted the initial notification, the practitioner submits a second notification to the Secretary of the need and intent of the practitioner to treat up to 100 patients.

“(III) The Secretary may by regulation change such total number.

“(IV) The Secretary may exclude from the applicable number patients to whom such drugs or combinations of drugs are directly administered by the qualifying practitioner in the office setting.

“(iv) If the Secretary by regulation increases the total number of patients which a qualifying practitioner is permitted to treat pursuant to clause (iii)(II), the Secretary shall require such a practitioner to obtain a written agreement from each patient, including the patient's signature, that the patient—

“(I) will receive an initial assessment and treatment plan and periodic assessments and treatment plans thereafter;

“(II) will be subject to medication adherence and substance use monitoring;

“(III) understands available treatment options, including all drugs approved by the Food and Drug Administration for the treatment of opioid use disorder, including their potential risks and benefits; and

“(IV) understands that receiving regular counseling services is critical to recovery.

“(v) The practitioner will comply with the reporting requirements of subparagraph (D)(i)(IV).”;

(2) in subparagraph (D)—

(A) in clause (i), by adding at the end the following:

“(IV) The practitioner reports to the Secretary, at such times and in such manner as specified by the Secretary, such information and assurances as the Secretary determines necessary to assess whether the practitioner continues to meet the requirements for a waiver under this paragraph.”;

(B) in clause (ii), by striking “Upon receiving a notification under subparagraph (B)” and inserting “Upon receiving a determination from the Secretary under clause (iii) finding that a practitioner meets all requirements for a waiver under subparagraph (B)”;

(C) in clause (iii)—

(i) by inserting “and shall forward such determination to the Attorney General” before the period at the end of the first sentence; and

(ii) by striking “physician” and inserting “practitioner”;

(3) in subparagraph (G)—

(A) by amending clause (ii)(IV) to read as follows:

“(IV) The physician has, with respect to the treatment and management of opiate-dependent patients, completed not less than eight hours of training (through classroom situations, seminars at professional society meetings, electronic communications, or otherwise) that is provided by the American Society of Addiction Medicine, the American Academy of Addiction Psychiatry, the American Medical Association, the American Osteopathic Association, the American Psychiatric Association, or any other organization that the Secretary determines is appropriate for purposes of this subclause. Such training shall address—

“(aa) opioid maintenance and detoxification;

“(bb) appropriate clinical use of all drugs approved by the Food and Drug Administration for the treatment of opioid use disorder;

“(cc) initial and periodic patient assessments (including substance use monitoring);

“(dd) individualized treatment planning; overdose reversal; relapse prevention;

“(ee) counseling and recovery support services;

“(ff) staffing roles and considerations;

“(gg) diversion control; and

“(hh) other best practices, as identified by the Secretary.”; and

(B) by adding at the end the following:

“(iii) The term ‘qualifying practitioner’ means—

“(I) a qualifying physician, as defined in clause (ii); or

“(II) during the period beginning on the date of the enactment of the Opioid Use Disorder Treatment Expansion and Modernization Act and ending on the date that is three years after such date of enactment, a qualifying other practitioner, as defined in clause (iv).

“(iv) The term ‘qualifying other practitioner’ means a nurse practitioner or physician assistant who satisfies each of the following:

“(I) The nurse practitioner or physician assistant is licensed under State law to prescribe schedule III, IV, or V medications for the treatment of pain.

“(II) The nurse practitioner or physician assistant satisfies 1 or more of the following:

“(aa) Has completed not fewer than 24 hours of initial training addressing each of the topics listed in clause (ii)(IV) (through classroom situations, seminars at professional society meetings, electronic communications, or otherwise) provided by the American Society of Addiction Medicine, the American Academy of Addiction Psychiatry, the American Medical Association, the American Osteopathic Association, the American Nurses Credentialing Center, the American Psychiatric Association, the American Association of Nurse Practitioners, the American Academy of Physician Assistants, or any other organization that the Secretary determines is appropriate for purposes of this subclause.

“(bb) Has such other training or experience as the Secretary determines will demonstrate the ability of the nurse practitioner or physician assistant to treat and manage opiate-dependent patients.

“(III) The nurse practitioner or physician assistant is supervised by or works in collaboration with a qualifying physician, if the nurse practitioner or physician assistant is required by State law to prescribe medications for the treatment of opioid use disorder in collaboration with or under the supervision of a physician.

The Secretary may review and update the requirements for being a qualifying other practitioner under this clause.”; and

(4) in subparagraph (H)—

(A) in clause (i), by inserting after subclause (II) the following:

“(III) Such other elements of the requirements under this paragraph as the Secretary determines necessary for purposes of implementing such requirements.”; and

(B) by amending clause (ii) to read as follows:

“(ii) Not later than one year after the date of enactment of the Opioid Use Disorder Treatment Expansion and Modernization Act, the Secretary shall update the treatment improvement protocol containing best practice guidelines for the treatment of opioid-dependent patients in office-based settings. The Secretary shall update such protocol in consultation with experts in opioid use disorder research and treatment.”.

(b) RECOMMENDATION OF REVOCATION OR SUSPENSION OF REGISTRATION IN CASE OF SUBSTANTIAL NONCOMPLIANCE.—The Secretary of Health and Human Services may recommend to the Attorney General that the registration of a practitioner be revoked or suspended if the Secretary determines, according to such criteria as the Secretary establishes by regulation, that a practitioner who is registered under section 303(g)(2) of the Controlled Substances Act (21 U.S.C. 823(g)(2)) is not in substantial compliance with the requirements of such section, as amended by this Act.

(c) OPIOID DEFINED.—Section 102(18) of the Controlled Substances Act (21 U.S.C. 802(18)) is amended by inserting “or ‘opiod’” after “The term ‘opiate’”.

(d) REPORTS TO CONGRESS.—

(1) IN GENERAL.—Not later than 2 years after the date of enactment of this Act and not less than over every 5 years thereafter, the Secretary of Health and Human Services, in consultation with the Drug Enforcement Administration and experts in opioid use disorder research and treatment, shall—

(A) perform a thorough review of the provision of opioid use disorder treatment services in the United States, including services provided in opioid treatment programs and other specialty and nonspecialty settings; and

(B) submit a report to the Congress on the findings and conclusions of such review.

(2) CONTENTS.—Each report under paragraph (1) shall include an assessment of—

(A) compliance with the requirements of section 303(g)(2) of the Controlled Substances Act (21 U.S.C. 823(g)(2)), as amended by this Act;

(B) the measures taken by the Secretary of Health and Human Services to ensure such compliance;

(C) whether there is further need to increase or decrease the number of patients a waived practitioner is permitted to treat, as provided for by the amendment made by subsection (a)(1);

(D) the extent to which, and proportions with which, the full range of Food and Drug Administration-approved treatments for opioid use disorder are used in routine health care settings and specialty substance use disorder treatment settings;

(E) access to, and use of, counseling and recovery support services, including the percentage of patients receiving such services;

(F) changes in State or local policies and legislation relating to opioid use disorder treatment;

(G) the use of prescription drug monitoring programs by practitioners who are permitted to dispense narcotic drugs to individuals pursuant to a waiver under section 303(g)(2) of the Controlled Substances Act (21 U.S.C. 823(g)(2));

(H) the findings resulting from inspections by the Drug Enforcement Administration of practitioners described in subparagraph (G); and

(I) the effectiveness of cross-agency collaboration between Department of Health

and Human Services and the Drug Enforcement Administration for expanding effective opioid use disorder treatment.

SEC. 4. SENSE OF CONGRESS.

It is the Sense of Congress that, with respect to the total number of patients that a qualifying physician (as defined in subparagraph (G)(iii) of section 303(g)(2) of the Controlled Substances Act (21 U.S.C. 823(g)(2)) can treat at any one time pursuant to such section, the Secretary of Health and Human Services should consider raising such total number to 250 patients following a third notification to the Secretary of the need and intent of the physician to treat up to 250 patients that is submitted to the Secretary not sooner than 1 year after the date on which the physician submitted to the Secretary a second notification to treat up to 100 patients.

SEC. 5. PARTIAL FILLS OF SCHEDULE II CONTROLLED SUBSTANCES.

(a) IN GENERAL.—Section 309 of the Controlled Substances Act (21 U.S.C. 829) is amended by adding at the end the following:

“(f) PARTIAL FILLS OF SCHEDULE II CONTROLLED SUBSTANCES.—

“(1) PARTIAL FILLS.—

“(A) IN GENERAL.—A prescription for a controlled substance in schedule II may be partially filled if—

“(i) it is not prohibited by State law;

“(ii) the prescription is written and filled in accordance with the Controlled Substances Act (21 U.S.C. 801 et seq.), regulations prescribed by the Attorney General, and State law;

“(iii) the partial fill is requested by the patient or the practitioner that wrote the prescription; and

“(iv) the total quantity dispensed in all partial fillings does not exceed the total quantity prescribed.

“(B) OTHER CIRCUMSTANCES.—A prescription for a controlled substance in schedule II may be partially filled in accordance with section 1306.13 of title 21, Code of Federal Regulations (as in effect on the date of enactment of the Reducing Unused Medications Act of 2016).

“(2) REMAINING PORTIONS.—

“(A) IN GENERAL.—Except as provided in subparagraph (B), remaining portions of a partially filled prescription for a controlled substance in schedule II—

“(i) may be filled; and

“(ii) shall be filled not later than 30 days after the date on which the prescription is written.

“(B) EMERGENCY SITUATIONS.—In emergency situations, as described in subsection (a), the remaining portions of a partially filled prescription for a controlled substance in schedule II—

“(i) may be filled; and

“(ii) shall be filled not later than 72 hours after the prescription is issued.”.

(b) RULE OF CONSTRUCTION.—Nothing in this section shall be construed to affect the authority of the Attorney General to allow a prescription for a controlled substance in schedule III, IV, or V of section 202(c) of the Controlled Substances Act (21 U.S.C. 812(c)) to be partially filled.

The SPEAKER pro tempore. Pursuant to the rule, the gentleman from Kentucky (Mr. GUTHRIE) and the gentleman from Texas (Mr. GENE GREEN) each will control 20 minutes.

The Chair recognizes the gentleman from Kentucky.

GENERAL LEAVE

Mr. GUTHRIE. Mr. Speaker, I ask unanimous consent that all Members

have 5 legislative days in which to revise and extend their remarks and insert extraneous materials in the RECORD on the bill.

The SPEAKER pro tempore. Is there objection to the request of the gentleman from Kentucky?

There was no objection.

Mr. GUTHRIE. Mr. Speaker, I yield myself such time as I may consume.

Mr. Speaker, I rise in support of H.R. 4981, the Opioid Use Disorder Treatment Expansion and Modernization Act, introduced by the gentleman from Indiana (Mr. BUCSHON) and the gentleman from New York (Mr. TONKO).

More than 2 million Americans are living with a substance use disorder. Evidence strongly suggests that medication-assisted treatment can have a significant impact on combating this epidemic.

H.R. 4981 would amend the Controlled Substance Act to expand access to medication-assisted treatment for patients with substance use disorders while improving the quality of care provided and minimizing the potential for drug diversion.

For the first time, this bill would authorize nurse practitioners and physician assistants to prescribe maintenance treatment in an office-based setting after meeting certain training requirements.

H.R. 4981 would improve the training that all qualifying practitioners receive, and it would maintain the critical role counseling and other recovery support services play in the provision of quality medication-assisted treatment.

Further, the bill would require HHS to perform a thorough review of opioid use disorder so we know what is working well and where there is a need for further improvement.

H.R. 4981 is the product of extensive bipartisan discussion at the Energy and Commerce Committee, and I urge my colleagues to join me in supporting it.

I reserve the balance of my time.

Mr. GENE GREEN of Texas. Mr. Speaker, I yield myself such time as I may consume.

Mr. Speaker, I rise in support of H.R. 4981, the Opioid Use Disorder Treatment Expansion and Modernization Act.

Despite the fact that we are in the middle of an unprecedented opioid and heroin crisis, we know that treatment gaps continue to limit our ability to address the growing crisis. Only 1 in 10 people struggling with addiction receive any form of treatment, despite the fact that we have evidence-based, medication-assisted treatment for those struggling with prescription drug or heroin addiction.

One available treatment is buprenorphine. The medication is safely prescribed from an office setting similar to any other medication a patient might take.

Unfortunately, in the midst of our current opioid epidemic, currently,

physicians are restricted to how many patients they are allowed to treat with this medication, and nurse practitioners and physician assistants are not allowed to treat patients with this medication at all.

As a result, many patients are placed on prolonged waiting lists with addiction specialists as they await access to this treatment. This is not acceptable.

We must significantly increase the cap of the number of patients a physician can treat, as well as permanently allow nurse practitioners and physician assistants to treat patients with this medication.

Today's legislation is not perfect, but it is the first step toward reaching bicameral, bipartisan agreement on a package that meets these goals. I remain committed to working with my colleagues to expand access to this important evidence-based treatment as we move to conference with the Senate.

I want to thank the bill's sponsors, fellow members of the Committee on Energy and Commerce, Representative PAUL TONKO and Representative LARRY BUCSHON, for introducing this legislation. I urge my colleagues to support the Opioid Use Disorder Treatment Expansion and Modernization Act.

I reserve the balance of my time.

Mr. GUTHRIE. Mr. Speaker, I yield 5 minutes to the gentleman from Indiana (Mr. BUCSHON), a cosponsor of this piece of legislation.

Mr. BUCSHON. Mr. Speaker, H.R. 4981, the Opioid Use Disorder Treatment Expansion and Modernization Act, is the product of months of stakeholder engagement, expert input, and bipartisan negotiation.

The opioid epidemic has left no area of this Nation untouched. Day in and day out, we hear from our constituents and see in the news the direct impact this has on the everyday lives of our fellow citizens.

The evidence is clear that this epidemic is growing and it will continue to grow unless immediate action is taken.

As a doctor, a father, and a public policymaker, I want to do my part to help our communities overcome this challenge. That is why I am proud to offer H.R. 4981, the Opioid Use Disorder Treatment Expansion and Modernization Act today with my colleague from New York (Mr. TONKO).

We have worked together over the past several months to find common ground and move forward with a well-crafted policy solution. Our final bill represents months of stakeholder engagement and bipartisan work to improve access and quality treatment for opioid use disorder while limiting diversion of treatment medications for abuse themselves.

H.R. 4981 targets four main areas:

Increase access to opioid use disorder treatment where it is most needed;

Empower physicians through education, training, and quality-of-care measures;

Encourage a multi-pronged approach to opioid use disorder treatment;

Deter bad actors and reduce diversion, as previously was mentioned.

This is a positive step toward increasing access for treatment for opioid use disorder while raising the quality of care and reducing diversion.

Again, I want to thank Mr. TONKO and all those who have worked with us throughout this process. I urge my colleagues to support H.R. 4981's passage, and I look forward to productive discussions with the Senate to get critical opioid legislation to the President's desk.

Mr. GENE GREEN of Texas. Mr. Speaker, I yield 5 minutes to the gentleman from New York (Mr. TONKO), a fellow member on the Committee on Energy and Commerce.

Mr. TONKO. Mr. Speaker, I thank the gentleman from Texas for yielding.

I rise in support of H.R. 4981, Opioid Use Disorder Treatment Expansion and Modernization Act, which I have had the honor of working on with my colleague and friend, Representative LARRY BUCSHON, in introducing.

At the outset, I would like to thank Representative BUCSHON and his staff, as well as the hard work of individuals on the committee staff, and our committee leaders, Chairman UPTON and Ranking Member PALLONE, to get this bill to this point.

I would also like to praise my colleague and fellow New Yorker, Representative BRIAN HIGGINS, for his introduction and leadership on the TREAT Act, without which we would not be making this progress today.

It is no hyperbole to announce that we are in a crisis when it comes to the opioid epidemic sweeping our Nation. More than 47,000 people have died of drug overdoses in 2014—family members, friends, and neighbors within that 47,000, for each and every one of us—a vast majority of which were opioid-related.

It is a sign of the times that when you drive down the thruway in my district in upstate New York, instead of billboards advertising for McDonald's or Taco Bell, you see billboards advising to you call 911 in case of an opioid overdose.

It is disturbing how quickly this has become the new normal. This crisis has affected our neighbors, our families, and our beloved communities.

Having worked with the addiction recovery community, I know that one of the most important things we can do as policymakers is to ensure that when an individual struggling with addiction cries out for help, that there is someone there to answer the call. That is what this bill endeavors to do.

Right now, treatment capacity for those seeking help for opioid use disorder in an office-based setting is artificially capped at 100 patients. What this means in reality is that if you are patient 101 or 102, you get a closed door and have to wait weeks, if not months, for treatment. Expectedly, these delays can be deadly.

The legislation before us will support the goal of raising the caps for qualified physicians to 250, expanding existing opioid treatment capacity by some 150 percent, all while ensuring the care that individuals receive is high quality and minimizes the risk of diversion.

In addition, this legislation will, for the first time, expand buprenorphine-prescribing authority to nurse practitioners and physician assistants who meet certain training requirements and comply with applicable State laws.

By bringing these practitioners into the fold, we can expand treatment capacity, especially in rural areas where physicians oftentimes might be few and far between.

Importantly, this bill expands access to high-quality addiction treatment, promoting the full range of psychosocial services that makes recovery possible, and providing HHS with new tools to remove bad actors from the system.

Any Member interested in decreasing the unlawful diversion of buprenorphine should support this legislation.

This legislation is not perfect, and I would still like to see a higher patient limit for the top class of physicians.

In the midst of this crisis, ensuring access for all needs to be our utmost top priority. No matter where we ultimately land on this arbitrary number, we will still be closing the door on someone who needs our help. We would not accept this in any other field of medicine, so we all need to think long and hard about why we are allowing this situation to persist in the field of addiction.

In addition, I would like to draw attention to two changes made to this bill before floor consideration. First, instead of statutorily lifting the DATA 2000 caps, this legislation includes a sense of Congress, if you will, that the caps should be lifted.

Secondly, this legislation would time-limit the expansion of prescribing authority to nurse practitioners and physician assistants to some 3 years.

Both of these temporary changes were made to bring the bill into compliance with PAYGO procedures for floor consideration and must be fixed as we move this bill into conference.

□ 1845

I would just ask, Mr. Speaker, are we firm in our commitment to combat the addiction to heroin? Are we firm in our efforts to assist those who struggle with the illness of addiction? Do we stand for providing true hope to individuals who count on us to provide the resources along with the legislation to make life available to them?

I would suggest that this House and the Senate look hard and fast at providing resources that are real and that provide for an effective outcome. If we fail to find a path forward for a meaningful expansion of the physician caps and certainly the nurse practitioners' and physician assistants' prescribing

authority, then we are rationing care, pure and simple.

The starting point for any conference discussion should be the bill as reported out of the House Energy and Commerce Committee. In any final legislation, we must include a statutory lifting of the DATA 2000 caps as well as full authority for our NPs and PAs. I would ask for the commitment of my colleagues on the other side of the aisle in continuing to work toward these goals.

Notwithstanding these issues, I believe it is critically important to keep up the momentum and to pass this bill. Even in its imperfect form, this bill will make a huge difference in the lives of those who struggle with this disease. If we cannot find a way to get a bill to the President's desk that will provide needed relief in the midst of this epidemic, shame on us.

While this legislation is not a cure-all for the opioid epidemic, I believe the Opioid Use Disorder Treatment Expansion and Modernization Act will go far in helping to alleviate our acute treatment capacity issues and put more people on the path to recovery. I ask my colleagues in this House and down the hall in the Senate to support a bill—this bill—so that we can bring hope, truly bring hope into the lives of those individuals, those families, and those communities who grapple with this crisis on a daily basis.

Mr. GUTHRIE. Mr. Speaker, as I said earlier, people come here to the people's House from all walks of life. We are blessed to have a pharmacist amongst us. The only pharmacist here. These are difficult issues. Legal prescription drugs are diverted and abused, and heroin is illegal. It is great to have his expertise.

Mr. Speaker, I yield such time as he may consume to the gentleman from Georgia (Mr. CARTER).

Mr. CARTER of Georgia. I thank the gentleman from Kentucky for yielding and for his efforts, along with Dr. BUCHSON and others across the aisle, Congressman GENE GREEN and all those who have been involved in this. This is a very important subject.

Mr. Speaker, I rise today in support of H.R. 4981 because making sure modern treatments are available for opioid addiction should be one of our top priorities in the fight against opioid drug abuse.

H.R. 4981 makes reforms to the Controlled Substances Act that would modernize the way doctors approach opioid addiction and how patients obtain treatment. These reforms, which make treatment tools more available to patients, are one more step we can take to improve treatment services for patients. With these reforms, more patients will receive higher quality care, increasing the success of overall treatment.

As a lifelong healthcare professional, I have witnessed patients firsthand who have struggled with receiving care for their addiction. We must stop the

cycle of failing to provide patients with proper care because the system is not adequately structured to provide it.

The only way we are able to provide the appropriate care is if we continue to support the evolution of treatment and care for this ever-changing opioid abuse epidemic. That is why I am supporting H.R. 4981. By reforming the way treatment is provided, we can begin to truly help all patients with opioid addiction.

Mr. Speaker, I encourage my colleagues to support this bill.

Mr. GENE GREEN of Texas. Mr. Speaker, I have no further speakers.

Mr. Speaker, I yield back the balance of my time.

Mr. GUTHRIE. Mr. Speaker, I encourage and urge my colleagues to support this very important bill, H.R. 4981.

I yield back the balance of my time.

Ms. JACKSON LEE. Mr. Speaker, I rise in support of H.R. 4981 the "Opioid Use Disorder Treatment Expansion and Modernization Act".

This bill highlights the abuse of opioids that has become a public health epidemic.

Opioids are drugs with effects similar to opium, such as heroin and certain pain medications.

H.R. 4981 would encourage and train health care providers to prescribe overdose reversal drugs, such as Naloxone, when they prescribe common opioids-like pain medication to patients at risk of addiction.

The plague of opioid overdose deaths across the nation is disturbing, but there are ways to combat this trend.

Any party receiving treatment assessments under this legislation will be privy to the following.

1. A treatment plan and periodic assessments.
2. Will also be subject to medication adherence and substance use monitoring.
3. Treatment options, including all drugs approved by the Food and Drug Administration for the treatment of opioid use disorder, including their potential risks and benefits.
4. Receiving regular counseling services is critical to recovery.

The Centers for Disease Control and Prevention reports that nearly 259 million opioid prescriptions were written in 2012, more than enough for every adult in the United States.

Enacting this legislation will implement a diversion control plan that contains specific measures to reduce the likelihood of the diversion of controlled substances prescribed by the physician for the treatment of opioid use disorder.

In 2013 nearly 4.5 million people in the United States without a valid medical need were using prescription painkillers.

Both states and the federal government have begun responding to this growing public health crisis.

The Obama administration has awarded \$94 million to community health centers to improve and expand the delivery of substance abuse services.

Mr. Speaker, the mounting number of people adversely affected and the over 25,000 lives lost expressly demonstrates the need for this type of legislation.

H.R. 4981 is a positive step in the right direction and I urge all members to support this important legislation.

The SPEAKER pro tempore. The question is on the motion offered by the gentleman from Kentucky (Mr. GUTHRIE) that the House suspend the rules and pass the bill, H.R. 4981, as amended.

The question was taken; and (two-thirds being in the affirmative) the rules were suspended and the bill, as amended, was passed.

A motion to reconsider was laid on the table.

VICTIMS OF GUN VIOLENCE

(Mr. PETERS asked and was given permission to address the House for 1 minute.)

Mr. PETERS. Mr. Speaker, Akron, Ohio, April 18, 2013:

Kem Delaney, 23 years old.
Kiana Welch, 19.
Maria Nash, 19.
Kalamazoo, Michigan, February 20, 2016:
Dorothy Brown, 74 years old.
Barbara Hawthorne, 68.
Mary Lou Nye, 62.
Mary Jo Nye, 60.
Richard Smith, 53.
Tyler Smith, 17.
Lakeland, Florida, January 6, 2016:
Eneida Branch, 31 years old.
David Washington, 24.
Angelica Guadalupe Castro, 23.
Pelzer, South Carolina, March 5, 2014:
Victor Vandegrift, 48 years old.
Wanda Renee Anderson, 43.
Hank Eaton, 32.
Kansas City, Kansas, March 7, 2016:
Randy J. Nordman, 49 years old.
Mike Capps, 41.
Austin Harter, 29.
Clint Harter, 27.
Jackson, Tennessee, April 28, 2016:
Dartalin Pharmed, 32 years old.
Delandis Cortez Clark, 31.
Brian Jontez Banes, 31.
Tashonda Davis, 22.
Wilmington, Delaware, February 11, 2016:
Steven Rinehart, 50 years old.
Laura Elizabeth Mulford, 47.
Officer Michael Manley, 42.
Christine Belford, 39.

SENATE BILLS REFERRED

Bills of the Senate of the following titles were taken from the Speaker's table and, under the rule, referred as follows:

S. 1252. An act to authorize a comprehensive strategic approach for United States foreign assistance to developing countries to reduce global poverty and hunger, achieve food and nutrition security, promote inclusive, sustainable, agricultural-led economic growth, improve nutritional outcomes, especially for women and children, build resilience among vulnerable populations, and for other purposes; to the Committee on Foreign Affairs.

S. 1352. An act to increase Federal Pell Grants for the children of fallen public safety officers, and for other purposes; to the Committee on Education and the Workforce; in addition, to the Committee on the Budget; and to the Committee on the Judiciary for a

period to be subsequently determined by the Speaker, in each case for consideration of such provisions as fall within the jurisdiction of the committee concerned.

ADJOURNMENT

Mr. PETERS. Mr. Speaker, I move that the House do now adjourn.

The motion was agreed to; accordingly (at 6 o'clock and 52 minutes p.m.), under its previous order, the House adjourned until tomorrow, Thursday, May 12, 2016, at 10 a.m. for morning-hour debate.

EXECUTIVE COMMUNICATIONS, ETC.

Under clause 2 of rule XIV, executive communications were taken from the Speaker's table and referred as follows:

5322. A letter from the Director, Regulations Policy and Management Staff, FDA, Department of Health and Human Services, transmitting the Department's direct final rule — Standard Preparations, Limits of Potency, and Dating Period Limitations for Biological Products [Docket No.: FDA-2016-N-1170] received May 10, 2016, pursuant to 5 U.S.C. 801(a)(1)(A); Public Law 104-121, Sec. 251; (110 Stat. 868); to the Committee on Energy and Commerce.

5323. A letter from the Director, Regulations Policy and Management Staff, FDA, Department of Health and Human Services, transmitting the Department's final rule — Standards for the Growing, Harvesting, Packing, and Holding of Produce for Human Consumption; Technical Amendment [Docket No.: FDA-2011-N-0921] (RIN: 0910-AG35) received May 9, 2016, pursuant to 5 U.S.C. 801(a)(1)(A); Public Law 104-121, Sec. 251; (110 Stat. 868); to the Committee on Energy and Commerce.

5324. A letter from the Deputy Assistant Administrator, Office of Diversion Control, Drug Enforcement Administration, Department of Justice, transmitting the Department's final order — Schedules of Controlled Substances: Temporary Placement of Butyryl Fentanyl and Beta-Hydroxythiofentanyl into Schedule I [Docket No.: DEA-434F] received May 10, 2016, pursuant to 5 U.S.C. 801(a)(1)(A); Public Law 104-121, Sec. 251; (110 Stat. 868); to the Committee on Energy and Commerce.

5325. A letter from the Deputy Assistant Administrator, Office of Diversion Control, Drug Enforcement Administration, Department of Justice, transmitting the Department's interim final rule — Schedules of Controlled Substances: Placement of Brivaracetam into Schedule V [Docket No.: DEA-435] received May 10, 2016, pursuant to 5 U.S.C. 801(a)(1)(A); Public Law 104-121, Sec. 251; (110 Stat. 868); to the Committee on Energy and Commerce.

5326. A letter from the Secretary, Department of the Treasury, transmitting a six-month periodic report on the national emergency with respect to Sudan that was declared in Executive Order 13067 of November 3, 1997, pursuant to 50 U.S.C. 1641(c); Public Law 94-412, Sec. 401(c); (90 Stat. 1257) and 50 U.S.C. 1703(c); Public Law 95-223, Sec 204(c); (91 Stat. 1627); to the Committee on Foreign Affairs.

5327. A letter from the Assistant Secretary, Legislative Affairs, Department of State, transmitting a report to Congress on the status of the Government of Cuba's compliance with the United States-Cuba September 1994 "Joint Communique" and the treatment by the Government of Cuba of persons returned

to Cuba in accordance with the United States-Cuba May 1995 "Joint Statement", together known as the Migration Accords, pursuant to Public Law 105-277, Sec. 2245; (112 Stat. 2681-824); to the Committee on Foreign Affairs.

5328. A letter from the Assistant Attorney General, Office of Legislative Affairs, Department of Justice, transmitting the FY 2015 No FEAR Act report, pursuant to Public Law 107-174, 203(a); (116 Stat. 569); to the Committee on Oversight and Government Reform.

5329. A letter from the Regulations Coordinator, Centers for Medicare and Medicaid Services, Department of Health and Human Services, transmitting the Department's interim final rule — Patient Protection and Affordable Care Act; Amendments to Special Enrollment Periods and the Consumer Operated and Oriented Plan Program [CMS-9933-IFC] (RIN: 0938-AS87) received May 10, 2016, pursuant to 5 U.S.C. 801(a)(1)(A); Public Law 104-121, Sec. 251; (110 Stat. 868); jointly to the Committees on Energy and Commerce and Ways and Means.

REPORTS OF COMMITTEES ON PUBLIC BILLS AND RESOLUTIONS

Under clause 2 of rule XIII, reports of committees were delivered to the Clerk for printing and reference to the proper calendar, as follows:

Mr. BISHOP of Utah: Committee on Natural Resources. H.R. 1621. A bill to modify the boundary of Petersburg National Battlefield in the Commonwealth of Virginia, and for other purposes; with an amendment (Rept. 114-562, Pt. 1). Referred to the Committee of the Whole House on the state of the Union.

Mr. BISHOP of Utah: Committee on Natural Resources. H.R. 3211. A bill to provide for the addition of certain real property to the reservation of the Siletz Tribe in the State of Oregon (Rept. 114-563). Referred to the Committee of the Whole House on the State of the Union.

DISCHARGE OF COMMITTEE

Pursuant to clause 2 of rule XIII, the Committee on Armed Services discharged from further consideration H.R. 1621 referred to the Committee of the Whole House on the state of the Union.

PUBLIC BILLS AND RESOLUTIONS

Under clause 2 of rule XII, public bills and resolutions of the following titles were introduced and severally referred, as follows:

By Mrs. LOVE:

H.R. 5188. A bill to amend title XVIII of the Social Security Act to promote physician training in newly recognized primary medical specialties, and for other purposes; to the Committee on Ways and Means, and in addition to the Committee on Energy and Commerce, for a period to be subsequently determined by the Speaker, in each case for consideration of such provisions as fall within the jurisdiction of the committee concerned.

By Ms. KUSTER:

H.R. 5189. A bill to address the opioid abuse crisis; to the Committee on Energy and Commerce, and in addition to the Committees on the Judiciary, Veterans' Affairs, Education and the Workforce, Ways and Means, Armed Services, and Natural Resources, for a period to be subsequently determined by the Speaker, in each case for consideration of such provisions as fall within the jurisdiction of the committee concerned.

By Mr. COSTELLO of Pennsylvania:

H.R. 5190. A bill to amend title 38, United States Code, to provide greater flexibility to States in carrying out the Disabled Veterans' Outreach Program and employing local veterans' employment representatives, and for other purposes; to the Committee on Veterans' Affairs.

By Mr. DOLD:

H.R. 5191. A bill to amend the Internal Revenue Code of 1986 to provide incentives for employers to establish student loan repayment programs and to make contributions to qualified tuition programs on behalf of children of employees; to the Committee on Ways and Means.

By Mr. BISHOP of Utah:

H.R. 5192. A bill to amend title 49, United States Code, to provide for overflights of national recreation areas where the primary recreational activities involve motorized watercraft, and for other purposes; to the Committee on Transportation and Infrastructure.

By Ms. JENKINS of Kansas:

H.R. 5193. A bill to amend the Internal Revenue Code of 1986 to make improvements in the rules related to qualified tuition program and qualified ABLE programs; to the Committee on Ways and Means.

By Mr. BLUMENAUER:

H.R. 5194. A bill to amend the Internal Revenue Code of 1986 to allow a credit against tax for costs incurred by certain businesses for drug disposal programs; to the Committee on Ways and Means.

By Ms. DELAURO (for herself, Mr. VAN HOLLEN, Ms. WASSERMAN SCHULTZ, Mr. FARR, Mr. DAVID SCOTT of Georgia, Ms. MOORE, Ms. JUDY CHU of California, Mr. TAKANO, Mr. ENGEL, Mr. GRIJALVA, Mr. RYAN of Ohio, Mrs. NAPOLITANO, Mr. PAYNE, Mr. HIGGINS, Ms. PINGREE, Ms. BORDALLO, Mr. SCHIFF, Mr. LANGEVIN, Ms. KAPTUR, Mr. NADLER, Mr. HASTINGS, Ms. TSONGAS, Mr. LARSON of Connecticut, Ms. LEE, Mr. SHERMAN, Mr. POCAN, Ms. MICHELLE LUJAN GRISHAM of New Mexico, Ms. SLAUGHTER, Mr. RANGEL, Mr. SWALWELL of California, Ms. CASTOR of Florida, Mr. YOUNG of Alaska, Ms. SCHAKOWSKY, Mr. HINOJOSA, Mr. PRICE of North Carolina, Ms. JACKSON LEE, Mr. CONNOLLY, Mr. YARMUTH, and Mr. LEVIN):

H.R. 5195. A bill to require that health plans provide coverage for a minimum hospital stay for mastectomies, lumpectomies, and lymph node dissection for the treatment of breast cancer and coverage for secondary consultations; to the Committee on Energy and Commerce, and in addition to the Committees on Ways and Means, and Education and the Workforce, for a period to be subsequently determined by the Speaker, in each case for consideration of such provisions as fall within the jurisdiction of the committee concerned.

By Mr. ISRAEL (for himself and Mr. PETERS):

H.R. 5196. A bill to amend the Internal Revenue Code of 1986 to provide an income tax credit for eldercare expenses; to the Committee on Education and the Workforce, and in addition to the Committee on Ways and Means, for a period to be subsequently determined by the Speaker, in each case for consideration of such provisions as fall within the jurisdiction of the committee concerned.

By Mr. KENNEDY (for himself, Mr. GIBSON, Mr. ASHFORD, Mr. GARAMENDI, and Mr. PETERS):

H.R. 5197. A bill to provide assistance to foreign countries to interdict or seize shipments of items in contravention of United Nations Security Council Resolution 1701 or 2231, and for other purposes; to the Com-

mittee on Armed Services, and in addition to the Committee on Foreign Affairs, for a period to be subsequently determined by the Speaker, in each case for consideration of such provisions as fall within the jurisdiction of the committee concerned.

By Mrs. CAROLYN B. MALONEY of New York (for herself, Mr. BLUMENAUER, Ms. JUDY CHU of California, Mr. ISRAEL, Mrs. LOWEY, Mr. MCGOVERN, Ms. NORTON, Mr. RYAN of Ohio, Ms. SCHAKOWSKY, Mr. SERRANO, Ms. SLAUGHTER, Ms. TSONGAS, Mr. SHERMAN, Mr. CAPUANO, Ms. MOORE, Mr. ELLISON, and Mr. FOSTER):

H.R. 5198. A bill to amend the Truth in Lending Act to establish fair and transparent practices related to the marketing and provision of overdraft coverage programs at depository institutions, and for other purposes; to the Committee on Financial Services.

By Mr. MEADOWS:

H.R. 5199. A bill to amend title 41, United States Code, to improve the manner in which Federal contracts for construction and design services are awarded, and to prohibit the use of reverse auctions for design and construction services procurements; to the Committee on Oversight and Government Reform.

By Mr. POMPEO (for himself and Mr. LIPINSKI):

H.R. 5200. A bill to direct the Secretary of Defense to submit to Congress a report on cooperation between Iran and the Russian Federation; to the Committee on Armed Services, and in addition to the Committee on Foreign Affairs, for a period to be subsequently determined by the Speaker, in each case for consideration of such provisions as fall within the jurisdiction of the committee concerned.

By Mr. SWALWELL of California (for himself, Ms. LOFGREN, Mr. BEN RAY LUJAN of New Mexico, Ms. ESHOO, Ms. MICHELLE LUJAN GRISHAM of New Mexico, Ms. LEE, Mr. HONDA, Mr. PERLMUTTER, Mrs. WATSON COLEMAN, Mr. DESAULNIER, Mr. CÁRDENAS, Ms. JUDY CHU of California, Mr. FATTAH, and Mr. LANGEVIN):

H.R. 5201. A bill to amend the Higher Education Act of 1965 to expand eligibility for public service student loan forgiveness to certain contractor employees of national laboratories; to the Committee on Education and the Workforce.

By Ms. MAXINE WATERS of California (for herself, Ms. BASS, Mr. BECERRA, Ms. BROWNLEY of California, Mr. CÁRDENAS, Ms. JUDY CHU of California, Ms. HAHN, Mr. TED LIEU of California, Mr. LOWENTHAL, Mrs. NAPOLITANO, Ms. ROYBAL-ALLARD, Ms. LINDA T. SÁNCHEZ of California, Mr. SCHIFF, Mr. SHERMAN, and Mr. TORRES):

H.R. 5202. A bill to require the Department of Housing and Urban Development to fill all asset management positions located at non-core office locations of the Office of Multifamily Housing, and for other purposes; to the Committee on Financial Services.

By Mr. GRIFFITH:

H. Res. 723. A resolution expressing the support of the House of Representatives for the designation of a National Day of Recognition for the centennial of the Convention Between the United States and Great Britain (for Canada) for the Protection of Migratory Birds, and for other purposes; to the Committee on Natural Resources.

By Ms. EDDIE BERNICE JOHNSON of Texas (for herself, Ms. BROWN of Florida, Mr. PETERS, Mr. THOMPSON of Mississippi, Ms. CLARKE of New York, Mr. PAYNE, Mrs. CAPPS, Ms.

EDWARDS, Ms. MOORE, Mr. ELLISON, Mr. RUSH, Mr. JOYCE, Ms. SCHAKOWSKY, Mrs. ELLMERS of North Carolina, Mr. GRIJALVA, Mr. LARSEN of Washington, Mr. MICHAEL F. DOYLE of Pennsylvania, Mr. LEWIS, Ms. BORDALLO, Ms. BONAMICI, Ms. NORTON, Mr. LYNCH, Mr. BLUMENAUER, Mr. SABLAN, Mr. RUIZ, Mrs. DINGELL, Mr. RODNEY DAVIS of Illinois, Mr. POCAN, Mr. CARSON of Indiana, Mr. MCKINLEY, and Mrs. BLACK):

H. Res. 724. A resolution supporting the goals and ideals of National Nurses Week on May 6, 2016, through May 12, 2016; to the Committee on Energy and Commerce.

CONSTITUTIONAL AUTHORITY STATEMENT

Pursuant to clause 7 of rule XII of the Rules of the House of Representatives, the following statements are submitted regarding the specific powers granted to Congress in the Constitution to enact the accompanying bill or joint resolution.

By Mrs. LOVE:

H.R. 5188.

Congress has the power to enact this legislation pursuant to the following:

The Constitutional authority in which this bill rests is in the power of the Congress To regulate Commerce as enumerated by Article 1, section 8 of the United States Constitution as applied to providing for the general Welfare of the United States through the Center for Medicare and Medicaid Services.

By Ms. KUSTER:

H.R. 5189.

Congress has the power to enact this legislation pursuant to the following:

Article I, Section 8

By Mr. COSTELLO of Pennsylvania:

H.R. 5190.

Congress has the power to enact this legislation pursuant to the following:

Article 1, Section 8 of the United States Constitution.

By Mr. DOLD:

H.R. 5191.

Congress has the power to enact this legislation pursuant to the following:

Article I, Section 8, Clause 1

By Mr. BISHOP of Utah:

H.R. 5192.

Congress has the power to enact this legislation pursuant to the following:

Article IV, Section 3, Clause 2 and Article I, Section 8

By Ms. JENKINS of Kansas:

H.R. 5193.

Congress has the power to enact this legislation pursuant to the following:

Article 1, Section 8

By Mr. BLUMENAUER:

H.R. 5194.

Congress has the power to enact this legislation pursuant to the following:

The Constitution of the United States provides clear authority for Congress to pass tax legislation. Article I of the Constitution, in detailing Congressional authority, provides that "Congress shall have Power to lay and collect Taxes, Duties, Imposts and Excises . . ." (Section 8, Clause 1). This legislation is introduced pursuant to that grant of authority.

By Ms. DELAURO:

H.R. 5195.

Congress has the power to enact this legislation pursuant to the following:

Article I, Section 8, Clause 3 of the United States Constitution and Article I, Section 8, Clause 1 of the United States Constitution.

By Mr. ISRAEL:

H.R. 5196.

Congress has the power to enact this legislation pursuant to the following:

Article I, Section 8 of the United States Constitution.

By Mr. KENNEDY:

H.R. 5197.

Congress has the power to enact this legislation pursuant to the following:

Article I Section 8 of the United States Constitution

By Mrs. CAROLYN B. MALONEY of New York:

H.R. 5198.

Congress has the power to enact this legislation pursuant to the following:

Article I, Section 8, Clause 3, the Commerce Clause

By Mr. MEADOWS:

H.R. 5199.

Congress has the power to enact this legislation pursuant to the following:

The Congress enacts this bill pursuant to Clause 1 of Section 8 of Article I of the United States Constitution, which provides Congress with the ability to enact legislation nessecary and proper to effectuate its purpose in taxing and spending.

By Mr. POMPEO:

H.R. 5200.

Congress has the power to enact this legislation pursuant to the following:

Article 1, Section 8 of the Constitution of the United States

By Mr. SWALWELL of California:

H.R. 5201.

Congress has the power to enact this legislation pursuant to the following:

Article I, Sections 8 and 9

By Ms. MAXINE WATERS of California:

H.R. 5202.

Congress has the power to enact this legislation pursuant to the following:

Article I, Section 8, Clause 5 and Clause 18 of the United States Constitution

ADDITIONAL SPONSORS

Under clause 7 of rule XII, sponsors were added to public bills and resolutions, as follows:

H.R. 24: Mr. CHAFFETZ and Mr. MEEHAN.
 H.R. 167: Mr. DUFFY.
 H.R. 183: Mr. WESTERMAN.
 H.R. 187: Mr. YOUNG of Iowa.
 H.R. 239: Miss RICE of New York.
 H.R. 265: Mr. SCOTT of Virginia.
 H.R. 303: Mr. O'ROURKE.
 H.R. 329: Mr. KILMER.
 H.R. 335: Mr. QUIGLEY and Mr. RUPPERSBERGER.
 H.R. 379: Mr. HARPER and Mr. LARSEN of Washington.
 H.R. 428: Ms. STEFANIK.
 H.R. 448: Mr. WALZ.
 H.R. 540: Mr. SMITH of Nebraska.
 H.R. 563: Ms. DEGETTE.
 H.R. 611: Mr. WALKER, Mr. AUSTIN SCOTT of Georgia, Mr. WITTMAN, and Mr. WILSON of South Carolina.
 H.R. 649: Ms. CASTOR of Florida.
 H.R. 706: Mr. O'ROURKE.
 H.R. 716: Mr. VARGAS.
 H.R. 835: Mr. CUMMINGS, Ms. ROYBAL-ALLARD, Mr. ASHFORD, and Mr. KENNEDY.
 H.R. 836: Mr. PITTENGER.
 H.R. 840: Ms. VELÁZQUEZ.
 H.R. 863: Mr. HUELSKAMP.
 H.R. 923: Mr. YODER and Mr. LUETKEMEYER.
 H.R. 953: Ms. BROWNLEY of California.
 H.R. 973: Mrs. LOWEY.
 H.R. 986: Mr. UPTON.
 H.R. 1139: Mr. PASCRELL.
 H.R. 1141: Mr. PETERS.
 H.R. 1197: Mr. ROSKAM.
 H.R. 1221: Mr. ALLEN and Mr. WALZ.

H.R. 1247: Mr. CRAMER and Ms. CASTOR of Florida.

H.R. 1274: Mr. CONYERS.
 H.R. 1401: Mr. CARTWRIGHT.
 H.R. 1519: Mr. VARGAS.
 H.R. 1559: Mr. WENSTRUP and Mr. HARDY.
 H.R. 1602: Mr. CICILLINE.
 H.R. 1655: Mr. DESAULNIER.
 H.R. 1686: Mr. KILMER.
 H.R. 1736: Mr. POCAN.
 H.R. 1752: Mr. MASSIE.
 H.R. 1814: Mr. BRADY of Pennsylvania.
 H.R. 1877: Mr. GIBSON.
 H.R. 1911: Mrs. KIRKPATRICK.
 H.R. 1940: Mr. HECK of Washington and Mr. WELCH.
 H.R. 1943: Mr. CUMMINGS and Mr. CARSON of Indiana.
 H.R. 1981: Mr. THORNBERRY.
 H.R. 2056: Mr. SABLAN.
 H.R. 2076: Mr. GRIJALVA.
 H.R. 2144: Ms. DUCKWORTH.
 H.R. 2156: Mr. TAKANO, Mr. BRADY of Pennsylvania, Mr. AGUILAR, and Mr. BYRNE.
 H.R. 2173: Mr. LOEBSACK, Mr. DESAULNIER, Mr. KILMER, Ms. KAPTUR, Mr. CICILLINE, and Mr. SEAN PATRICK MALONEY of New York.
 H.R. 2227: Ms. STEFANIK.
 H.R. 2260: Mr. DESAULNIER.
 H.R. 2274: Mrs. DINGELL.
 H.R. 2285: Ms. JACKSON LEE, Mr. CICILLINE, and Mr. THOMPSON of Mississippi.
 H.R. 2350: Mr. BYRNE, Mr. DESAULNIER, Mr. POCAN, Mr. DUFFY, Mr. BRADY of Pennsylvania, Ms. SINEMA, Mr. HASTINGS, Mrs. WAGNER, and Mr. ASHFORD.
 H.R. 2434: Ms. WASSERMAN SCHULTZ, Mr. DESJARLAIS, and Ms. DUCKWORTH.
 H.R. 2450: Ms. KUSTER.
 H.R. 2500: Mr. COSTA and Mr. COLE.
 H.R. 2513: Mr. SENSENBRENNER.
 H.R. 2519: Mr. BRENDAN F. BOYLE of Pennsylvania and Mr. ASHFORD.
 H.R. 2622: Mrs. WALORSKI.
 H.R. 2627: Mr. AGUILAR.
 H.R. 2658: Mr. BOUSTANY.
 H.R. 2669: Mr. BEYER.
 H.R. 2694: Mr. CARSON of Indiana, Mr. DEFAZIO, Mr. KIND, and Mr. SERRANO.
 H.R. 2737: Mr. BERA, Mr. GRIJALVA, Mrs. LOWEY, Mr. CÁRDENAS, and Mr. MEEKS.
 H.R. 2739: Mrs. BROOKS of Indiana and Ms. WASSERMAN SCHULTZ.
 H.R. 2799: Mr. CURBELO of Florida and Mr. KILMER.
 H.R. 2805: Mrs. HARTZLER.
 H.R. 2844: Ms. ROYBAL-ALLARD, Mr. BISHOP of Georgia, and Ms. DELAURO.
 H.R. 2889: Mr. GRAYSON, Mr. BEYER, Mr. SARBANES, Mr. GARAMENDI, Mr. LOWENTHAL, Ms. DELAURO, Ms. SCHAKOWSKY, and Mr. POCAN.
 H.R. 2894: Mr. LOEBSACK.
 H.R. 2896: Mr. SIMPSON.
 H.R. 2948: Ms. JUDY CHU of California, Mr. PETERS, and Mr. EMMER of Minnesota.
 H.R. 2980: Mr. KATKO and Mr. CARTWRIGHT.
 H.R. 3011: Mr. POSEY.
 H.R. 3012: Mr. CICILLINE and Mr. ROHR-ABACHER.
 H.R. 3084: Mr. GIBSON, Mr. DENHAM, and Mr. WHITFIELD.
 H.R. 3088: Mr. GRAVES of Georgia.
 H.R. 3095: Mr. MEEHAN and Mr. CARTWRIGHT.
 H.R. 3096: Mrs. WATSON COLEMAN.
 H.R. 3105: Ms. DUCKWORTH.
 H.R. 3222: Mrs. WAGNER and Mr. MEADOWS.
 H.R. 3225: Mr. DESJARLAIS.
 H.R. 3229: Mr. MURPHY of Pennsylvania, Mr. DEFAZIO, Mr. MARINO, Mr. RUSH, Mr. THOMPSON of Mississippi, and Mr. YOUNG of Iowa.
 H.R. 3250: Mr. PAULSEN.
 H.R. 3266: Ms. LOFGREN and Ms. ESHOO.
 H.R. 3294: Mrs. CAROLYN B. MALONEY of New York.
 H.R. 3299: Mr. MESSER and Mr. RUPPERSBERGER.

H.R. 3323: Mr. RUSH, Ms. MENG, Mr. BLUMENAUER, Mr. COFFMAN, Mr. BOUSTANY, Mrs. KIRKPATRICK, Mr. LOBIONDO, and Mr. TIPTON.
 H.R. 3355: Mr. PASCRELL.
 H.R. 3471: Mr. HONDA.
 H.R. 3690: Mr. GRAYSON.
 H.R. 3706: Mr. COOK, Mr. GRAYSON, Mr. THOMPSON of Mississippi, Mr. RUSH, Mr. HASTINGS, Mr. HIMES, and Mr. ROUZER.
 H.R. 3742: Mr. RUPPERSBERGER and Ms. BROWNLEY of California.
 H.R. 3799: Mr. PALMER, Mr. OLSON, and Mr. GENE GREEN of Texas.
 H.R. 3817: Ms. STEFANIK.
 H.R. 3846: Mr. RICHMOND and Mr. COURTNEY.
 H.R. 3870: Ms. DELAURO.
 H.R. 3882: Ms. MOORE, Ms. NORTON, and Mr. ISRAEL.
 H.R. 3957: Mr. SCHWEIKERT.
 H.R. 4007: Mr. KING of Iowa.
 H.R. 4019: Ms. DELAURO and Mr. CONNOLLY.
 H.R. 4059: Mr. MULLIN, Mr. LUCAS, and Mr. OLSON.
 H.R. 4062: Mr. GRIFFITH.
 H.R. 4137: Mr. AL GREEN of Texas.
 H.R. 4146: Mr. PASCRELL and Mr. CAPUANO.
 H.R. 4147: Mr. PASCRELL and Mr. CAPUANO.
 H.R. 4247: Ms. STEFANIK, Mr. BILIRAKIS, and Mr. MCCAUL.
 H.R. 4266: Mr. HASTINGS.
 H.R. 4301: Mr. VALADAO, Mr. LANCE, Mr. LAMALFA, Mrs. BLACK, Mr. RATCLIFFE, and Mr. OLSON.
 H.R. 4333: Ms. FRANKEL of Florida and Mr. BRENDAN F. BOYLE of Pennsylvania.
 H.R. 4365: Mr. COSTELLO of Pennsylvania, Mr. ROUZER, and Mr. JOYCE.
 H.R. 4428: Mr. BILIRAKIS.
 H.R. 4442: Mr. GRIFFITH, Mr. MEEHAN, Mr. LOEBSACK, Mr. HUFFMAN, and Mr. BRADY of Pennsylvania.
 H.R. 4445: Mr. DEFAZIO.
 H.R. 4448: Mr. TOM PRICE of Georgia.
 H.R. 4514: Mr. COSTELLO of Pennsylvania and Ms. MCSALLY.
 H.R. 4575: Mr. HUIZENGA of Michigan and Mrs. BEATTY.
 H.R. 4592: Mr. POSEY, Mr. SIRE, Ms. WILSON of Florida, Mrs. BUSTOS, Mr. HASTINGS, Mrs. DINGELL, Mr. DELANEY, Mr. PERLMUTTER, Ms. BROWNLEY of California, Mr. RUSH, Mr. QUIGLEY, Mr. FOSTER, Mr. COOPER, Mr. ASHFORD, Mr. BRENDAN F. BOYLE of Pennsylvania, Mrs. CAPPS, Mr. CONNOLLY, Ms. KAPTUR, Mr. BEN RAY LUJÁN of New Mexico, Mr. NORCROSS, Mrs. KIRKPATRICK, Mr. SWALWELL of California, and Mr. BISHOP of Georgia.
 H.R. 4602: Mr. JEFFRIES.
 H.R. 4625: Mr. ZELDIN.
 H.R. 4626: Mr. RUIZ, Mr. ZINKE, Ms. SEWELL of Alabama, Mr. FLEISCHMANN, Mr. CAPUANO, Ms. GRAHAM, Mr. HECK of Washington, and Mr. CRENSHAW.
 H.R. 4636: Mr. LOUDERMILK and Mr. WESTERMAN.
 H.R. 4658: Mrs. LOVE.
 H.R. 4662: Mr. HARPER.
 H.R. 4684: Ms. GABBARD.
 H.R. 4696: Mr. LOWENTHAL.
 H.R. 4703: Mr. ROKITA.
 H.R. 4760: Mr. BRIDENSTINE and Ms. JENKINS of Kansas.
 H.R. 4768: Mr. WEBER of Texas, Mrs. MIMI WALTERS of California, Mr. POE of Texas, Mr. GIBBS, and Mr. RIBBLE.
 H.R. 4770: Mr. BOUSTANY.
 H.R. 4773: Mr. GUINTA, Mr. HARPER, Mr. PALMER, Mr. KINZINGER of Illinois, and Mr. GRAVES of Missouri.
 H.R. 4782: Mr. O'ROURKE.
 H.R. 4792: Mr. CONNOLLY.
 H.R. 4818: Mr. GRAVES of Georgia.
 H.R. 4819: Mr. ROSKAM and Mrs. BLACK.
 H.R. 4828: Mr. ROSKAM.
 H.R. 4830: Mr. RUSH and Mr. ROKITA.
 H.R. 4867: Mr. MEEHAN.

- H.R. 4905: Mr. DESAULNIER.
 H.R. 4907: Mrs. NOEM and Mr. TIPTON.
 H.R. 4913: Mrs. WAGNER.
 H.R. 4926: Mr. SESSIONS and Mr. JODY B. HICE of Georgia.
 H.R. 4928: Mr. STUTZMAN, Mr. WEBER of Texas, Mr. PITTINGER, and Mr. YOHO.
 H.R. 4933: Mr. DESAULNIER.
 H.R. 4942: Ms. LEE.
 H.R. 4956: Mr. BISHOP of Utah.
 H.R. 4959: Mr. ROE of Tennessee and Mr. TOM PRICE of Georgia.
 H.R. 4960: Mr. PERLMUTTER.
 H.R. 4963: Mr. DESAULNIER.
 H.R. 4965: Ms. JUDY CHU of California.
 H.R. 4966: Ms. JUDY CHU of California.
 H.R. 4994: Mr. PETERS.
 H.R. 4999: Mr. CONNOLLY and Mr. LAMBORN.
 H.R. 5001: Mr. SENSENBRENNER and Mr. SESSIONS.
 H.R. 5015: Mrs. HARTZLER and Ms. MCSALLY.
 H.R. 5025: Mr. GUTIÉRREZ, Mr. FATTAH, and Mr. CUELLAR.
 H.R. 5044: Mr. CUMMINGS, Mr. COURTNEY, Mr. SHERMAN, Mr. LEVIN, Ms. DEGETTE, Mr. POCAN, Mr. SWALWELL of California, Mr. WELCH, Mr. RYAN of Ohio, and Mr. CUELLAR.
 H.R. 5064: Mr. KATKO.
 H.R. 5073: Mr. RIBBLE.
 H.R. 5082: Mr. CHABOT.
 H.R. 5090: Mr. CARSON of Indiana, Mr. JOHNSON of Georgia, Mr. DOGGETT, Mr. PERLMUTTER, Ms. FRANKEL of Florida, Mr. BLUMENAUER, Ms. KUSTER, Mr. MOULTON, Mr. LANGEVIN, Mr. PETERS, Ms. SCHAKOWSKY, Ms. JUDY CHU of California, Mr. MCGOVERN, Mr. RUIZ, Mr. STIVERS, Mr. BRIDENSTINE, and Mr. SERRANO.
 H.R. 5100: Mr. ASHFORD.
 H.R. 5111: Mr. CÁRDENAS.
 H.R. 5112: Mr. BARR and Mr. MULVANEY.
 H.R. 5119: Mr. HILL.
 H.R. 5124: Mr. CICILLINE and Ms. JACKSON LEE.
 H.R. 5130: Ms. JUDY CHU of California, Ms. LEE, Ms. ADAMS, Ms. MENG, and Mrs. WATSON COLEMAN.
 H.R. 5146: Mr. RICHMOND and Ms. BROWNLEY of California.
 H.R. 5164: Mr. HUELSKAMP.
 H.R. 5172: Mr. REED.
 H.R. 5183: Mr. RYAN of Ohio, Mr. RUPPERSBERGER, Miss RICE of New York, and Mr. KILMER.
 H.R. 5187: Mr. NEAL.
 H. Con. Res. 40: Mr. COSTA, Mr. DESAULNIER, Ms. MATSUI, Mr. BRADY of Pennsylvania, Ms. SPEIER, Mr. FARENTHOLD, Mr. MCCAUL, and Mr. HULTGREN.
 H. Con. Res. 100: Mr. PEARCE.
 H. Con. Res. 122: Mr. GRIJALVA and Mrs. KIRKPATRICK.
 H. Con. Res. 128: Mr. ADERHOLT and Mr. KINZINGER of Illinois.
 H. Res. 14: Mr. SHERMAN, Ms. LEE, and Ms. SPEIER.
 H. Res. 28: Mr. YOUNG of Iowa and Ms. MCCOLLUM.
 H. Res. 521: Mr. CICILLINE.
 H. Res. 565: Mrs. WALORSKI.
 H. Res. 571: Mr. HARRIS.
 H. Res. 683: Mr. LEWIS, Mr. MCGOVERN, Mr. POCAN, and Mr. GRIJALVA.
 H. Res. 712: Mr. LUETKEMEYER.
 H. Res. 722: Mr. MCGOVERN.



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Senate

The Senate met at 9:30 a.m. and was called to order by the President pro tempore (Mr. HATCH).

PRAYER

The Chaplain, Dr. Barry C. Black, offered the following prayer:

Let us pray.

O God, our refuge and strength, give us reverence for Your greatness. Guide our Senators around the pitfalls of their work, enabling them to have hearts sustained by Your peace. May they surrender their will to You as they trust You to direct their path. Lord, give them the wisdom to receive Your reproof with the understanding that You chastise those whom You love for their good. Undergird them with Your enabling might as You make their lives productive for the glory of Your Name.

Amen.

PLEDGE OF ALLEGIANCE

The President pro tempore led the Pledge of Allegiance, as follows:

I pledge allegiance to the Flag of the United States of America, and to the Republic for which it stands, one nation under God, indivisible, with liberty and justice for all.

RECOGNITION OF THE MAJORITY LEADER

The PRESIDING OFFICER (Mr. PAUL). The majority leader is recognized.

SEVERE WEATHER IN WESTERN KENTUCKY

Mr. McCONNELL. Mr. President, I wish to say a few words about the severe weather that hit my home State of Kentucky yesterday. A large tornado touched down in Mayfield in Graves County in Western Kentucky. It damaged homes and businesses and reportedly injured 10 people as it made its way through that part of my State.

Tornadoes were also reported in Muhlenberg and Union Counties. Thankfully, no deaths have been reported in Kentucky as of the latest news reports. Kentuckians are, as always, reaching out to help their neighbors in times of distress, with reports that local churches and businesses have opened their doors to those displaced by the tornadoes as they recover.

We are thinking today of all the Kentuckians who have been hurt by this severe weather. We continue to monitor the situation, and we are thankful that the damage that has been reported so far was not worse.

ENERGY AND WATER DEVELOPMENT APPROPRIATIONS BILL

Mr. McCONNELL. Mr. President, after much hard work, research, and deliberation from both sides of the aisle, we are closer to having an opportunity to pass the first funding bill of the appropriations season, the energy security and water infrastructure funding bill.

I know Members have some differences of opinion about an amendment authored by Senator COTTON, but this is how the legislative process is supposed to work. Senator COTTON's amendment, which would prevent future funds to purchase heavy water from Iran, is germane to this funding bill, and it deserves a vote.

We are going to have that vote today, allowing Senators from both sides to have their say on this issue and allowing us to move forward on this important measure.

The energy security and water infrastructure funding bill will positively impact every State in America. We know it includes important measures to support energy research and innovation to promote public safety, to maintain waterway infrastructure, and to promote nuclear security.

Let's work to advance this bill and keep the appropriations process moving forward in a responsible manner.

AMERICAN MANUFACTURING COMPETITIVENESS AND DEFEND TRADE SECRETS BILLS

Mr. McCONNELL. Mr. President, yesterday the Senate passed the American Manufacturing Competitiveness Act, a bipartisan bill that—as my friend, the chairman of the Finance Committee, observed—shows our “commitment to helping our economy with more jobs, bigger paychecks, and a stronger American manufacturing base.”

Later today the President will sign into law the Defend Trade Secrets Act, another Senate-passed bill that promotes our economy and helps create and retain American jobs. Both of these bills are the result of the work of two dedicated committee chairmen, Senator HATCH and Senator GRASSLEY. They are also the result of a Senate that is back to work for the American people.

I thank the Finance Committee and Judiciary Committee chairmen for their efforts to advance these bills, just as I thank Senators BURR, PORTMAN, TOOMEY, and FLAKE for their diligent work to help support American businesses and the economy through their efforts to pass the American Manufacturing Competitiveness Act.

THE ECONOMY

Mr. McCONNELL. Mr. President, President Obama recently bragged to the New York Times Magazine about his performance on the economy. He boasted about his economic legacy and actually claimed that, by his estimation, the administration managed the economic recovery better than any peer economy facing a financial crisis—now listen to this—“on Earth in modern history.” Well, that is a quote to remember.

The same day this story hit, the Bureau of Economic Analysis released its first quarter report showing only 0.5 percent economic growth. It is the latest reminder of the actual economy

• This “bullet” symbol identifies statements or insertions which are not spoken by a Member of the Senate on the floor.



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that Americans are forced to confront day in and day out.

President Obama has presided over the worst economic recovery since World War II. Growth is anemic, wages are stagnant for too many, poverty is up for too many, jobs are scarce for too many, and Americans are losing faith in the future.

Somehow President Obama doesn't seem to think any of this is his problem or a problem at all. The issue isn't his policies or his refusal to work across the aisle on solutions. No, to him it is just a messaging problem. It is just that he was too busy to "take victory laps" or explain things properly.

He believes "the U.S. economy is in much better shape than the public appreciates." As the magazine story I mentioned previously observes, in fact, he claims that "by almost every economic measure, we are significantly better off."

Well, many in the middle class feel quite differently. Just don't take my word for it. Here is what Bill Clinton thinks of the Obama administration economy. He said: "Millions and millions and millions and millions of people look at that pretty picture of America he painted and they cannot find themselves in it to save their lives."

That is Bill Clinton on the Obama economy. Hard-working middle class families simply cannot find themselves in the picture this President has painted of the American economy.

Median household incomes have shrunk under this President. Too many Americans have given up even looking for work altogether, after years of failed attempts.

One survey found that more than half of Americans say that "the next generation will be worse off than them financially."

The middle class has now shrunk to such an extent under President Obama that it no longer contains the majority of Americans. That is something none of us should take comfort in.

I will read a quote from the President. I am not sure he intended it, but President Obama said something a few months ago that seemed to sum up his economic legacy. He said: "There was a time I think when upward mobility was the hallmark of America."

He is right. There was a time. There can be a time again.

We don't have to accept the Obama economy as the new normal in our country. Democrats may want middle-class families to keep their gaze down and their expectations tempered, but we have a right to expect more in this country. We have a right to believe in our future. It is clear we need a change to get America moving again.

The Republican-led Senate will continue to look for and pass real solutions that aim to get our economy back on track—solutions to help foster economic growth, solutions to help create jobs and strengthen our workforce,

and solutions to help America prosper once more.

If President Obama wants to actually build an economic legacy for himself and not just try to spin Americans on one, then I invite him to finally join us.

My Republican colleagues will have more to say on the economy this afternoon.

I thank my colleague Senator SULLIVAN, who has been outspoken on this important matter.

I also thank Senator COATS for his work to strengthen our economic policies as chairman of the Joint Economic Committee, as well as a member of the Finance Committee.

These Senators know the costly toll the Obama economy has had on people in their home States, and they are working to address it.

RECOGNITION OF THE MINORITY LEADER

The PRESIDING OFFICER. The Democratic leader is recognized.

COMMENDING BRAD HATCHER

Mr. REID. Mr. President, Brad Hatcher, who is serving as my legislative fellow for defense issues this year, has done a terrific job. We are so fortunate to have the military we do have, and he exemplifies that.

THE ECONOMY

Mr. REID. Mr. President, it is interesting to hear my friend fictionalize what is going on in the world economy and in our American economy especially.

We all know that when President Obama took office—the month after he was elected in November, 8 years ago—the economy lost 800,000 jobs. It was not 1 month. That continued. When President Bush took over the economy, we had a surplus of \$10 trillion over 10 years—a surplus.

My friend the Presiding Officer and, frankly, his good father have talked about money that was spent by this country that shouldn't have been.

However, when Bush took office, we had a surplus. We had a balanced budget under Bill Clinton—a balanced budget. We didn't need to legislate it. It happened. Of course, with his leadership and the Deficit Reduction Act that we passed, it worked out very well.

But that was all wiped out by the spending of the Bush administration. It was 8 years of 2 wars unpaid for and trillions of dollars—not hundreds of billions but trillions of dollars—paid for with a credit card. Tax cuts were paid for with a credit card.

What did that bring to us? The collapse of Wall Street.

President Obama went to work. It was difficult, but we passed the American Recovery Act, or the stimulus, as

it was known. But for that, who knows how difficult our situation would be.

In Nevada, we had the experience of what happened when Wall Street collapsed. We weren't the only State. It happened all over this Nation. For my friend to talk about how great the economy was during the Bush years is simply fictional.

Are things perfect now? Of course not. We have had no help in the Senate. We had very little help in the House. For 7½ years, all Republicans have done is try to oppose—they didn't try; they opposed—everything President Obama has attempted to do. We have been able to overcome some of that.

Since Obama took office, the U.S. economy saw the longest stretch of private sector growth in its history, and it is still ongoing.

There were some complaints last month that only 160,000 jobs were created. That was 160,000 compared to 800,000 being lost during the Bush administration. We need to do more. There is no question about that, but we need some help.

Republicans are doing everything they can—and they have proven that in the last 7½ years—to make it tough for President Obama.

We have a lot of people who aren't being paid enough. How about those people working on minimum wage and trying to survive? Yet Republicans refuse to help us raise that.

How about paycheck fairness so that my daughter and my granddaughters are paid the same amount of money for the same work they do that a man does?

Student debt is unbearable. I am seeing it now with my grandchildren. It is incredible. You are going to have to go borrow money.

It is Republicans who stood in the way of recovery in so many different ways. So let's talk about the real world—not a fictional world.

FILLING THE SUPREME COURT VACANCY

Mr. REID. Mr. President, last week, the senior Senator from Iowa confirmed what Democrats have said all along: Senate Republicans want Donald Trump to fill the Supreme Court vacancy.

I am sorry to direct my attention to the Presiding Officer, but I can't imagine how the Presiding Officer must feel with Donald Trump being the leader of the Republican Party. I can't imagine. I can't imagine what your good father thinks of Donald Trump leading the Republican Party, but I can imagine, and I have a number of times.

In an interview with the Des Moines Register, Iowa's largest newspaper, Senator GRASSLEY said of Trump: "Based upon the type of people [Donald Trump would] be looking for, I think I would expect the right type of people to be nominated by him to the Supreme Court."

That is fairly shocking, coming from a Senator who should know better. The

chairman of the Senate Judiciary Committee trusts Donald Trump to pick “the right type of people” for the Supreme Court. I can’t think of a worse idea than placing the power to pick the next Supreme Court Justice in the hands of an unhinged individual who derides women, who calls them dogs and pigs. Look at the front page of the New York Times, at how he and Howard Stern decided how they were going to treat women. Read it. It is demeaning to my wife, my daughter, and my 9 or 10 granddaughters. I have them mixed up. There are 19. It is an uneven number, but they are close. I can’t think of a worse idea than placing the power to pick the next Supreme Court Justice in the hands of this unhinged individual. He calls Latinos rapists and murderers.

This is the Supreme Court of the United States we are talking about—the Court that decided *Marbury v. Madison* and *Brown v. Board of Education*, the anniversary of which is coming up next Tuesday. This is not Donald Trump’s reality show. This is the real world. This is no game. This is not a choice about whether Meatloaf or Gary Busey made a better art project; it is a choice about the future of America. The balance of the Supreme Court has real-life consequences for all of us.

Rational people don’t want Donald Trump filling a Supreme Court vacancy. Iowans don’t. The American people don’t. But Senate Republicans obviously do, and Senator GRASSLEY does—or I should say he does now. Two weeks ago, before Donald Trump wrapped up the Republican nomination to my dismay, the senior Senator from Iowa sang a much different tune. Back then—all of 13 days ago—before Donald Trump was his standard bearer, Senator GRASSLEY said it would be a risk to let Trump pick a Supreme Court nominee. That was less than 2 weeks ago. This is what he said: “If Trump’s elected president, it probably is a little more unknown. . . . I would have to admit it’s a gamble.” It is a gamble, and it is not at a Las Vegas crap table or a slot machine. That it is a gamble is an understatement.

Trump picking a Supreme Court nominee is a guaranteed recipe for disaster. But now that Trump is the nominee, Republicans are marching in lockstep with him on the Supreme Court vacancy. Republicans want to put the Supreme Court in the hands of an unbalanced egomaniac.

Senator GRASSLEY and his colleagues say they want the future of the highest Court to be determined by an anti-woman, anti-Latino, and anti-middle-class billionaire who demeans women every day. Yesterday GRASSLEY told a reporter that “there’s no problem with Trump appointing people to the Supreme Court.” But what had he said 2 weeks earlier? That it is a gamble.

Donald Trump wants to ban all Muslims from even coming into our country. That is whom Republicans want picking the Justices to do the work of

our judiciary system, deciding questions about civil liberties—somebody who says Muslims shouldn’t even come to this country. Trump encouraged supporters to physically assault protesters. Here is what he said: “Knock the crap out of them.” That is whom the Republicans want to select Justices to interpret the law. It is insane that my Republican colleagues are willing to entrust such an important responsibility to this egomaniac.

Instead of relying on the whims of an unscrupulous real estate tycoon—who inherited his money, by the way—Senate Republicans should trust in the Senate’s time-honored process of considering Supreme Court nominees. Republicans can start by reviewing Judge Garland’s nominee questionnaire, which the Senate got yesterday. After that, the Senate Judiciary Committee and Chairman GRASSLEY should do their job and hold a hearing. Then the Republican leader should bring Merrick Garland’s nomination to the floor for a vote. A hearing and a vote—that is what we need to have, and that is how we will get, in Senator GRASSLEY’s words, the right type of people on the Supreme Court. Meet with the man, hold hearings, and vote.

This year the Republican Senate is on pace to work fewer days than any Senate in the past six decades—60-plus years. So in that we are not doing much anyway, couldn’t we just work in a little time to have a Supreme Court nominee?

Senator GRASSLEY was right the first time. Letting Donald Trump pick a Supreme Court Justice is indeed a gamble. It is a risk the American people can’t afford and shouldn’t afford. Instead of waiting for Donald Trump, Republicans should just do their job and at least allow the Court to have a full complement of nine Justices.

Mr. President, I see no one here on the floor, so I ask the Chair to announce the business of the day.

RESERVATION OF LEADER TIME

The PRESIDING OFFICER. Under the previous order, the leadership time is reserved.

ENERGY AND WATER DEVELOPMENT AND RELATED AGENCIES APPROPRIATIONS ACT, 2016

The PRESIDING OFFICER. Under the previous order, the Senate will resume consideration of H.R. 2028, which the clerk will report.

The legislative clerk read as follows: A bill (H.R. 2028) making appropriations for energy and water development and related agencies for the fiscal year ending September 30, 2016, and for other purposes.

Pending:

Alexander/Feinstein amendment No. 3801, in the nature of a substitute.

McConnell (for Cotton) amendment No. 3878 (to amendment No. 3801), of a perfecting nature.

Mr. REID. Mr. President, I suggest the absence of a quorum, but I ask that

the time be charged equally to both sides.

The PRESIDING OFFICER. The clerk will call the roll.

The legislative clerk proceeded to call the roll.

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

The PRESIDING OFFICER (Mr. BOOZMAN). Without objection, it is so ordered.

Mr. ALEXANDER. Mr. President, in about 5 or 6 minutes, the Senate will proceed to the scheduled vote on the Cotton amendment on the Energy and Water appropriations bill. Actually, it will be cloture on the Cotton amendment. Before that vote, I ask unanimous consent that I first be allowed to speak for a few minutes, and following me, Senator FEINSTEIN, and then we vote.

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

Mr. ALEXANDER. Mr. President, I will save most of my remarks for after the vote, but I wish to make two kinds of remarks. One is to give an update on the bill, where we are. The second remark is to restate my reasons why I will not vote for cloture on the Cotton amendment. First, in terms of where we are, we have the Cotton amendment at 10:30. The Senator from California and I have agreed—and I think our staffs and the Republican and Democratic leaders have discussed it—that there could be a vote for Senator CARDIN and Senator FISCHER at 60 votes, a voice vote on Senator FLAKE. That is it. Then we would have another cloture vote if we need it and a vote on final passage.

In my view, and I believe in terms of Senator FEINSTEIN’s view, we ought to easily be able to finish the bill today. I think we should finish it today. I thank the Republican leader, Senator MCCONNELL, for starting the appropriations process earlier this year than it ever has been started before. I thank the Democratic leader, Senator REID, for working with us through some difficult issues we had on this first bill that we didn’t expect and to make it possible for us to come to what looks like a prompt conclusion.

This is an important bill. The Senators know that. We have had nearly 80 Senators contribute parts of this bill. Some are very important to their States and this country. Whether it deepens the Mobile port or the west coast ports or rebuilds locks in Kentucky, Ohio, and Tennessee or whether it properly funds the national laboratories across the country or moves ahead with our nuclear weapons program, this is one of the most important appropriations bills that we have.

Today we will have spent 2 weeks on it, not counting the week we had for recess. We will have processed 21 amendments, if I go through the amendments I just described. If we succeed today in finishing the bill, it will

be the first time since 2009 that the Energy and Water appropriations bill has gone across the floor in regular order.

Senator FEINSTEIN and I have worked pretty hard together, and as she likes to say, both of us have engaged in some give and some take in order to create a result that the Senate can be proud of and set a good example for the next 11 appropriations bills. We have a lot waiting to be done. The majority leader has already announced he would like to move ahead with the transportation and military construction bill. On both sides of the aisle, there is concern about moving ahead with Zika, which could be done during that bill. The Defense authorization bill needs to be dealt with before we get to the next recess. We have nine more appropriations bills to deal with, and there is a very important biomedical research bill called the 21st Century Cures Act. I hope we get to that bill sometime before July.

AMENDMENT NO. 3878

Mr. President, I have one other thing to say. Senator FEINSTEIN and I have worked hard to give all the Senators who had germane, relevant amendments a vote on their amendments, and we succeeded very well with that. We processed 21 amendments, and that includes the amendment by Senator COTTON, which prohibits the United States from using tax dollars to buy heavy water from Iran in the year 2017. I defended his right to have a vote on that amendment, which we are about to have, but I will vote no on that amendment because I don't believe it belongs on the bill. No. 1, I think it should be considered first by the Foreign Relations and the Armed Services and Intelligence Committees because it is filled with national security implications. No. 2, if it were adopted, I think there would be dangerous complications because it could increase the possibility that heavy water from Iran, which in the United States would be used for peaceful purposes, could be sold by Iran to another country, such as North Korea, and used to help make nuclear weapons. I don't want to have the Senate approve an amendment that would create that kind of possibility. No. 3, the President said he will veto it, which would result in not only having the Cotton amendment rejected, but the bill would fail as well.

The discussion of where Iran's heavy water goes is an important discussion, and the Senator has a right to bring it up. Iran has it, and we don't want them to have it because they could use it to make nuclear weapons. We don't produce it, but we need it for medical and scientific research, so it makes sense for us to buy it. In the great scheme of things, it is not a great amount of money. But the idea of letting it go on the international market and perhaps find its way to countries building nuclear weapons is something I can't support, so I will vote no.

I thank the Senator from California for working through all of these issues

with us, and I am glad that following Senator FEINSTEIN's remarks, we will vote on the Cotton amendment. I hope that with the cooperation of the majority leader and Democratic leader, we will be able to finish the bill today.

The PRESIDING OFFICER. The Senator from California.

Mrs. FEINSTEIN. Mr. President, I thank the distinguished chairman of the Energy and Water Subcommittee for his leadership and willingness to settle issues to get this bill to the point where it really is ready to be voted on by this body. I think he has made the argument against the Cotton amendment eloquently and correctly. I am very grateful for the fact that he did what I think is a noble thing and changed his vote and will be voting against the Cotton amendment.

Let me say something about this process. Both the chairman and I have been here for a long time, and we were here when appropriations bills were passed. The key to doing that is keeping poison pills off appropriations bills so they can be passed quickly. In addition to the arguments made by the chairman, the White House had very strong feelings and indicated they would veto this bill if it passed with this amendment. How do we start an appropriations process with a Presidential veto in the wings? I don't think we do. Hopefully, the appropriate thing will happen in this vote, and cloture will be defeated. I hope that it sends a signal—a strong signal—for the rest of the appropriations process. We want to show that we can run this place and get business done and poisons pills have no place on appropriations bills. That is my very deep belief, and that is where it once was.

Once again, I thank the chair for his help, cooperation, and leadership. It is quite wonderful to be able to work with the Senator from Tennessee, Senator ALEXANDER, and I too urge a "no" vote on cloture.

CLOTURE MOTION

The PRESIDING OFFICER. Pursuant to rule XXII, the Chair lays before the Senate the pending cloture motion, which the clerk will state.

The senior assistant legislative clerk read as follows:

CLOTURE MOTION

We, the undersigned Senators, in accordance with the provisions of rule XXII of the Standing Rules of the Senate, do hereby move to bring to a close debate on Senate amendment No. 3878 to amendment No. 3801 to Calendar No. 96, H.R. 2028, an act making appropriations for energy and water development and related agencies for the fiscal year ending September 30, 2016, and for other purposes.

Mitch McConnell, Thad Cochran, Lamar Alexander, Johnny Isakson, Marco Rubio, David Vitter, Patrick J. Toomey, Steve Daines, Richard C. Shelby, James Lankford, John Thune, James M. Inhofe, Lisa Murkowski, Tom Cotton, Pat Roberts, John Barasso, John Hoeven.

The PRESIDING OFFICER. By unanimous consent, the mandatory quorum call has been waived.

The question is, Is it the sense of the Senate that debate on amendment No. 3878, offered by the Senator from Kentucky, Mr. MCCONNELL, for the Senator from Arkansas, Mr. COTTON, to amendment No. 3801, as amended, to H.R. 2028, shall be brought to a close?

The yeas and nays are mandatory under the rule.

The clerk will call the roll.

The senior assistant legislative clerk called the roll.

Mr. DURBIN. I announce that the Senator from Vermont (Mr. SANDERS) is necessarily absent.

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

The yeas and nays resulted—yeas 57, nays 42, as follows:

[Rollcall Vote No. 67 Leg.]

YEAS—57

Ayotte	Ernst	Menendez
Barrasso	Fischer	Moran
Blumenthal	Flake	Murkowski
Blunt	Gardner	Perdue
Boozman	Graham	Portman
Burr	Grassley	Risch
Capito	Hatch	Roberts
Cassidy	Heitkamp	Rounds
Coats	Heller	Rubio
Cochran	Hoeven	Sasse
Collins	Inhofe	Scott
Corker	Isakson	Sessions
Cornyn	Johnson	Shelby
Cotton	Kirk	Sullivan
Crapo	Lankford	Thune
Cruz	Lee	Tillis
Daines	Manchin	Toomey
Donnelly	McCain	Vitter
Enzi	McConnell	Wicker

NAYS—42

Alexander	Gillibrand	Paul
Baldwin	Heinrich	Peters
Bennet	Hirono	Reed
Booker	Kaine	Reid
Boxer	King	Schatz
Brown	Klobuchar	Schumer
Cantwell	Leahy	Shaheen
Cardin	Markey	Stabenow
Carper	McCaskill	Tester
Casey	Merkley	Udall
Coons	Mikulski	Warner
Durbin	Murphy	Warren
Feinstein	Murray	Whitehouse
Franken	Nelson	Wyden

NOT VOTING—1

Sanders

The PRESIDING OFFICER. On this vote, the yeas are 57, the nays are 42.

Three-fifths of the Senators duly chosen and sworn not having voted in the affirmative, the motion is rejected.

AMENDMENT NO. 3878

Cloture not having been invoked on amendment No. 3878, under the previous order, there will be 1 hour of debate equally divided in the usual form.

The Senator from Arkansas.

Mr. COTTON. Mr. President, I regret that the Senators failed to invoke cloture on my amendment, but I am gratified that a large bipartisan majority of the Senate agrees that we should not use U.S. taxpayer dollars to subsidize Iran's nuclear program over and above the obligations of the Joint Comprehensive Plan of Action.

Now that cloture has not been invoked, my amendment is still pending, and I understand that Democrats denied cloture on the bill three times because my amendment is able to be called up after cloture on the bill.

I want this bill to move forward, I want it to pass in an expeditious fashion, and therefore I intend later today to withdraw my amendment so it cannot be called up postcloture on the bill, leaving Democrats no reason not to agree to cloture on the bill and agree to final passage of the bill.

Finally, I want to thank the Senator from Tennessee as well as the Senator from Kentucky, the majority leader, for working with me to make sure we have the Senate on record on this important issue. I regret that it took multiple days to get to a point we could have reached very early on, as I had agreed to a 60-vote threshold 2 weeks ago, but I do think it is important that the Senate has spoken on this most critical issue.

I yield the floor.

The PRESIDING OFFICER. The Senator from Tennessee.

Mr. ALEXANDER. Mr. President, I thank the Senator from Arkansas for withdrawing his amendment. I defended his right to have the amendment. I opposed the amendment, and I explained before the vote why I did that, so it is not necessary for me to say more about it.

As Senator FEINSTEIN and I said before the vote, we are ready to finish the bill. We have had terrific cooperation from Senators on both sides of the aisle. We will have included 21 amendments in the bill by the time we are finished. More than 80 Senators have made a contribution to the bill. It has importance to every part of our country. It is the first bill of a series of 12 that we need to deal with. It is within the budget levels. It is not a part of the Federal debt problem because the discretionary spending we are talking about is fairly flat.

It is a well-designed bill, and we are ready to finish the bill. When it will be finished, of course, is up to the majority leader and the Democratic leader as they schedule.

All that remains to be done, since Senator FEINSTEIN and I have recommended that we have votes on the Cardin and Fischer amendments at 60 and that we adopt a Flake-modified amendment by voice vote—then all that remains is a cloture vote, if necessary, and final passage. In our view, that could be done today, but there may be larger issues that have to do with the Senate schedule that would cause that to be put off until tomorrow, and we will wait for an announcement from the majority leader and the Democratic leader about what that schedule is.

Thank you, Mr. President.

I yield the floor.

I suggest the absence of a quorum.

The PRESIDING OFFICER. The clerk will call the roll.

The senior assistant legislative clerk proceeded to call the roll.

Mr. ALEXANDER. 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. ALEXANDER. For the information of Senators and staff, there will be a vote at noon. We expect a cloture vote at noon on the bill. There may be other things to discuss at that time. Several Senators have asked me about votes, and I indicated that there were a couple and that there might not be votes until after lunch, but the plan now is to have a vote at noon on cloture on the bill. Perhaps by then we will be able to lock in some other votes, which would occur after lunch.

I suggest the absence of a quorum.

The PRESIDING OFFICER. The clerk will call the roll.

The legislative clerk proceeded to call the roll.

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

The PRESIDING OFFICER. (Mr. SULLIVAN). Without objection, it is so ordered.

Mr. CARDIN. Mr. President, I ask unanimous consent to speak as in morning business.

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

ZIKA VIRUS

Mr. CARDIN. Mr. President, I rise to discuss the Zika virus and the urgent need for Congress to provide the \$1.9 billion President Obama has requested to combat this health crisis.

The Zika virus was first identified in Uganda in 1947. The virus is transmitted by the same mosquito species that transmits dengue, yellow fever, and chikungunya. Prior to 2007, the Zika virus had no known outbreaks and only 14 documented human cases. However, in the spring of 2007, scientists documented 185 suspected cases of Zika on Yap Island, Micronesia, followed by more than 30,000 suspected cases in French Polynesia and other Pacific islands between 2013 and 2014, and in May 2015 the first case of Zika was reported in Brazil.

On February 1, 2016, the World Health Organization declared the ongoing Zika outbreak to be “a public health emergency of international concern.” According to the World Health Organization’s International Health Regulations, a public health emergency of international concern is a situation where the disease outbreak “constitutes a public health risk to other States through the international spread of disease, and potentially requires a coordinated international response.” The World Health Organization predicts that 3 to 4 million people—3 to 4 million people—in the Americas will contract Zika within 1 year.

There is a common refrain among scientists and experts studying Zika: There is much they still do not know about Zika, and what they do know is worrisome. Until recently, the Zika virus has been viewed as a relatively minor virus. The majority of individuals infected with the virus are asymptomatic, and those who do experience symptoms often complain of fever, rash, joint pain or conjunctivitis.

However, newer research has shown the Zika virus can cause a number of previously undetected medical conditions, especially in regard to pregnant women. Last month the Centers for Disease Control and Prevention confirmed the link between Zika infection during pregnancy and severe fetal brain defects like microcephaly. The World Health Organization recently concluded that Zika can cause Guillain-Barre, a rare condition that attacks the body’s nervous system, causing muscle weakness and even paralysis. Scientists have also recently confirmed the virus can be transmitted sexually—a first for this type of virus.

As of April 2016, the World Health Organization documented Zika virus transmission in 62 countries and territories around the world, including 33 in the Americas. Brazil has been hardest hit by the virus, recording more than 91,000 cases of the virus and nearly 5,000 suspected cases of Zika-related microcephaly. Across the U.S. territories, nearly 600 people have contracted Zika, including more than 400 in Puerto Rico. Here in the Continental United States, there have been over 420 related Zika cases, including 12 in my home State of Maryland.

As we continue moving toward the summer months and the height of the mosquito season, the number of locally acquired and travel-associated Zika infections in the United States and its territories will undoubtedly climb. Just last month, CDC Director Tom Frieden indicated that clusters of locally acquired Zika were possible in the southern United States by the summer.

Last month, the administration officially announced they would transfer \$510 million from the remaining Ebola funds to jump-start the Zika response while waiting for congressional action. While \$510 million is a good start, it is just a fraction of what is needed to mount a full response to Zika. Congress does need to act because the \$510 million Ebola fund isn’t just found money. Those dollars were sustaining efforts to detect and prevent another Ebola outbreak in West Africa while also helping developing countries better respond to outbreaks on their own. It is unacceptable that we would force our public health professionals to choose between addressing Ebola or addressing Zika.

There is no question the United States must take the threat of Zika seriously and mount an urgent, aggressive, and sustained response to the virus. As we speak, a Federal inter-agency task force, led by the Department of Health and Human Services, is working around the clock to mitigate the impact of Zika. Within the task force, the CDC is working closely with laboratories in affected countries, in the United States, and its territories to enhance laboratory and surveillance capacity and improve diagnostics.

The CDC is also engaging in public health studies and is providing guidance to health professionals and educating the general public about prevention. The agency is also working with local authorities in the United States to improve mosquito control efforts.

In Maryland, the National Institute of Allergy and Infectious Diseases at the National Institutes of Health is supporting preclinical and clinical development of vaccines for the mosquito virus and other mosquito-borne diseases. The Institute is also collaborating with stakeholders to conduct vital research that will allow us to better understand the origins and pathology of Zika and bring us closer to developing a vaccine.

The Food and Drug Administration is working to improve and refine diagnostics for the Zika virus. Most notably, the FDA recently issued two Emergency Use Authorizations for two newly developed Zika diagnostic tests. To date, more than 25 States and the District of Columbia have verified their ability to test for Zika using these methods, which will enhance our ability to monitor this growing epidemic. The FDA is also working closely with the Biomedical Advanced Research and Development Authority to advance vaccine research and development.

I am also pleased the U.S. Agency for International Development, USAID, is working with UNICEF to develop and implement communication campaigns and community mobilization for behavioral change related to personal protection against mosquitos, as well as community-based mosquito mitigation and elimination efforts—commonly referred to as vector control—in areas hardest hit by the virus. The agency is also partnering with the World Health Organization and its South American arm, the Pan American Health Organization, to implement and monitor vector control programs.

In addition to providing personal protection commodities, USAID is also working closely with the international health partners to develop and adopt guidelines for addressing Zika in at-risk populations, particularly pregnant women.

This is just a fraction of what a Zika response looks like. I would be here much longer if I were to go through every detail of what our agencies are doing to respond to the threat. Suffice it to say, this is an all-hands-on-deck emergency, and we cannot implement and sustain an adequate response without fully funding the President's request.

More than 2 months have passed since the President sent his request to Congress. The Zika virus is not some nebulous foreign threat. It is already on our shores. Congress needs to act. I call on my fellow Senators to come to an agreement on a robust and comprehensive Zika supplemental that enables us to better prevent, treat, and

respond to the virus both at home and abroad, while also replenishing the critical Ebola funds.

When it comes to global health pandemics, which know no borders, the Congress of the United States can and must act to protect American citizens and people around the world.

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

I suggest the absence of a quorum.

The PRESIDING OFFICER. The clerk will call the roll.

The bill clerk proceeded to call the roll.

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

The PRESIDING OFFICER (Mr. SASSE). Without objection, it is so ordered.

Mr. ALEXANDER. Mr. President, within a few minutes, we will be voting for the fourth time on cloture on the bill. This time I expect it to pass. The Cotton amendment has been disposed of. Following that, if it is successful, Senator FEINSTEIN and I have recommended to the majority leader and the Democratic leader that we move to a vote on the Cardin and Fischer amendments, at 60 votes, and a voice vote on the Flake amendment. Then, all that would be remaining would be a final cloture vote, which may or may not be necessary, and final passage. None of those votes have been agreed to yet, and we will let Senators know when they are. But in the opinion of the bill managers, we are ready to finish the bill, and we thank Senators for their cooperation to get us to this point.

Mr. President, I suggest the absence of a quorum.

The PRESIDING OFFICER. The clerk will call the roll.

The bill clerk proceeded to call the roll.

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

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

AMENDMENT NO. 3878 WITHDRAWN

Mr. ALEXANDER. Mr. President, on behalf of the Senator from Arkansas, Mr. COTTON, I withdraw the Cotton amendment.

The PRESIDING OFFICER. The amendment is withdrawn.

CLOTURE MOTION

The PRESIDING OFFICER. Pursuant to rule XXII, the Chair lays before the Senate the pending cloture motion, which the clerk will state.

The bill clerk read as follows:

CLOTURE MOTION

We, the undersigned Senators, in accordance with the provisions of rule XXII of the Standing Rules of the Senate, do hereby move to bring to a close debate on Senate amendment No. 3801 to Calendar No. 96, H.R. 2028, an act making appropriations for energy and water development and related agencies for the fiscal year ending September 30, 2016, and for other purposes.

Mitch McConnell, Bob Corker, Tom Cotton, Thom Tillis, Mike Crapo, Joni

Ernst, Jerry Moran, John Boozman, Lindsey Graham, John Thune, Daniel Coats, Chuck Grassley, Shelley Moore Capito, Thad Cochran, Lamar Alexander, Richard Burr, Roy Blunt.

The PRESIDING OFFICER. By unanimous consent, the mandatory quorum call has been waived.

The question is, Is it the sense of the Senate that debate on amendment No. 3801, offered by the Senator from Tennessee, Mr. ALEXANDER, as amended, to H.R. 2028, shall be brought to a close?

The yeas and nays are mandatory under the rule.

The clerk will call the roll.

The bill clerk called the roll.

Mr. DURBIN. I announce that the Senator from Vermont (Mr. SANDERS) is necessarily absent.

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

The yeas and nays resulted—yeas 97, nays 2, as follows:

[Rollcall Vote No. 68 Leg.]

YEAS—97

Alexander	Fischer	Nelson
Ayotte	Flake	Paul
Baldwin	Franken	Perdue
Barrasso	Gardner	Peters
Bennet	Gillibrand	Portman
Blumenthal	Graham	Reed
Blunt	Grassley	Reid
Booker	Hatch	Risch
Boozman	Heinrich	Roberts
Boxer	Heitkamp	Rounds
Brown	Hirono	Rubio
Burr	Hoeven	Sasse
Cantwell	Inhofe	Schatz
Capito	Isakson	Schumer
Cardin	Johnson	Scott
Carper	Kaine	Sessions
Casey	King	Shaheen
Cassidy	Kirk	Shelby
Coats	Klobuchar	Stabenow
Cochran	Lankford	Sullivan
Collins	Leahy	Tester
Coons	Manchin	Thune
Corker	Markey	Tillis
Cornyn	McCain	Toomey
Cotton	McCaskill	Udall
Crapo	McConnell	Vitter
Cruz	Menendez	Warner
Daines	Merkley	Warren
Donnelly	Mikulski	Whitehouse
Durbin	Moran	Wicker
Enzi	Murkowski	Wyden
Ernst	Murphy	
Feinstein	Murray	

NAYS—2

Heller Lee

NOT VOTING—1

Sanders

The PRESIDING OFFICER. On this vote, the yeas are 97, the nays are 2.

Three-fifths of the Senators duly chosen and sworn having voted in the affirmative, the motion is agreed to.

The Senator from Tennessee.

Mr. ALEXANDER. Mr. President, I am glad to see an enthusiastic vote of support on the cloture motion on the fourth try. We gain a little bit every time.

For the information of Senators, there will be two votes at 4:30 p.m., on the Cardin and Fischer amendments at 60 votes each.

AMENDMENTS NOS. 3871, 3888, AND 3876 TO AMENDMENT NO. 3801

Mr. President, I ask unanimous consent that it be in order to call up the following amendments and that they

be reported by number: Cardin amendment No. 3871, Fischer amendment No. 3888, and Flake amendment No. 3876; further, that the time until 4:30 p.m. be equally divided between the managers or their designees for debate on the amendments concurrently; and that following the use or yielding back of time, the Senate vote on the Cardin and Fischer amendments in the order listed, with a 60-affirmative-vote threshold for adoption for amendments Nos. 3871 and 3888; I further ask that there be no second-degree amendments in order to any of these amendments.

The PRESIDING OFFICER. Is there objection?

Without objection, it is so ordered.

The clerk will report the amendments by number.

The senior assistant legislative clerk read as follows:

The Senator from Tennessee [Mr. ALEXANDER], for others, proposes amendments numbered 3871, 3888, and 3876 to amendment No. 3801.

The amendments are as follows:

AMENDMENT NO. 3871

(Purpose: To use Federal and State expertise to mitigate fish and wildlife impacts at Corps of Engineers projects)

At the appropriate place, insert the following:

SEC. ____ . PROTECTION OF FISH AND WILDLIFE.

(a) IN GENERAL.—None of the funds made available by this Act shall be available to carry out project or project operation studies unless the Secretary of the Army ensures evaluation of and mitigation for impacts to fish and wildlife resources consistent with recommendations developed by the Director of the United States Fish and Wildlife Service, the Secretary of the Interior, and the States pursuant to section 2 of the Fish and Wildlife Coordination Act (16 U.S.C. 662), including recommendations to properly evaluate impacts and avoid adverse impacts to fish and wildlife resources.

(b) REQUIREMENTS.—

(1) IN GENERAL.—In carrying out subsection (a), the Secretary of the Army shall not select a recommended alternative for a water resources project if the Director of the United States Fish and Wildlife Service concludes that the impacts of that alternative cannot be successfully mitigated.

(2) MITIGATION.—The mitigation requirements under this section shall be in addition to any other mitigation measures required under section 906 of the Water Resources Development Act of 1986 (33 U.S.C. 2283) and any other applicable Federal or State law (including regulations).

AMENDMENT NO. 3888

(Purpose: To provide for the operation of reservoir projects by the Bureau of Reclamation)

At the end of title II, add the following:

SEC. 2 ____ . None of the funds made available by this Act that would be provided to the Bureau of Reclamation for reservoir projects, operations, administration of water rights, or other action in the Republican River Basin may be used in a manner that does not comply with each applicable—

(1) current resolution of the Republican River Compact Administration, dated November 24, 2015, for accounting and reservoir operations for 2016 and 2017; and

(2) State order necessary to carry out that resolution.

AMENDMENT NO. 3876

(Purpose: To require that certain funds are used for the review and revision of certain operational documents)

On page 5, line 22, strike the period at the end and insert the following: “: *Provided further*, That of the funds provided herein, for any Corps of Engineers project located in a State in which a Bureau of Reclamation project is also located, any non-Federal project regulated for flood control by the Secretary of the Army located in a State in which a Bureau of Reclamation project is also located, or any Bureau of Reclamation facilities regulated for flood control by the Secretary of the Army, the Secretary of the Army shall fund all or a portion of the costs to review or revise operational documents, including water control plans, water control manuals, water control diagrams, release schedules, rule curves, operational agreements with non-Federal entities, and any associated environmental documentation.”.

The PRESIDING OFFICER. The Senator from Wyoming.

Mr. BARRASSO. Mr. President, I ask unanimous consent to speak as in morning business.

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

ZIKA VIRUS

Mr. BARRASSO. Mr. President, I come to the floor today to talk about the threat that the Zika virus poses—a threat to the health of Americans and to people around the world.

Every day we learn more about this virus. The Centers for Disease Control and Prevention has confirmed a link between Zika and microcephaly. That is a condition where babies are born with smaller heads and with brain defects. It is a devastating problem that we are all facing.

Studies have linked Zika to something called Guillain-Barre syndrome—a condition I studied in medical school and have seen patients with. It can lead to paralysis, which is another very serious condition.

Last week the Centers for Disease Control also confirmed the first Zika-related death in Puerto Rico.

Because this virus is mostly spread by mosquitoes, the potential risk is only going to become more urgent as the weather turns warmer. So we must do what we can now—today—before this turns into a true epidemic rather than the threat it is today. America’s drug companies and researchers need to continue working on treatments, tests, and vaccines. Our cities and towns need to start taking aggressive measures to control mosquitoes. Doctors can help to educate people who are at risk of contracting the disease—this virus—but we really do need all hands on deck.

Washington has an important part to play, and Republicans in the Senate are ready to address this issue. Congress has already passed legislation that adds Zika to what is called the priority review voucher program. This program awards financial incentives to the sponsor of a new drug that is approved to prevent or treat a tropical disease. That is a good way Congress can help speed up the research process

in dealing with Zika. Congress has also approved the transfer of nearly \$600 million in existing, unobligated funds for an immediate Zika response, so the money has already been moved to help.

We can also make a big difference by cutting through redtape, and there is significant redtape in this city that actually makes it harder to kill mosquitoes that carry this virus. We would think we would want to make it easier to kill mosquitoes, but there is redtape in Washington, DC—bureaucrats making it harder to kill the mosquitoes that carry the virus.

Today it is hard to believe that there are requirements for permits that I think are absolutely unnecessary and that make it more difficult and more expensive to spray for mosquitoes in the United States. So if a farmer or a rancher, a city or a community wants to spray for mosquitoes, they have to use a pesticide that has been approved by the Environmental Protection Agency; that is No. 1. In a lot of cases, people who want to spray for mosquitoes also have to get a separate permit under the Clean Water Act. That is No. 2. There are two steps—one, to get the permit to spray, and two, to get the EPA approval of what they are going to spray with. This doesn’t add any benefit to the environment, and it certainly doesn’t help protect anybody from the Zika virus. It is Washington getting in the way. It adds another hoop for people to jump through before they can get rid of the mosquitoes that carry the Zika virus.

Senator MIKE CRAPO from Idaho has written legislation that would eliminate this second unnecessary requirement. It is not saying that anyone can go out and spray whatever they want. The pesticide would still have to be approved so that we know they are safe. But the legislation says that we don’t need this second permitting process that Washington demands. It is a commonsense change. It is the kind of thing we could do to help local officials on the ground make the best decisions about how they can fight these mosquitoes and this virus in their communities, in the places they know the best, and do it quickly.

The Crapo bill has 18 cosponsors, and I am proud to be one of them. It is a bipartisan bill with bipartisan support, and it has already passed the Environment and Public Works Committee. We should take up this bill and pass it and get these tools into people’s hands as quickly as possible.

I know that some of what America can do to help fight Zika—and people understand this—is going to require us to spend money, and I support that. That is why the Appropriations Committee is looking at the need for additional funding, additional spending to address this threat. Regular appropriations bills are the best way for us to carefully look at where the priorities are for spending the taxpayers’ dollars. That is how we should be paying for things around here, not just another

continuing resolution or some emergency measure.

When something new comes up, we can look at it, figure out how to balance the costs, and if we have to do an emergency bill to get some money out the door more quickly, we can take a look at that as well, but we can't do that without at least having a plan from the administration on where and how this money they are requesting is going to be spent.

The Obama administration has not yet given us the level of information we need to make an informed decision. It appears that the administration is trying to take advantage of this Zika emergency to give itself an additional \$2 billion to use however it wants—maybe to fight Zika but maybe to do other things. What the administration is saying is that they want the money to be used for “assistance or research to prevent, treat, or otherwise respond to Zika virus . . . or other infectious diseases.” The wording is much too vague. It would allow the administration to use these emergency funds on other priorities well beyond a Zika response.

The President's request for emergency funding goes on to say that most of the money, they say, could be transferred to other parts of the government, like the Environmental Protection Agency and even the Department of Defense. It includes a lot of expenses that don't necessarily qualify as emergency spending outside the regular appropriations process.

Both sides of the aisle know the Zika situation is serious, and both sides want to do what we can to help. But Congress also has an obligation to make sure that our taxpayer dollars are being spent responsibly, that there is accountability. We shouldn't be writing a big check for the Obama administration to cash without adequate explanation and adequate accountability. We deserve that. The American people deserve it. They will expect it, and they deserve it.

I want to be clear. Zika is a very real public health threat, and it deserves serious discussion. It deserves urgent action. This fight against the Zika virus should not be turned into a political game. So I think it is a terrible sign that some Democrats in the Senate have begun to treat this devastating health issue like just another political talking point. That is what they have done here on the floor of the Senate. A couple of weeks ago, Democrats actually held a press conference calling on Congress to approve emergency funds for Zika. Then these same Democrats turned around and blocked passage of the Energy and Water appropriations bill for a number of days.

The appropriations process is the best way for us to fund the Zika response, and the Senate Democrats are holding up this process for political purposes. We need to get moving beyond this appropriations bill to the next one that is going to address the

issue of Zika. Then we hear that the minority leader might want to wait until next week to get on this bill. We need to get on this bill now.

So the Democrats have made it clear that they don't even want to talk about offsetting any of the Zika funding. The Obama administration continues to stonewall our reasonable requests for adequate information about how it wants to spend these taxpayer dollars.

Senate Republicans are going to keep asking for this information. We are going to keep pushing to use the appropriations process the way it is intended, and we are committed as Republicans to addressing the public health threat posed by the Zika virus. We will continue working across the aisle to respond to the threat and to do it in a way that is reasonable, responsible, and accountable.

Thank you.

I yield the floor.

I suggest the absence of a quorum.

The PRESIDING OFFICER (Mrs. ERNST). The clerk will call the roll.

The senior assistant legislative clerk proceeded to call the roll.

Mrs. MURRAY. Madam President, I ask unanimous consent that the order for the quorum call be rescinded.

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

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

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

NOMINATION OF MERRICK GARLAND

Mrs. MURRAY. Madam President, I come to the Senate floor to once again urge my Republican colleagues to listen to the vast majority of the people across the country, do their job and allow us to do ours: fulfill our constitutional responsibilities, hold hearings for Judge Merrick Garland, and give him a vote.

We owe that to the people we represent. It is simply the right thing to do. Two months ago, the President did his job. He selected a nominee. For 2 months, Judge Garland has been ready and willing to meet with any Senator who will make the time. Yesterday Judge Garland did his job by submitting a questionnaire to the Senate Judiciary Committee outlining his background and his work history, which is standard for judicial nominees.

What about the Senate? In complete disregard of what so many Members continue to hear in their home States across the country, Republican leaders are refusing to act. Senate Republicans will not say they are opposed to Judge Garland. They are refusing to even live up to their constitutional responsibility and consider him. This kind of pure obstruction and partisanship is so wrong. People across the country are not going to stand for it. We are now at an unbelievable 88 days into this Supreme Court vacancy. Especially after knowing what I do after meeting with Judge Garland and what many Repub-

licans know after meeting with him as well, his distinguished career and work history show that he is, without a doubt, someone who deserves fair consideration by all of us in the Senate.

Judge Garland led a massive investigation of the Oklahoma City bombing and supervised the prosecution of Timothy McVeigh. He called his work for the Justice Department, following the Oklahoma City bombing, the most important thing he has ever done in his life.

His fairness and diligence earned him praise from Members of both parties, from victims' families, law enforcement officers, and even from the lead lawyer who was defending McVeigh. As a prosecutor, he ensured proper respect for the rights of criminal defendants.

He was confirmed to the DC Circuit Court of Appeals in 1997 with a strong bipartisan vote of 76 to 23. Several of those who confirmed him in 1997 still serve in the Senate today. Clearly this is less about Judge Garland as a nominee and more about political obstruction and partisanship, especially after one Republican Senator admitted that if it looks as if Donald Trump will lose the November election, we should quickly confirm Judge Garland. This comes after weeks of saying the Senate should not do its job until we have a new President.

Evaluating and confirming Supreme Court Justices is one of the most important roles we have in the Senate. I have heard from people all over my State of Washington who want the Senate to do its job.

If Republicans continue to refuse to do their jobs, they aren't saying the people should decide; they are saying they believe the Republican Presidential nominee should. That is just wrong, especially after we heard from the presumptive Republican nominee last night on FOX News.

Recently, he said that he thinks women should be punished for exercising their constitutionally protected reproductive rights.

Last night he went a step further. He would only appoint “pro-life” Justices who would overturn *Roe v. Wade*. Let me repeat that. The candidate Republicans would like to see in the White House nominating Supreme Court Justices has committed to taking our country back to the Dark Ages.

That is appalling, and it is something I know millions of men and women across the country are scared of. It is just one more reason that people will continue demanding that Senate Republicans do their jobs now.

Washington State families should have a voice right now. Families across America should have a voice right now. The tea party gridlock and dysfunction that has dominated too much of our time and work in Congress should be pushed aside right now.

I hope Republicans will reconsider. I hope they will meet with Judge Garland, hold a hearing, and give him a vote. We need nine Justices serving on the highest Court in the land.

The American people deserve a fully functioning Supreme Court.

I yield the floor.

I suggest the absence of a quorum.

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

The legislative clerk proceeded to call the roll.

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

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

Mrs. BOXER. Mr. President, I come to the floor to talk about a very important responsibility that the Senate has to deal with in an expeditious manner—a Supreme Court nomination.

In a practice consistent with every single Supreme Court nominee before him, President Obama's nominee to fill the vacancy, Judge Merrick Garland, submitted his completed questionnaire yesterday to the Senate Judiciary Committee. Inside 6 boxes were 141 pages—with 2,066 pages of appendices—in which Judge Garland provided incredibly thorough answers to the standard questions asked of every Supreme Court candidate.

He detailed the highlights of his career, his published writings, the many honors and awards he received, the cases he litigated, the judicial opinions he gave, as well as his speeches and his interviews.

Despite the fact that Senate Republicans have forced Judge Garland into an unprecedented limbo, he remains focused on the task before him. He has acted with the greatest decency, thoughtfulness, and bipartisanship while agreeing to meet with 46 Senators, including 14 Republicans.

Judge Garland respects the process. Why can't Senate Republicans?

President Obama clearly respected the process when he picked Judge Garland, who—as Chief Judge of the U.S. Court of Appeals for the District of Columbia, the second most important court in the country—has more Federal judicial experience than any other Supreme Court nominee in history.

Let me repeat that. Judge Garland, the nominee from our President, who was duly elected not once but twice, has more Federal judicial experience than any other Supreme Court nominee in history.

Judge Garland has committed much of his life to public service, from his days leading the successful prosecutions of the Oklahoma City bombers and the Unabomber, to his nearly two decades as a Federal appellate judge. He is brilliant and he is evenhanded.

The Congressional Research Service called him “pragmatic” and “meticulous,” a nominee who prioritizes “collaboration over ideological rigidity.”

Let me repeat that. He is a nominee who prioritizes “collaboration over ideological rigidity.”

He has also received high praise from some Republican Senators, and that praise deserves repeating.

Senator LINDSEY GRAHAM said: “He's honest and capable, and his reputation is beyond reproach.”

Senator JIM INHOFE, the chairman of the committee on which I serve as ranking member said: “I think a lot of him.”

Senator ROB PORTMAN: “He's an impressive guy.”

Senator JEFF FLAKE said: “Nobody has a bad thing to say about him.”

Yet in the same breath, these are some of the very same Republicans who refuse to hold a hearing and schedule a vote on Judge Garland's nomination, even though article II, section 2, clause 2 of the Constitution says that it is the Senate's job to provide “advice and consent” on the President's Supreme Court nominees.

This is what gets me—that my Republican friends say they care about the Constitution. They love the Constitution. They abide by the Constitution. They want a literal reading of the Constitution. Well, let's read it together—article II, section 2, clause 2: The President “shall nominate, and by and with the Advice and Consent of the Senate, shall appoint . . . judges of the Supreme Court.”

It doesn't say the President “may nominate”; it says the President “shall nominate.” It doesn't say the Senate “may give advice and consent”; it says they “shall.” The President shall, by and with the advice and consent of the Senate. They also shall appoint Ambassadors, other public ministers and consuls, and judges of the Supreme Court.

So here it is. This clause wasn't put in some bottle and miraculously washed up on the shore and read—this is what our Founding Fathers wanted. It is in the Constitution. It doesn't say “may.” It doesn't say to the Senate: “And by the way, p.s., if you don't like the President, forget it.” No, no, no. It is not in there. I looked. It doesn't say: “Well, if you think that a President isn't a good President and that you are going to get a better one, you can put it off.” No, it doesn't say that.

The American people have three words for the Republicans who are disrespecting this process, disrespecting our Constitution, disrespecting our President, and threatening to create a man-made crisis at the Supreme Court. And it is a crisis. If they deadlock, it is a crisis. We will have one set of laws in one part of the country and one set of laws in the other part of the country, or we are not going to have a ruling on a very important issue. It doesn't matter what your ideology is, you are setting up deadlocks.

It is bad enough that there is obstruction here. I know my friend, the Senator from Illinois, will talk about the obstruction when it comes to judges and Ambassadors and the like because we face it every day. That is bad enough. But the highest Court in the land, governed by this Constitution—it doesn't say: “Look at the other side of the paper. You really don't have to act.” No.

Across party lines, the American people are saying three words to my Republican friends: Do your job. Do your job.

Since 1916, when the Senate Judiciary Committee began holding public confirmation hearings for Supreme Court nominees, the Senate has never denied a Supreme Court nominee a hearing and a vote. Let me say that again. Since 1916, the Senate has never denied a Supreme Court nominee a hearing and a vote. The Democrats never did it, and the Republicans never did it—until now. And this is from the very people who say: “Oh, I carry the Constitution in my heart. I am a strict constructionist.”

If you are such a strict constructionist, read this and follow the Constitution.

I am not sure about this. I think I read that somebody is either thinking about filing a lawsuit or they have filed a lawsuit because of inaction. I tell you, if I wasn't here, I would truly think about that. You can't read this Constitution and come up with any conclusion other than that what they are doing is unconstitutional—the very same people who say: “Follow the Constitution.”

So in closing, which are the words my friend is waiting for, here is what I want to say. Our Republican friends have to rethink their obstructionist approach because they are going to do lasting damage to two of our country's most important institutions—the Senate and the Supreme Court. I know they love their country. I know they may not like this nominee, even though a lot of them seem to like him quite a bit. Maybe they are waiting for Donald Trump to put someone up. I hope that never happens. But I am going to tell you now that you are obstructing. You are obstructing the will of the people. You are obstructing a President who was elected twice. You are obstructing justice for the American people, and they all hate what you are doing, including the Republicans who have been polled.

My Republican colleagues have to end these political games. It is time to give Judge Garland the same consideration as every other nominee before him. It is time to bring some respect back to the Senate and to the Supreme Court nomination process. The American people are going to hold my Republican colleagues accountable for this because you cannot do this. This is not right.

If you want to vote against a nominee, fine. I have done it. Of course, vote against the nominee. But as much as I have opposed nominees before—and I have—I have never suggested, nor has any other Democrat I know of ever suggested, that you don't go forward with the process.

I thank the Chair, and I yield the floor, noting that my friend from Illinois is going to address us.

The PRESIDING OFFICER. The Senator from Illinois is recognized.

Mr. DURBIN. Mr. President, will the Presiding Officer tell us what the order of business is.

The PRESIDING OFFICER. The Senate is postcloture on amendment No. 3801.

Mr. DURBIN. There are no time limits agreed to?

The PRESIDING OFFICER. The time is evenly divided until 4:30 p.m.

Mr. DURBIN. I thank the Chair.

JUDICIAL NOMINATIONS

Mr. President, the Executive Calendar is sitting here on the table for each Member of the Senate to take a look at. I have renamed it. It is no longer the Executive Calendar; it is the political obituaries.

These are men and women who have been nominated to serve in positions of our government, who are excited about the opportunity to be public servants, many of whom have gone through extensive background checks, FBI checks, with staff having taken a look at their resumes, asked hard questions, demanded answers, and put these nominees through hearings. Many went through extensive periods of investigation and hearings and then were reported—20 of them, 20 judicial nominees—by the Senate Judiciary Committee to the floor of the Senate. Were they controversial? No. All 20 came to the floor by unanimous vote.

Think about it. Here is a Senate divided—54 Republicans and 46 Democrats—and 20 judicial nominees made it through what I just described to the Executive Calendar of the Senate, Wednesday, May 11, 2016. And there they sit, day after weary day, month after weary month, thinking they might have a chance to serve this Nation but realizing the clock is running out. What do I mean by that? In this Congress we have approved 17 judges—2 circuit judges, those at the appellate level, and 15 at the district level. Twenty still sit on the calendar. And across the United States, we have 87 judicial vacancies, including 29 that are in districts we think are in serious trouble if they aren't filled quickly.

The Republican majority in the Senate puts these men and women through this process, reports them out of committee, and then lets them languish on the floor of the Senate. They will not call them for a vote. What are they waiting for? Well, it is a political decision. Here is what it comes down to. There is an unwritten rule—you will not find it in our rule book—called the Thurmond rule. It relates to Senator Strom Thurmond of South Carolina. He must have articulated this at some point in his career, but he said: When it comes to an election year—like this one—we will stop approving nominations as of the beginning of the political conventions.

Well, in this year, that is going to be about the middle of July. So if you do the countdown of when we are in session, we have probably 5, 6 weeks left to consider nominations before they die under the unwritten Thurmond rule. So what the Republicans are doing is running out the clock on these 20 people. We shouldn't be surprised. If

they would do this on a nomination to fill a vacancy on the highest Court of the land, it shouldn't surprise us they would do the same thing when it comes to these 20 nominees. What are they waiting for? Why don't they want to approve these noncontroversial judges? They are waiting in prayerful reflection for the election of Donald Trump as President.

Mr. President, you know that many people in your party have mixed feelings about the candidacy of Mr. Donald Trump. But I would say, stepping aside from the merits of his candidacy, we shouldn't have mixed feelings when it comes to the Constitution, and the Constitution is explicit when it comes to vacancies on the Supreme Court. The Founding Fathers, in the Constitution—quoted a few minutes ago by my colleague from California—in article II, section 2, didn't mince words or equivocate. They said the President shall appoint nominees to fill vacancies on the Supreme Court, subject to the advice and consent of the Senate.

We both have a role. The President is required by the Constitution to appoint someone to fill a vacancy. And 3 months ago, the untimely passing of Justice Antonin Scalia created that vacancy. Two months ago—56 days ago—President Obama nominated Merrick Garland to be the next Justice on the Supreme Court. The President met his constitutional responsibility. But the Republicans in the Senate announced, hours after Justice Scalia was found to have passed away, they would not even consider a nominee by this President to fill that vacancy—not a hearing, not a vote.

You might say to yourself: Well, that is politics in Washington. Should we expect anything different? Should we expect a Republican Senate to approve a nominee from a Democrat? Come on, this is hard ball here; this isn't bean bag.

Well, let me tell you a little story. In 1988, with a vacancy on the Supreme Court, Republican President Ronald Reagan, in his last year in office, nominated Anthony Kennedy to fill that vacancy and sent the nominee to this Chamber in the Senate when it was controlled by the Democratic side. What did the Democratic majority say to the Republican President, trying to fill a Supreme Court vacancy? We know our responsibility. And that Senate, under control of the Democrats, took up the name offered by the Republican President, approved him, and sent him to the Supreme Court in 1988.

So to argue "This is just typical politics. Don't make a lot of noise. We do this all the time"—let me make it clear: What the Republican Senate majority is doing today has never—underline that word "never"—happened in the history of the United States of America.

This is disrespect for a constitutional provision that is explicit. This is disrespect for a Court which now sits with 8 members on the Court—a Court

which could find itself—and already has in several instances—tied 4 to 4. How important is that? Let me read a quote from back in 1987: "Every day that passes with the Supreme Court below full strength impairs the people's business in that crucially important body." Who made that statement? Republican President Ronald Reagan. What he said then applies now.

What the Republican majority is doing in the Senate—refusing Merrick Garland a hearing and a vote, holding up on the calendar 20 nominees who should be on the Federal bench—is obstructionism at its worst. It is what the people are sick of across this country. It is disrespectful to the Constitution, it is obstructionism, and it is pure politics.

Why? Why are they so determined to keep this vacancy? Some of them, as I said, are dreaming of the possibility of a President Trump picking the next Justice on the Supreme Court. I will let your mind race away with the possibilities if "The Donald" is going to choose the next Justice on the Supreme Court, but others really bring it down to a much more basic level.

There are special interest groups who want to make sure the next Justice on the Supreme Court is their friend. They do not want to run the risk that someone is going to be put on the Court who will not rule in their favor. So they are praying their political prayer: Hang on, hang on, Senate Republicans. Take the grief that two-thirds of the American people think you are wrong in what you are doing and be prepared to accept that grief if you want the support of these special interest groups.

That is what this comes down to. It is the sad reality of politics in Washington today. And I will tell you, there is blame for both sides on many issues, but on this one there is crystal-clear clarity. The President has met his constitutional responsibility. The Senate Republican leaders, for the first time in the history of the United States of America, are denying a Supreme Court nominee a hearing and a vote. That is fundamentally wrong under the Constitution and fundamentally unfair to Merrick Garland.

Merrick Garland was born in Illinois, so maybe I am partial to him a little bit, but he has quite a record. He has been touted as one of the best nominees in terms of qualifications. He is now the chief judge of the D.C. Circuit Court, right below the Supreme Court. That is a big job, but he is the man for it, according to people from both political parties.

Solicitors General of the United States of America just sent a letter to the Senate. Nine of them signed, Democrats and Republicans. These are men and women who have argued before the Supreme Court representing the United States of America—attorneys who are familiar with that Court, the gravity of the decisions they face, the requirements to serve on the Court—and

unanimously, Democrats and Republicans, they said to the Senate: Merrick Garland is the right man to serve on the Supreme Court.

We come today with sadness, and even more with a sense of injustice that the Republicans would allow this political gambit to continue. To think that they are waiting for President Donald Trump to fill this vacancy is almost impossible to say or to believe, but it is a fact.

I will close by saying I have checked the Constitution, and I check it regularly. There has been no change in the provision that says, in November of 2012, Barack Obama was reelected President of the United States to serve for 4 years—4 full years—and that would include this year. The Republican argument that he is out of business now and we will wait for the next President defies the verdict of the American people in that election. By 5 million votes they said: Barack Obama, you are the President of the United States for 4 years, with the powers attendant to that office. The denial by Republicans of that constitutional reality is a reflection on their feelings about a document which they have sworn individually to uphold and defend.

Mr. President, I yield the floor.

The PRESIDING OFFICER (Mr. SCOTT). The Senator from South Dakota.

THE ECONOMY

Mr. THUNE. Mr. President, 2 weeks ago we received the initial report on economic growth in the first quarter of 2016. The news was not good. As my colleague, the Senator from Alaska, Mr. SULLIVAN, has pointed out many times on the floor and in many forums, our economy grew at a dismal rate of one-half of 1 percent during the first 3 months of 2016—one-half of 1 percent economic growth. In other words, the economy barely grew at all.

While this report was particularly terrible, the truth is, weak economic growth has become the norm under the Obama administration. Since the recession ended in June of 2009, the economy has grown at an average rate of just 2.1 percent. In the typical post-1960 recovery, by contrast, economic growth averaged 3.7 percent. That is a huge difference. It is the difference between a stagnant economy and a flourishing economy—and, for millions of American families, it is the difference between surviving and thriving.

Middle-class families are making 6.5 percent less than they were making in 2007, before the start of the great recession. A large part of the reason for that is the sluggish economic growth we have experienced in the Obama recovery. For too many families, this slow recovery has meant the end of cherished dreams—the dream of owning their own home, the dream of sending their kids to college, the dream of a secure retirement—and the kind of growth we need to escape from these economic doldrums is nowhere in sight.

In fact, the Obama economy has led some economists to wonder if 2 percent growth is the new normal. Right now, the Federal Reserve is projecting the economy will grow at a median rate of just 2.2 percent in 2016 and 2.1 percent in 2017. I would argue, based upon the 0.5 percent economic growth the first quarter of this year, they may be dramatically overshooting the rate of economic growth if the current trend continues, and the St. Louis Fed expects that weak growth to continue for the next decade. That is very bad news for American families who are facing a less prosperous future with less economic opportunity and mobility.

During the entire postwar period from 1947 to 2013, our Nation averaged 3.3 percent economic growth. At that pace, Americans' standard of living almost doubles every 30 years, incomes rise, financial security increases, and more people are able to afford homes, take vacations, and save for higher education. On the other hand, at the pace of growth we have seen since 2007, it will take far longer for the standard of living to double.

Fortunately, we are not condemned to weak economic growth. If we look at the President's record, it is easy to see why our economy is still sputtering along: We had a failed \$1 trillion stimulus program; \$1.7 trillion in new taxes; the President's health care law, which raised premiums for families and increased costs for small businesses; more than 2,700 new Federal regulations—and counting, we are not done yet—get added to by the day; and a Federal debt that has nearly doubled on the President's watch and more.

The President's policies don't have to be permanent. We can repeal ObamaCare and the incredible burdens it is placing on so many families and small businesses. We can replace it with something that makes more sense, creates competition, gives consumers more choices, and drives down prices.

We can replace the President's tax hikes with comprehensive tax reform that focuses on lowering taxes for families and making America the best place in the world to do business, we can take serious action to address the spending that is fueling our national debt, and we can repeal some of the thousands of burdensome regulations the President has imposed during his tenure.

It is easy to forget that every regulation the government imposes, no matter how small, has a cost—and those costs are paid by American families and American businesses. Take the national energy tax the President imposed on coal-fired powerplants. This rule will potentially drive up electricity bills for families by hundreds of dollars each year, and it will be especially harmful to low-income families and seniors who are living on fixed incomes.

Take the President's decision to allow the EPA to regulate ponds and

ditches on private land. This regulation will have significant economic impacts for farmers and property owners who will likely be hit with new Federal permits, compliance costs, and the threat of significant fines. Over the past 7-plus years, the Obama administration has imposed more than 2,700 regulations, including hundreds of major regulations. When I say "major," those are regulations that cost American families and businesses more than \$100 million each year. Out-of-touch Washington bureaucrats reaching into our States and imposing regulatory burdens from afar has become all too common in the Obama administration. Repealing some of the worst of these regulations would drastically reduce the burdens facing American families and businesses, and that would put more money in American families' pockets and free American businesses to do what they do best; that is, to innovate and create new, good-paying jobs.

If we continue on the path we are on right now, we might be the first generation of Americans to leave the next generation of Americans worse off, but we don't have to be. We can reverse the course the President has set during his administration and put in place the kind of policies that will create conditions that are favorable to economic growth, to grow our economy and lift the burdens on American families.

Republicans in the Senate have already been working to undo the worst policies of the Obama administration. We are going to continue to fight until our Nation's economy is thriving and all families have the opportunity to achieve the American dream.

If we can just achieve 1 percentage point additional growth in the economy each year, we are told by leading economists that would add 1.3 million jobs to our economy, raise wages by \$9,000 a year, and generate an additional \$300 billion of Federal revenue that would make our fiscal picture look a lot smaller by comparison.

We have to get spending under control. We have to reform entitlement programs that are unsustainable, that are going to bankrupt future generations of Americans, to get our fiscal house in order, but we also have to grow the economy at a faster rate. One-half of 1 percent is not adequate—nor is 1 percent, nor is 2 percent. We need to get back to a normal growth period in our economy. As I said, since the end of World War II, 3.3 percent has been the average, 3.7 percent has been the norm in a recovery coming out of a recession. If we get to that level of growth, we will see millions of new jobs in our economy, we will see American families getting their wages back to where they are growing with the economy, better paying jobs for American workers, and a fiscal picture that looks a lot more manageable than the one we face today.

Economic growth is key to so many things that affect Americans' lives on a

daily basis. We in the Senate ought to be focused like a laser on what we can do to put the right policies in place that would encourage and promote economic growth, rather than coming up with new ways to make it more difficult and more expensive in this economy to create jobs. Far too often, everything that happens in Washington, DC, today leads to more expenses, more mandates, more requirements, more regulations, and higher taxes, making it more difficult for our economy to get to that faster growth that is so important if we are going to make Americans' standard of living and quality of life better and hand off to the next generation a standard of living they deserve and that will improve on the one we enjoy today. That is what this is all about, and that is what we ought to be focused on.

I am pleased the Senator from Alaska is here. I am told the Senator from Indiana will be joining him in just a minute to discuss the subject. The Senator from Alaska, Mr. SULLIVAN, has been a great advocate of growth in our economy and has been down on the floor talking about the implications of a half percent of growth and what that means; that if we don't change that trajectory and change it soon, we are going to continue down a path that makes it more and more difficult for American families to get ahead. That needs to change—faster growth, higher growth, the right kind of policies—to make that possible.

Mr. President, I yield the floor.

The PRESIDING OFFICER. The Senator from Alaska.

Mr. SULLIVAN. Mr. President, I compliment my good friend from South Dakota, the chairman of the Commerce Committee, for coming down and leading the discussion on a very important topic that, to be honest, we are not talking about nearly enough in the Senate—and certainly the Obama administration is not talking about nearly enough—and that is the importance of our economy.

I was on the floor a couple weeks ago and I made a prediction. I said there is going to be big economic news coming out, and my prediction was that nobody in the administration was going to talk about it and none of our friends in the media were going to talk about it. Unfortunately, my prediction came true.

The big news, as Chairman THUNE said, is that last quarter we grew at 0.5 percent GDP growth. We essentially didn't grow. We didn't grow. The great American economy, the thing that has made us great as a country for 200-plus years, just stalled—and nobody talked. The Obama administration didn't talk about it. The media didn't talk about it.

When we talk about gross domestic product, this is essentially the health of the economy. It is the measure of opportunity in America. Unfortunately, what we saw last quarter was additional proof that the Obama ad-

ministration on this critical issue—economic growth for our citizens—is one of the worst in U.S. history. It is not just me saying that. People should take a look at these numbers. These numbers are actually from the administration and other administrations. This looks at recent economic growth for the last 50 years, starting with President Kennedy's administration, but as my colleague from South Dakota said, the average growth for the United States in our 200-plus-year history has been about 3.7 percent GDP growth.

We look at this chart—and this is very bipartisan, of course—almost 4 percent GDP growth average for the country. This is what has made us great, strong. We look at this chart, and it shows the ups and downs. This red line is 3 percent GDP growth, which is considered pretty good. It is not great but pretty good. We certainly should be targeting that.

Look at the Obama administration right here in the corner. It has never even hit 3 percent GDP growth—not once, not even in one quarter—ever.

What we are seeing right here, in the almost 10 years of President Obama, relative to any other administration, Democratic or Republican—Johnson, Nixon, even Carter, Reagan, Clinton, real strong growth there—clearly, the Obama administration has been, by any measure, a lost decade of economic growth. Unfortunately, you don't hear the administration talking about it at all. You can understand why. It is an abysmal record. But the truth is, if you look back in history and that news came out—whether it was a Democratic or Republican administration—the Secretary of the Treasury would have said: Don't worry America, we know you are hurting; we have a plan. The Secretary of Commerce would have said: We have ideas on growing the economy; we know that 0.5 percent GDP growth—essentially flat growth, no growth—is not the historical tradition of America. Historically, Cabinet members in any administration would have told us: We know it is a problem, and here is how we are going to fix it.

When this news came out 2 weeks ago, we heard nothing from this administration—nothing. When they do talk about the economy, there are typically three types of responses: One is, as my colleague from South Dakota mentioned, there is this talk in Washington about the "new normal." In my view, it is one of the most dangerous phrases being bantered about in DC. The new normal says that we know America has been growing at this robust rate, almost 4 percent GDP growth for most of our history, but there are new factors, and we should not expect that anymore. We shouldn't even expect 3 percent. Let's just dumb down our expectations.

They talk about the new normal. The new normal should be about 1.5, 2 percent GDP growth, maybe. The people in Washington are telling the rest of

the country: You guys should be satisfied with that. We shouldn't be. That is a surrender of the American dream. So that is one response—the new normal.

The second thing the President has done for a while, but he can't do it anymore, unfortunately. He has looked around the world and said: Well, at least we are growing better than Europe or Japan or Brazil. Really, the only measure that actually matters is not another country; it is how do we stack up against America? He does not want to talk about that, so he talks about Europe. He can't talk about Europe anymore because we are growing at 0.5 percent GDP growth, and last quarter Europe grew at 2.2 percent. It is not great, but it is certainly better than ours. Obviously, they have to get rid of that talking point.

The third thing they do is come out and try to tell us: Hey, you know what, you are actually doing better. I know you are feeling horrible and your wages haven't gone up, but you are doing better, trust me.

In a New York Times article, the President recently lamented that, looking back, he didn't sell all the great stuff he was doing on the economy. He didn't sell it better. I don't think he needs to sell it. Most people feel it, and it is not great. He even said:

Anybody who says we are not absolutely better off today than we were just seven years ago, they're not leveling with you. They're not telling the truth. By almost every economic measure, we are significantly better off.

I think it is astounding that the President of the United States is saying that kind of stuff to the American people because it is simply not true.

Let me provide some facts. The story they tell is of a country that by almost every economic measure is actually worse off than we were when the Obama administration started. In the past 8 years, the labor force participation rate has slid to its lowest measure since the mid-1970s. Essentially, that is people who have quit looking for a job because they can't find one.

According to the most recent census data, the percentage of Americans below the poverty line in the last 8 years has grown. It is up almost 4 percent. Real median household incomes in the last 8 years have declined from \$54,900 to \$53,600. Since the President took office, food stamp participation has actually soared. It is up by almost 40 percent. The percentage of Americans who own homes—a marker of the promise of the American dream—is down 5 percent. This is all in the 8 years, 7½ years, since President Obama has been in office.

The late Vice President Hubert Humphrey once said:

Propaganda, to be effective, must be believed. To be believed, it must be credible. To be credible, it must be true.

No matter how much this administration uses soaring speeches or articles from media sources that have been favorably disposed toward them or

clever tweets insisting that the economy is doing well, it simply is not. These are the facts, and Americans know it. Americans know it.

We are spending more on housing and food. Wages are stagnant. As I have mentioned, many have given up looking for good jobs. Some are questioning the ability to put their kids through college.

What is interesting is that Washington, DC, is doing fine. When you grow the government the way we have in the last 8 years, this part of the country actually never had a recession. It is not one of the richest places in America, right here in Washington, and that is why so many in the DC press corps weren't writing about this. The President says the economy is doing well, so it must be doing well.

I think the good news is that even now the media is starting to pick up on this because the problem is so pervasive. In this election season, this is what we are hearing Americans talk about.

Here is a heading from a recent Atlantic article: "The lonely poverty of America's white working class." Here is another one from the same publication: "The Resurrection of America's Slums." Here is one from another publication: "Poverty in America: the Deepening Crisis."

Recently, there have been numerous articles about how poverty leads to addictions and to higher mortality rates. The New Yorker had an article entitled "Life-Expectancy Inequality Grows in America."

The Washington Post is now starting to do some heartbreaking stories about poverty, death, and economic despair in our great country. Talking about the recent West Virginia primary election, the Washington Post stated: "But many poorer, less-educated folks who have been left behind in the 21st century—the ones who have seen their wages stagnate, their opportunities for upward mobility disappear and their life expectancies shorten—are looking to disrupt a status quo that has not worked for them."

What does this mean for our great country, our citizens? One indication is, in poll after poll, Americans are telling us they are running out of hope. Sixty-five percent of Americans now believe the country is on the wrong track. That is not surprising. We never hit 3 percent GDP growth in the last decade.

The vast majority of Americans don't believe their kids are going to be better off than they are. They are telling us that the quality that has made America great, the quality that is in the DNA of the United States, and that is progress, is losing out to this idea of the new normal. It is a new normal where our children are not going to be better off than we are, where we can't grow the economy. The American dream is all about progress. We need to remember that. We can't settle for another lost decade of economic growth. We can't settle for stagnation.

A number of my colleagues, particularly on the other side of the aisle, come to the Senate floor—and I have respect for everybody in this great body—and they talk about the moral imperatives they believe are important, moral imperative on this topic, moral imperative on another topic, but they rarely talk about the moral imperative of growth and opportunity. To me, that is the biggest moral imperative we have, with the exception of national defense in this body.

It is a moral imperative to recognize that we have experienced a lost decade of economic growth. We have a moral imperative to talk about the pervasive poverty, what that does to our citizens, how it creates holes in the social fabric that holds us together, and how, when our own citizens fall through those holes, a piece of all of us goes with them because although we are individuals, we are all Americans together.

We have a moral imperative to tell our fellow citizens that working together we don't have to accept this, the new normal. We have the moral imperative to lift up American workers with policies that actually help them.

Like most Americans, I was shocked when Presidential candidate Hillary Clinton said that under her administration she would put coal miners out of work. Here is the quote: "We are going to put a lot of coal miners and coal companies out of business." That is shocking. Think about that. I come from a State where there is a lot of mining. These are great jobs. These are important jobs. These are important for the national economy of America. To have a candidate say that she intends to put coal miners out of work is part of the problem.

As Senator THUNE mentioned, the other part of the problem is that Washington is no longer a partner in opportunity for coal miners, for workers, for growing the economy, but it has become an obstacle.

We have to do a lot to get this economy moving. My colleague from South Dakota mentioned a number of ideas. We are going to be on the floor talking about them—the moral imperative to provide economic opportunity and hope for Americans.

One thing for certain we have to do is get control of the Federal Government that wants to regulate every single aspect of our lives and economy. This is a chart that shows how Federal rules from this town go straight up. Every year there are more. As a matter of fact, the Obama administration is going to be the first in U.S. history to have proposed in a single year 80,000 pages of new Federal regs. If you think that is going to help the coal miners or other Americans or working-class families with hope and opportunity, that is not the right solution. What we need is less government and more economic freedom and the truth about what is going on with this great economy of ours in our great country. That is what we are going to continue to do.

I yield the floor.

The PRESIDING OFFICER. The Senator from Indiana.

Mr. COATS. Mr. President, I thank my colleague from Alaska, Senator SULLIVAN, for what he just presented to us here. He hit the nail right on the head. Along with our colleague from South Dakota, I want to add my voice to what has been said here.

As chairman of the Joint Economic Committee, we pay a lot of attention to the state of the economy. We are presented with numbers and facts about where we are as a nation. The refrain that is becoming all too familiar; that is, we really are in a stagnant position, not going anywhere.

Of all the statistics that come to us, two stand out here just recently. One is the fact that the April jobs report was significantly lower than it needs to be in order to provide meaningful jobs for Americans who are searching for jobs, and for Americans trying to move from part-time jobs to full-time permanent jobs, to put some certainty into their lives. With just 160,000 jobs created in April, basically that covers those who are retiring—maybe fewer than that—but certainly not the number of new jobs that give an indication of growth in the economy. That was a disappointing number, and obviously Wall Street paid attention to it. Hopefully it won't be repeated, but it is a worrying signal that we are not creating the kind of dynamic growth in the economy that will put our out-of-work individuals across this country back to work, that will provide opportunities for our young people who are graduating from college and high school this month and next month. That is nowhere near the number of jobs we need to even reach an average growth rate over the years, as my colleague from Alaska said.

I think we have had eleven major recessions from World War II to the present. The recovery rate out of each of those recessions has been at 4 percent. That rate of growth provided new hope for the people who lost their jobs and new hope for those coming out of educational institutions to secure a good job and begin the process of building a family, buying a home, and living the American dream. Yet this recovery—from a recession that began in late 2007 with the collapse of Lehman Brothers and the bank failures has been long. It was a deep recession. And it has taken a considerable amount of time to get moving in the right direction.

Clearly, after the last 7½ years of the Obama administration, we have not begun to achieve the kind of recovery that has been the average of all the recoveries since the end of World War II. We've been about half of that, and because the recoveries have been half of that, we have not been able to provide opportunity for the American people.

I think what we have seen here can best be defined as a result of the failed policies by this administration. We

have policies that have raised taxes significantly on the American people even though their incomes have not increased. We have had policies of overspending here in Washington to the point where our national debt—based on years of deficit spending—has almost doubled from \$10.7 trillion when this administration began to over \$19 trillion after their 7½ years of governing and putting policies in place that have clearly failed.

You can come to no other conclusion, despite what the White House puts out. The American people know better because their situation is in contrast to the White House saying that things are going well and that we are on the march forward. When the American people compare that with their situation, there is no comparison to be made whatsoever.

Deficit spending, plunging into debt, and overregulation are burdening innovators and burdening businesses from having the ability to expand their business. Overtaxing and clearly overspending. Those three policies determine economic growth.

I have had the great privilege of representing a State that has done just the opposite. Under Republican leadership, our State has controlled spending, controlled regulations, and put innovative processes in place that have allowed our State to thrive and grow. We came out of a deep deficit situation some years ago and have turned that around to the point where we now have a triple-A credit rating. We went from deficit spending, which caused borrowing, to a surplus well over \$2 billion. We have become an attractive State to live and do business in.

Let me state a couple of things that have been said about our State. Chief Executive Magazine recently named Indiana one of the top five States in the Nation for business. The magazine asked 513 chief executive officers to rank the States they were familiar with on tax and regulatory regime, workforce quality, and living environment. Let me state a couple of their quotes.

Indiana . . . has its act together and is impressive.

Indiana . . . has consistently ranked in the top 3 in offering not just competitive incentives for business, but also packages that improve the skill sets to hire a qualified, work-ready workforce.

Don Brown, chief executive officer of Indianapolis-based Interactive Intelligence, Inc., recently said that the State's low costs and low taxes allow job creators to invest more resources into their businesses and their employees. He went on to say:

Limited regulations make it easy to grow here, freeing up time, which is perhaps an entrepreneur's most coveted gift. . . . We have great universities turning out lots of talented graduates. . . . The public and private sectors work effectively together in an effort to improve conditions for everybody.

How I wish that quote would reflect what is happening here in Washington. How I wish I could use that quote to

say this is what is happening across the United States. I wish I could use that quote to be able to say that under the direction of this President and with the support of this Congress, we have reined in our overspending, tamped down our overregulation, put incentives in place to create jobs, and put policies in place that to create economic growth. Unfortunately, that is not the case, as has been made clear by my colleagues, and the case I am trying to make now.

The contrast between a geographic entity called a State and the Federal Government and the policies which govern that State and govern our Federal Government in the three areas of taxation, regulation, and spending is dramatic. Why wouldn't we look at the States that have succeeded? Why wouldn't we look to the policies implemented by a State that has succeeded and demonstrated dynamic economic growth over the same timeframe as the Federal Government, who has done exactly the opposite relative to taxation, regulation, and spending, and draw the clear conclusion that the policies that have been implemented by this administration have failed?

Let's stop pointing fingers at what the motives are. Let's just look at the results, and the results are very clear: We have a stagnant national economy, people not receiving opportunities to increase their income. If you go back to what the average earnings in America per family were at the start of this administration, it was \$3,000 higher than it is today.

Whatever releases come out of the White House or whatever the spokesman for the President says or the President himself says just simply doesn't match up to the facts. The facts are related to the policies that either have been put in place. It is clear that in the remaining months of this administration, those policies are not going to change. Simply there is denial of the fact that the country is not growing at a rate that provides opportunity and gives us hope for the future.

But we do have a model, and my State is not the only model. We have models of States that have done exactly the opposite of that. Yes, they have regulations, but they are there for safety and health. They are beneficial and were not put in place to micro-manage how businesses operate. States have been careful with the tax dollars and revenue that come in, and they balance their fiscal budget on an annual basis. They don't throw themselves ever deeper into debt. They recognized that is not the path to growth, and they spend the taxpayers' money wisely.

Overtaxation, overregulation, and overspending clearly are not the path to economic growth. It is clear that the path is just the opposite of that.

In the remaining months I have here, I will keep talking about this issue. I hope my colleagues will pay attention and make decisions on the basis of fact,

not on the basis of ideology or what they have been told by the administration or the President. They need to look at the results, and the results are dramatic in terms of application of the basic principles that stimulate economic growth and provide hope for the American people.

With that, I yield the floor.

The PRESIDING OFFICER. The Senator from Maine.

BIPARTISAN STUDENT LOAN CERTAINTY ACT

Mr. KING. Mr. President, when Senators rise on this floor, typically we are identifying problems, we are talking about how to solve them, and we are talking about how prior actions haven't quite worked. Today I have the pleasure of rising for the opposite reason. I am here to talk about something that has worked, something that we did, something that we worked on together on a bipartisan basis that has made an enormous difference for the students of our country.

In the spring of 2013, there was an impending deadline. The interest rate on student loans, which in the past had been set by statute by Congress without regard to what the underlying economics were at the time or what the borrowing rate of the Federal Government was—it was an arbitrary number set by Congress, and it was due to double. In July of 2013, it was due to double to 6.8 percent.

There was a proposal put forward by the leadership and by the Members on this side of the aisle which did not get sufficient votes. There was another proposal put forth by the Senators on the other side of the aisle which also didn't get enough votes. We were left with a situation with no proposal on the floor and an impending deadline that would have doubled rates for student loans for millions of students across the country. At that point, a small, bipartisan group of us got together and said: There has to be a better way to find a solution. We can't let this happen to our students.

This is a particularly important time of the year to talk about this because this is when students are finding out where they are going to college next year, they are making their arrangements for financial aid, and they are thinking about what their commitment will be. Well, as of this afternoon, those students are going to be able to breathe a bit of a sigh of relief because we just learned that the interest rate on student loans taken out for next year based upon the cost of borrowing for the U.S. Government will be 3.76 percent. That is the lowest it has been in a decade, and it is considerably below—by almost half—what it would have been had we not come to that solution on that hot summer day in the middle of the summer of 2013.

The group of people who worked on this and put it together were, as I said, a bipartisan group. The group consisted of Senator RICHARD BURR of North Carolina; Senator MANCHIN; Senator Tom Coburn, my friend from Oklahoma; Senator ALEXANDER; Senator

TOM CARPER; Senator DICK DURBIN; and Senator Tom Harkin. We had a lot of meetings, discussions, negotiations, and ultimately worked together to determine a fair and equitable way to set the rate for student loans from the Federal Government based upon the Federal Government's own cost of borrowing money and combined the best ideas from both plans. We got the strong support of the President, who encouraged the Democratic Members of our group to join in these negotiations, and we reached a consensus. The Bipartisan Student Loan Certainty Act passed this body with something like 80 votes, and that has made a real difference for our students.

Here are some numbers: \$50 billion, \$5 billion, \$275 million. Those are the answers. What are the questions?

The first is, \$50 billion is the amount of money students will save over the next 10 years based upon the difference of what the interest rate would have been and what it is going to be. This says 3.8 percent. We made this yesterday. It is actually lower; it is 3.76 percent. But this differential over 10 years equals \$50 billion in the pockets of students across this country. That is a \$5 billion-a-year difference in what they will have to pay in interest and what they would have paid had the law not been changed. That is an enormous amount of money for our students. In the State of Maine, the New America Foundation has estimated that this translates into over \$275 million in interest savings to students just in the State of Maine.

Well, those are big numbers: \$275 million, \$50 billion, \$5 billion. So what does it mean in reality to an individual student? Here is what we are talking about. Under the old law, an individual typical undergraduate would have paid \$17,000 in interest as opposed to \$10,000. That is at least \$6,000 that goes into the pockets of our students. That is going to make a real difference.

I am delighted that we have had this success and that we have been able to report something that has actually been done right around here and then has truly benefited millions of students across this country, but we have plenty of work still to do. College is still too expensive. The burden of student debt generally is very heavy and weighs on not only the students but our economy. We need to reauthorize the Higher Education Act. We need to enact meaningful changes in the whole structure of how colleges can keep their prices affordable. We need to give students the tools they need to succeed. We also need to look at the structure of student loan programs to simplify, A, how you apply, and B, how you pay them back, how the structure is, and have simple, easily understood techniques to pay back according to your means, according to what you are earning at the time, an earnings-based repayment schedule so that students don't exit college with this enormous burden. One student told me: Senator, I feel like I

have a mortgage but no house. That is essentially what is happening.

So what I am talking about today is truly good news, but it is not the end of the story and we should not say: Well, we have taken care of that issue. Let's move forward.

I do think every now and then it is important to acknowledge that occasionally the policies work out, and this is one that has worked out spectacularly for the students of America. Fifty billion dollars over the next 10 years will be saved by students who would otherwise be paying that money in interest, and that is money they can invest in their own futures and so can make a better life for themselves, their families, and our country.

I appreciate the opportunity to acknowledge the work that was done by this entire body and by the House and by the President to resolve what would have been a true crisis for our students and to move it toward a much more manageable solution. I look forward to continuing to work on this issue and to keeping in touch with Chairman ALEXANDER and Members of this body who are interested in continuing to work on this issue of the cost of college and how student loans are structured in order to make them work most effectively and fairly for the young people of this country.

Mr. President, I yield the floor.

I suggest the absence of a quorum.

The PRESIDING OFFICER. The clerk will call the roll.

The senior assistant legislative clerk proceeded to call the roll.

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

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

AMENDMENT NO. 3888

Mrs. FISCHER. Mr. President, I rise today to discuss my amendment No. 3888. I am proud to join my colleagues from Nebraska, Kansas, and Colorado to offer this bipartisan amendment. Our three States are signatories to the Republican River Compact, which allocates the water resources from the Republican River Basin as it travels across our States.

Through this allocation process, our States work closely with the Republican River Compact Administration and the Bureau of Reclamation to help ensure the most efficient utilization of our waters as they head to families and businesses across the region. In Nebraska we value clean water. Our citizens go to great lengths to preserve and protect these resources.

However, in recent years, the Bureau of Reclamation has violated administrative orders issued by Nebraska, Kansas, and Colorado with no justification for their actions. This lack of accountability from the BOR is costing money. It is limiting citizens' access to precious water resources.

Our bipartisan amendment that is before us would halt funding for the BOR when it violates State orders. Federal

law already requires the BOR to comply with the States through interstate compacts. Our amendment would hold this agency accountable for its actions. Our States have a right to manage their own water resources for the benefit of compact compliance.

But through its action, the BOR has effectively altered those compacts. This agency was not created to operate unilaterally and exert veto power over the decisions States make to comply with compacts. Our amendment will ensure that Nebraska, Colorado, and Kansas retain control of their waters. It will protect other States that have these interstate compacts from the consequential actions of an unaccountable Federal agency.

Nebraska and its neighbors in Kansas and Colorado are good stewards of natural resources. We protect our water. We protect it at the State and the local levels. These States should be free to preserve their resources without unjustified intervention by the Federal Government. I urge all of my colleagues to consider this amendment, to consider the impact of a Federal agency overreaching and violating the rights of States to determine how to control, how to manage, how to work together, and how to work within compacts in order to meet the obligations they have.

I yield the floor.

I suggest the absence of a quorum.

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

The senior assistant legislative clerk proceeded to call the roll.

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

The PRESIDING OFFICER (Mr. TOOMEY). Without objection, it is so ordered.

DEPARTMENT OF EDUCATION RULEMAKING

Mr. ALEXANDER. Mr. President, I have come across an embarrassing situation. The U.S. Department of Education has apparently earned an F from the nonpartisan Congressional Research Service in its first attempt to write a regulation under the new law fixing No Child Left Behind that passed this body with 85 votes last year, passed the House overwhelmingly, and that President Obama signed into law in December calling it "the Christmas miracle."

Most of us will remember this law. I know the Senator from Pennsylvania had a major role in some provisions in it. This was a law to fix a law that everybody wanted fixed. It was 8 years overdue.

The law that needed to be fixed was called No Child Left Behind. Over the last several years, what had happened was that the U.S. Department of Education had become, in effect, a national school board. Everybody was upset with how much those who worked in the Department of Education were telling teachers, school boards, states, and students in 100,000 public schools what to do. They were telling them what to

do about how to evaluate teachers, what to do about what their academic standards should be—adopt common core—telling them what to do about how to use test scores, and saying how to fix a school that might be in trouble. There are seven defined ways to fix a troubled school. People grew so upset with it that we had a massive bipartisan uprising in the Congress.

It is not easy to get 85 Senators on behalf of a big complex piece of legislation, but we did. The Wall Street Journal said that it was the largest transfer of power from Washington, DC, to the States in 25 years. Almost everybody liked it except some people in the U.S. Department of Education, who set about almost immediately to try to rewrite the law as if they had actually been elected to something.

We anticipated that. In this law we took the extraordinary step—we in Congress who under article I of the Constitution are elected to write laws—to write prohibitions into the law.

For example, in the law there is a specific provision that said the U.S. Department of Education may not tell Tennessee or Pennsylvania or any other State what its academic standard must be specifically. It may not tell it that it must adopt common core. That is in the law. That is a specific prohibition.

What I want to talk about today is a report by the Congressional Research Service that Congressman KLINE, chairman of the House Education and the Workforce Committee, and I released today that says in the very first attempt by the Department to write a regulation implementing the new law, they flunked the test. Those are my words, not those of the Congressional Research Service, but their words are nearly as plain as mine.

A new report by CRS says that their proposed “supplement not supplant” regulation goes beyond “a plain language reading of the statute” and is likely against the law.

Congressman KLINE said:

The administration spent years dictating national education policy and failed to deliver the quality education every child deserves. Now, the department seems determined to repeat its past mistakes. There is no question this regulation would violate both the letter and intent of the law, and it must be abandoned. Congress and the administration promised to reduce the federal role and restore local control, and we will use every available tool to ensure that promise is kept.

Mr. President, I know, Congressman KLINE knows, and the Members of this body know that a law is not worth the paper it is printed on unless it is implemented properly. I am determined, as the chairman overseeing the Committee on Education, to make sure that this law is implemented properly.

We will have this year six hearings on implementation of this law. There is a coalition of organizations that includes the Nation’s Governors, the National Education Association, the

American Federation of Teachers, the Council of Chief State School Officers, and others. These are people who don’t always agree on education policy. They helped pass this law, and they are equally determined to make sure it is implemented correctly.

They are not just working at a national level. The Governors in Tennessee and in other States are working with coalitions of those same organizations to make sure the law is implemented properly.

On April 12, we had a hearing in the Education Committee, and I talked with the newly confirmed Education Secretary about this. I urged the President to appoint an Education Secretary because I wanted someone there who was accountable to the Senate, and he was confirmed. His responsibility is to discharge his duties faithfully according to the law, but based upon this first regulation, no one seems to be taking that seriously.

Let me be specific about it. There is a provision in the law that goes back to about 1970 that says that if you are going to get money from the Federal Government—we call that title I money—that you have to provide at least comparable services with state and local funding in schools that get the money and schools that don’t, except that teacher salaries may not be included in that computation. That is in the law. That has been there for decades now.

Now we had a debate in our committee and on the floor about whether we should change that law. The Senator from Colorado, Mr. BENNET, feels very strongly about it. He said that we ought to change the law to say that teachers’ salaries should be included in comparing spending in title I schools and non-title I schools. I had a different proposal. I said: Well, I agree with your point, Senator BENNET, but my proposal I would call Scholarship for Kids. Let’s just take the Federal dollars in Tennessee, Pennsylvania, or Maryland and let the States decide to create \$2,100 scholarships—the amount it could be—and follow each low-income child to the school that the child attends. Neither Senator BENNET’s proposal nor my proposal could be adopted by the Senate. So we did not change the law.

We then put specifically into the law a provision that said to the Department of Education that it may not write a regulation in such a way that requires parity or equal spending among school districts. That is in the law as well. Yet what happens? In the first regulation that the Department of Education sought to do in what we call a negotiated rulemaking process, they came up with a scheme, because as the departing Secretary said, his lawyers are smarter than the people in the Senate or the people who work here. They came up with a scheme and requirements that would violate the law, and the method they chose to require is prohibited by another provision in the

law. I don’t call that being clever. I call that just ignoring the law, and I am not going to put up with it. I am not going to allow the Department of Education to sit here and watch us in both bodies of Congress—by big bipartisan majorities and supported by Governors, as well as teachers unions—decide that we don’t want Washington dictating every little thing that happens in the schools, and as soon as the President himself signs the law, they start rewriting it over in his own Department.

If this one provision, this rule that the Department came up with, were adopted, these are some of the consequences.

It would, No. 1, require a complete costly overhaul of almost all of the State and local finance systems in the country. Maybe they need to be overhauled, but we did not decide that they needed to be, and no one is elected in the Department of Education to require that.

No. 2, it would require the forcing of thousands and thousands of teachers to transfer from one school to another school. Perhaps they should transfer, but there are 100,000 public schools and there are 3.5 million teachers, and we did not decide in our law that they had to transfer, and the Department can’t decide that either.

It would require States and local school districts to move back to the burdensome practice of detailing every individual cost on which they spend money to provide a basic educational program to all students, which is exactly what we were trying to free States and districts from under the law. We heard from superintendents and from school boards that this nit-picking, “mother may I” approach of the Department bureaucrats was wasting the time of superintendents, school boards, and teachers. So we wrote more flexibility into the law. The Department now wants to take it back.

According to the Council of the Great City Schools, this new proposed rule would cost \$3.9 billion just for the 69 urban school systems to eliminate the differences in spending between the schools.

Mr. President, I ask unanimous consent to have printed in the RECORD following my remarks a copy of a statement that Congressman KLINE of Minnesota, the chairman of the House Education Committee, and I made concerning the report of the Congressional Research Service that says likely that the Department has “exceeded its statutory authority and appears to go beyond what would be required under a plain language reading of the statute.”

I ask unanimous consent to have printed in the RECORD following my remarks a statement I made in connection with the April 12 hearing with our Education Committee in the Senate, when Secretary King testified.

I ask unanimous consent to have printed in the RECORD following my remarks an editorial from the Wall

Street Journal entitled “Obama’s Ed-Run” that was published on April 18 of this year.

The Wall Street Journal said, among other things, that “the administration is now rewriting the parts of the law it doesn’t like.” A law passed with big bipartisan majorities.

This is an intolerable situation. This is a complete flouting of the specific bipartisan intent of large majorities of the Senate and the House by a small group of people in a single department who know better than to do this. They know better than to do this. They are ignoring what we have written into law.

They are not elected to anything. If they would like to be in the Congress or the Senate, they can resign their positions and the elections come up this year. They can run, and they can try to change the law. It took us 8 years to debate. We debated these provisions with very good people. The Senator from Colorado, who weighed in on this whole question of parity of spending between school districts, is a former distinguished superintendent of the Denver school district. He feels very passionate about it. I used to be the U.S. Secretary of Education myself. I have a different proposal about how to fix it, and I feel pretty passionate about it. But I feel even more passionate that if we are going to decide the answer to the question, we are going to decide it here, and it is not going to be decided down the street by regulations that are not authorized by law and in a method that is specifically prohibited by the provisions of a law that was signed by the President in December.

So this is the first such regulation, but there will be more. I would hope that the Secretary of Education and the men and women who work for him would stop and take a deep breath and realize that we were serious when we passed this law, that we have the broad support of the entire education community across the board, and that I am not going to rest until I make sure that this law is implemented in the way it was written. That means that we are going to continue to hold the remainder of our six hearings this year. I am going to work with the coalition of Governors, teachers organizations, chief State school officers, and others to put a spotlight on the Department. I am going to urge the State departments of education to begin to write their own state education plans, which they then later submit to the Department in order to obtain their Federal dollars under the law. Then, if the regulations are not consistent with the law, I don’t believe they should follow them. That means the State should ask for a hearing. And if the Department persists, then the State should go to court to sue the Department.

If the Department persists, we have our own remedies in the Senate and the House of Representatives. We have something called the Congressional Re-

view Act. It only takes 51 of us to overturn a final rule that we believe is not consistent with the law. We can do that. I will be at the head of the line in trying to do it. We have an appropriations process. The U.S. Department of Education has to come before us and be accountable to us for all of the money they receive.

I expect from here on out for those who write the rules to follow the law. It is not just me saying this, it is not just Congressman KLINE saying this, we have the nonpartisan Congressional Research Service that has examined this regulation. I hope my colleagues will look at this report. They have concluded that the regulation the Department proposed does not follow the plain language reading of the statute that was enacted and signed into law only last December, and is likely against the law.

This is the first shot across the bow, as far as I am concerned. I am going to be watching every single one of these regulations. I hope this does not happen a second or third time or there will be a large number of us seeking to do anything we can do to make sure the law is implemented the way it should be.

This was the most important law passed by the U.S. Congress last year. It affected 50 million children, 3.5 million teachers, and 100,000 public schools. It restored to the people closest to the children the authority for dealing with those children. Everybody wanted that. Virtually everybody wanted that except a few people in the U.S. Department of Education who cannot keep their hands off America’s 100,000 public schools. They need to do that. They need to learn to do that. They are supposed to create an environment in which teachers, students, and school boards can succeed; they are not supposed to serve as a national school board.

Congressman KLINE, the chairman of the House committee, and I released this report today. I call it to the attention of my colleagues. I call it to the attention of the Governors, teachers, organizations, and all who care about our schools.

I can guarantee you that we are going to keep our eye on the ball and make sure that future regulations are within the authority of the law we passed and that this law—the most important law passed last year by this Congress and signed by the President—is implemented the way Congress wrote it.

Mr. President, I yield the floor.

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

ALEXANDER, KLINE: NONPARTISAN GOVERNMENT ANALYSIS CONFIRMS EDUCATION DEPARTMENT’S PROPOSED REGULATION IS AGAINST THE LAW

WASHINGTON, May 11.—A new report by the non-partisan Congressional Research Service (CRS) finds the Department of Education’s proposed “supplement not supplant” regula-

tion goes beyond “a plain language reading of the statute” and is likely against the law.

The CRS report was prepared in response to broad congressional interest in the proposed regulation on the new law that replaced No Child Left Behind and whether the department has the legal authority to issue the regulation. The report found that the department’s “interpretation appears to go beyond what would be required under a plain language reading of the statute,” and that proposed regulation “appear[s] to directly conflict with this statutory language, which seems to place clear limits on [the Education Department’s] authority.” The CRS report also states that a “legal argument could be raised that [the Education Department] exceeded its statutory authority if it promulgates the proposed [supplement not supplant] rules in their current form.”

Senate education committee Chairman Lamar Alexander (R-Tenn.) said: “This report from the non-partisan Congressional Research Service confirms that what the Education Department is proposing is against the law. So now Congress has told the education secretary it’s against the law, a government agency has researched it and said it’s against the law, and members of the negotiated rulemaking committee who rejected it said it was against the law. I will use every power of Congress to see that this law is implemented the way Congress wrote it.”

House Education and the Workforce Committee Chairman John Kline (R-Minn.) said: “The administration spent years dictating national education policy and failed to deliver the quality education every child deserves. Now, the department seems determined to repeat its past mistakes. There is no question this regulation would violate both the letter and intent of the law, and it must be abandoned. Congress and the administration promised to reduce the federal role and restore local control, and we will use every available tool to ensure that promise is kept.”

In writing the new law last year, Congress debated and ultimately chose to leave unchanged a provision in the law often referred to as “comparability.” This provision in the law says school districts have to provide at least comparable services with state and local funding to Title I schools and non-Title I schools.

A separate provision, known as “supplement not supplant” or SNS, is intended to keep local school districts from using federal Title I dollars as a replacement for state and local dollars in low-income schools.

The department’s proposed supplement not supplant regulation attempts to change comparability by forcing school districts to include teacher salaries in how they measure their state and local spending and require that state and local spending in Title I schools be at least equal to the average spent in non-Title I schools.

The department proposed the regulation to a negotiated rulemaking committee in March, but the committee could not reach agreement on the proposal. Wisconsin Superintendent Tony Evers, a member of the rulemaking committee, warned that “Congressional intent isn’t necessarily being followed here.”

On the question of the department’s legal authority for its regulations, CRS says: “The Supreme Court often recites the ‘plain meaning rule,’ that, if the language of the statute is plain and unambiguous, it must be applied according to its terms. Thus, if the language of the statute is clear, there is no need to look outside the statute to its legislative history or other extrinsic sources in order to ascertain the statute’s meaning or underlying congressional intent.”

"In the draft proposed rule . . . the Education Department (ED) provided only a limited discussion of how this statutory language gives ED the legal authority to require parity in expenditures in Title I-A and non-Title-I-A schools. According to ED, the reason that the proposal requires that Title I-A schools receive at least as much in state and local funding as non-Title I-A schools is 'so that Title I funds can provide truly supplemental support in Title I schools.' . . . On its face, however, the plain language of the SNS provisions does not appear to require such a result. Notably, the statutory language does not establish any type of standard or requirement regarding how to demonstrate that a Title I-A school receives all of the state and local funds it would have received in the absence of Title I-A funds. . . . ED's interpretation appears to go beyond what would be required under a plain language reading of the statute."

On the question of whether the law specifically prohibits the department from requiring equalized spending, the report says: "(The Every Student Succeeds Act) retained the Title I prohibition that states: 'Nothing in this title shall be construed to mandate equalized spending per pupil for a State, local educational agency, or school.' The proposed SNS regulations, however, appear to directly conflict with this statutory language, which seems to place clear limits on ED's authority. This prohibition against equalized spending thus raises significant doubts about ED's legal basis for proposing regulations that would require Title I-A per pupil expenditures to meet or exceed those of non-Title-I-A schools. . . . Congress's decision to expressly prohibit ED from requiring equalized expenditures among schools indicates that Congress did not intend to impose such a requirement in the SNS context, particularly in light of the absence of explicit language to the contrary."

On the question of Congressional intent for the department to address comparability, the report says: "Meanwhile, the legislative history behind Title I's comparability provisions raises similar questions about ED's legal authority to establish the proposed SNS regulations in their current form. Over the eight-year period during which Congress considered a comprehensive reauthorization of the ESEA, several bills and amendments were introduced that would have modified the comparability provision to require that actual school-level expenditures be used in the determination of comparability, but none of these proposals have been adopted. Most recently, during consideration of S. 1177 in the Senate Health, Education, Labor, and Pensions Committee, Senator Michael Bennet offered and withdrew an amendment to require that comparability determinations be based on state and local per-pupil expenditures (including actual personnel and non-personnel expenditures). Ultimately, the ESSA, which comprehensively reauthorized the ESEA, did not make any changes to the comparability requirement, leaving in place the statutory prohibition on the use of staff salary differentials for years of employment when determining expenditures per pupil from state and local funds or instructional salaries per pupil from state and local funds. In other words, the ESSA did not alter the existing statutory language that prohibits the use of staff salary differentials for years of employment when determining expenditures per pupil from state and local funds or instructional salaries per pupil from state and local funds in making comparability determinations.

"Thus, the proposed SNS regulations appear to effectively require (local educational agencies) to use actual teacher salaries for SNS purposes despite the fact that the ESSA

did not address this matter. Because a reviewing court could view this legislative history as relevant evidence of congressional intent to maintain current statutory requirements related to comparability determinations, a court could potentially conclude that ED lacks the statutory authority to attempt to impose a similar requirement via other methods, including promulgation of the proposed SNS regulations."

The report concludes: "Based on the plain language of the above provisions in conjunction with the legislative history and the statutory scheme as a whole, it therefore seems unlikely that Congress intended section 1118(b) to authorize ED to establish regulations that would require Title I-A per-pupil expenditures to meet or exceed those of non-Title-I-A schools. Given some of the concerns identified above, it seems that a legal argument could be raised that ED exceeded its statutory authority if it promulgates the proposed SNS rules in their current form."

[From the Senate Committee on Health, Education, Labor & Pensions]

CHAIRMAN ALEXANDER: ALREADY "DISTURBING EVIDENCE" THAT EDUCATION DEPARTMENT IS IGNORING THE NEW LAW

WASHINGTON, DC, April 12.—Chairman Lamar Alexander (R-Tenn.) today said there is already "disturbing evidence" that the Education Department is ignoring the law that Congress passed in December and told the Education Secretary he would use "every power of Congress to make sure the law is implemented the way we wrote it."

Alexander said that in a negotiated rule-making session, "your department proposed a rule that would do exactly what the law says it shall not do . . . Not only is what you're doing against the law, the way you're trying to do it is against another provision in the law."

Alexander was chairing the second of six planned oversight hearings on the law passed last year to fix No Child Left Behind. Education Secretary John King was today's witness.

"As Secretary, you have sworn to discharge your duties faithfully, and in your confirmation hearing, you said you would 'abide by the letter of the law.' The importance of the hearing today is to make sure that you and your employees are doing just that," Alexander said.

In writing the law last year, Congress debated and ultimately chose to leave unchanged a provision in the law often referred to as "comparability," first put in there in 1970, that says school districts have to provide at least comparable services with state and local funding to Title I schools and non-Title I schools.

The law specifically says that school districts shall not include teacher pay when they measure spending for purposes of comparability.

At today's hearing, Alexander said: "To accomplish your goals on comparability, you are using the so-called 'supplement not supplant' provision that is supposed to keep local school districts from using federal Title I dollars as a replacement for state and local dollars in low-income schools.

"The department is forcing school districts to include teacher salaries in how they measure their state and local spending and require that state and local spending in Title I schools be at least equal to the average spent in non-Title I schools."

THE CHAIRMAN'S PREPARED REMARKS ARE BELOW

Mr. Secretary, I urged the president to nominate an Education Secretary because I thought it was important to have a confirmed Secretary when the department was

implementing the new law fixing No Child Left Behind.

As Secretary, you have sworn to discharge your duties faithfully, and in your confirmation hearing, you said you would "abide by the letter of the law."

The importance of the hearing today is to make sure that you and your employees are doing just that.

Last year this committee worked to pass a bill that fixed No Child Left Behind. The legislation signed by the president passed the House 359-64. It passed the Senate 85-12. The president called it a Christmas miracle.

The reason we were able to achieve such unusual unanimity and consensus is that people had gotten tired of the Department of Education telling them so much of what they ought to be doing.

It wasn't just Republicans or governors who were fed up, it was school superintendents, teachers, principals, parents, state legislatures, school boards, and chief state school officers.

There hasn't been a broader coalition that's helped to pass a law in a long time.

The Department of Education had become a national school board, telling Washington state how to evaluate teachers, telling Kansas what their standards must be, and telling Tennessee how to fix failing schools.

The legislation we passed got rid of all that. And then—it went further—to the extraordinary length of putting in statute explicit prohibitions on the department in anticipation of another effort at regulatory overreach.

It's a dramatic change in direction for federal education policy—the Wall Street Journal read it and said it's the "largest devolution of federal control to the states in a quarter-century."

But it isn't worth the paper it's printed on if not implemented properly.

Today, we're holding our second hearing of at least six to oversee the implementation of this law and already we are seeing disturbing evidence of an Education Department that is ignoring the law that each of this committee's 22 members worked so hard to craft.

It wasn't easy to pass a law that most of us could agree to. As I said last year, there were crocodiles at every turn.

One of them was an issue people call "comparability." They're talking about a provision in the Elementary and Secondary Education Act, first put in there in 1970, that says school districts have to provide at least comparable services with state and local funding to Title I schools and non-Title I schools.

The law specifically says that school districts shall not include teacher pay when they measure spending for purposes of comparability.

This committee has debated several times whether or not teacher pay should be excluded. Senator Bennet felt very strongly about his proposal to address this, and I felt strongly about mine.

Ultimately the United States Congress made two decisions about this issue, as reflected in the law we passed:

First, we chose not to change the comparability language in law, so the law still says teacher pay shall not be included:

Second, we added a requirement that school districts report publicly the amount they are spending on each student, including teacher salaries, so that parents and teachers know how much money is being spent and can make their own decisions about what to do with it, rather than the federal government mandating it be used in comparability calculations.

The law that the president signed in December didn't do one thing to change the law that teacher salaries not be included.

But here's what your department did on April 1—you tried to do what Congress wouldn't do in Comparability by regulating another separate provision in the law.

In a negotiated rulemaking session, your department proposed a rule that would do exactly what the law says it shall not do—that is, force districts to include teacher salaries in how they measure their state and local spending and require that state and local spending in Title I schools be at least equal to the average spent in non-Title I schools.

If your proposed rule were adopted, it would:

1. Require a complete, costly overhaul of almost all the State and local finance systems in the country.

2. Require forcing teachers to transfer to new schools.

3. Require states and school districts to move back to the burdensome practice of detailing every individual cost on which they spend money to provide a basic educational program to all students, which is exactly what we were trying to free states and districts from under this law.

4. According to the Council of Great City Schools, it would cost \$3.9 billion just for their 69 urban school systems to eliminate the differences in spending between schools.

But I'm not interested in debating today whether what you've proposed is a good idea or a bad one—the plain fact of the matter is that the law specifically says you cannot do it.

Not only is what you're doing against the law, the way you're trying to do it is against another provision in the law.

To accomplish your goals on comparability, you are using the so-called "supplement not supplant" provision that is supposed to keep local school districts from using federal Title I dollars as a replacement for state and local dollars in low-income schools.

According to a Politico story published on December 18, the former Secretary of Education said: "Candidly, our lawyers are much smarter than many of the folks who were working on this bill."

We in Congress were smart enough to anticipate your lawyers' attempts to rewrite the law.

So we included specific prohibitions in the "supplement not supplant" provision that would prohibit you from doing the very thing you have proposed.

Section 1118(b)(4), says "Nothing in this section shall be construed to authorize or permit the Secretary to prescribe the specific methodology a local educational agency uses to allocate State and local funds to each school receiving assistance under this part."; and

Section 1605, says "Nothing in this title shall be construed to mandate equalized spending per pupil for a State, local educational agency, or school."

I'll use every power of Congress to make sure the law is implemented the way we wrote it, including our ability to use the appropriations process and to overturn such regulations once they are final.

In addition, if you try to force states to follow these regulations that ignore the laws we wrote, I'll encourage them to request a hearing with the department. And if they lose, I'll tell them to take you to court.

Second, I'm not the only one who can read the law. You're going to come right up against the broad coalition of groups who helped pass this law—the governors, school superintendents, teachers, principals, parents, state legislatures, and school boards.

They've already sent you a letter saying that "Regulations and accompanying guidance should clarify how supplement, not sup-

plant is separate and distinct from maintenance of effort and comparability, and steer clear of anything that would change or modify any of those provisions beyond the statutory changes already signed into law."

Wisconsin Superintendent Tony Evers, a member of the rulemaking committee, said last week that "Congressional intent isn't necessarily being followed here."

Noelle Ellerson of the school superintendents association, says that the prohibitions in the law, "in tandem with Congress' deliberate act of leaving comparability unchanged, makes a seemingly tight case against expanding supplement not supplant."

You've testified here and in the House of Representatives that you will "abide by the letter of the law."

It's not abiding by the letter of the law to require local school districts to use teacher salaries and equalize spending between Title I and non-Title I schools when the law prohibits you from doing that.

It's not abiding by the letter of the law to use the supplement not supplant provision to achieve your goals for Comparability when Congress debated this issue and chose to not make any changes in the law.

I'm making a point of this today because we're at the beginning of the implementation of a law that affects 3.4 million teachers and 50 million students in 100,000 public schools.

I'm determined to see that the law is implemented the way Congress wrote it.

I think it's important at the beginning of this implementation to make sure that you and those who work at the department understand that.

[From Wall Street Journal, Apr. 18, 2016]

OBAMA'S ED-RUN—THE ADMINISTRATION TRIES TO DICTATE STATE AND LOCAL SCHOOL FUNDING

President Obama has no inhibitions about rewriting laws he doesn't like—even those he's signed. Witness the Administration's revision of the Every Student Succeeds Act to allow the feds to regulate state and local school spending.

The law—which passed Congress last year with large bipartisan majorities—devolved power to the states and rolled back some federal mandates. In doing so, Congress rebuffed the White House's previous attempts to direct local education policy with No Child Left Behind waivers.

Mr. Obama nonetheless hailed the law as a civil-rights success that "reflects many of the priorities of this administration." One notable achievement was giving local school districts more discretion over Title I funds, which target poor students. Federal policy dating to 1970 requires that Title I funds must supplement, rather than supplant, state and local spending.

This requirement isn't controversial, but school districts still complained that the cost of completing the federal paperwork to comply diverted resources from instruction. Congress eased the burden by letting school districts establish their own methodology to show compliance. The law also prohibited the Secretary of Education from prescribing the "specific methodology a local educational agency uses to allocate State and local funds" or mandating "equalized spending per pupil for a State, local educational agency, or school."

The Administration is now rewriting the parts of the law it doesn't like. The Education Department recently proposed assessing the local school district's compliance with the law by whether a Title I school "receives at least as much in State and local funding as the average non-Title I school."

In other words, the Administration is trying to do exactly what the law prohibits it from doing.

Progressives want to force local school districts to equalize spending among schools. Regardless of the policy merits, this is impractical since staff compensation represents more than 80% of school spending. Younger teachers with lower base salaries are more likely to work at low-income schools due to seniority rules in labor agreements and state laws.

This is why the law forbids the feds from considering "staff salary differentials for years of employment" when assessing comparability between Title I and non-Title I schools. Mandating equalized spending in Title I schools as non-Title I schools would force states to rewrite their education funding formulas and districts to redo their labor agreements.

Experienced teachers earning higher salaries might have to be forcibly transferred to low-income schools. Or teachers at Title I schools would have to be paid more. Another alternative—and the goal on the left—is to compel school districts to employ more staff at low-income schools. Alas, the quantity of employees is a poor proxy for the quality of education.

This Administration line-item veto violates both the letter and spirit of a law that was intended to reduce federal control over education rather than increase it.

The PRESIDING OFFICER. The Senator from Maryland.

AMENDMENT NO. 3871

Mr. CARDIN. Mr. President, I wish to take this time to speak on an amendment I have authored, amendment No. 3871, which will be voted on shortly—at 4:30 p.m. this afternoon.

I was listening to my friend Senator ALEXANDER. I know he was not talking about my amendment—he was talking about a different subject—but I always listen to Senator ALEXANDER because he always makes such important points. I couldn't agree with him more that laws are not worth the paper they are printed on unless they are implemented properly. That was a comment he made. That is the reason I filed amendment No. 3871.

I wish to point out that Congress passed the Fish and Wildlife Coordination Act in 1958. It was that act which requires all Federal agencies to consult with the U.S. Fish and Wildlife Service and the Department of the Interior and the head of the applicable State fish and game departments on water projects.

The concern we have today is that we have many water projects that are being initiated—it could be a dam project, a levy project being done by the Army Corps—and they are required to work with the recommendations of Fish and Wildlife as it relates to the impacts these projects have on fish and wildlife. In fact, they are not doing it. That is the reason I authored this amendment, to carry out congressional intent—not congressional intent—what we wrote into the law so that it is very clear that as part of the consultation, U.S. Fish and Wildlife and the States are to determine the potential impact to wildlife resources, describe the damages that will be caused by the project,

and develop mitigating measures to prevent those damages and improve wildlife resources. That is the current rule.

The problem is that the Federal agencies are not required to adopt the recommendations. I understand that, but they must give the recommendations full consideration, and they are not doing that today. At least they are not doing it as much as we think they should be. That is the purpose for this amendment, to make it clear that we meant what we said when we passed the law—similar to what my good friend said in regard to the education bill we passed last year.

The Fish and Wildlife Coordination Act review is a longstanding and critically important component of water resources planning. Utilization of expert recommendations in these reviews makes sense.

Let me underscore what we are talking about. Water projects are very important. I know that. I serve on the Environment and Public Works Committee, which is the authorizing committee on many of these issues, to get these water projects moving. I understand the challenges. But one of the purposes is to make sure we preserve fish and wildlife.

Every year, hunting and fishing contribute \$200 billion to our total economic activity, to our Nation's economy. It is a huge part of the reason we require that type of consultation and working together—in order that when these projects move forward, the recommendations that are made by Fish and Wildlife and our local government entities are totally consistent with our local communities, that they are heeded and taken into consideration so that we not only get the needed water projects but we also preserve our fish and wildlife habitats so that we don't endanger the species as part of the project.

I wish to emphasize that not only is this an environmental issue, this is about State involvement. Not only does the Army Corps need to ensure that projects meet Federal environmental requirements, it needs to respect each State's unique situation. If State fish and wildlife experts express concern about a project, my amendment reiterates what the law already is. The Army Corps must listen. That is what it says. It is as simple as that.

I urge my colleagues to support this amendment. It has the strong support of many of our wildlife federations. The National Wildlife Federation supports it. Izaak Walton League of America, the Theodore Roosevelt Conservation Partnership, Trout Unlimited, and wildlife federations from many of our States support it.

Mr. President, I ask unanimous consent to have printed in the RECORD the letter in support of my amendment.

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

APRIL 25, 2016.

Re: Support Cardin Amendment 3871 to the Energy and Water Appropriations Bill.

DEAR SENATOR: As organizations representing a broad range of conservation, sportsmen and women, recreation, and outdoor interests, we urge you to support Amendment 3871 to the Energy and Water Appropriations Bill. This common sense, cost-effective amendment will protect fish and wildlife, make federal water projects better, and give a real voice to the nation's state and federal fish and wildlife experts.

Every year, hunting and fishing contribute \$200 billion in total economic activity to our nation's economy. Ensuring that water resources projects are designed, built and operated to sustain and improve fish and wildlife populations is critical to this economy and to our sporting traditions.

Since 1958, the Fish and Wildlife Coordination Act has fully integrated state and federal fish and wildlife expert review into the Army Corps of Engineers water resources planning process. As part of the water resources project review process, the U.S. Fish and Wildlife Service evaluates the impacts of proposed water resources projects and makes recommendations to reduce the harm to fish and wildlife resources. State fish and wildlife experts are also encouraged to provide input under this process.

Despite the extensive work undertaken by the Fish and Wildlife Service and the states in analyzing projects and developing important recommendations, the Army Corps of Engineers often does not follow the expert recommendations that are developed. When this happens, federal water projects can cause significant, and entirely avoidable, harm to the nation's fish and wildlife. Failing to follow these expert recommendations also leads to mitigation plans that do not work.

Amendment 3871 would ensure that the recommendations of the nation's fish and wildlife experts are fully accounted for during the planning of water resources projects. This is a common sense, cost-effective way to protect our nation's wildlife and make water projects better for all of us. Our organizations urge you to vote yes on amendment 3871.

Respectfully,

National Wildlife Federation, Izaak Walton League of America, Theodore Roosevelt Conservation Partnership, Trout Unlimited, Arkansas Wildlife Federation, Conservation Federation of Missouri, Nebraska Wildlife Federation, North Carolina Wildlife Federation, South Dakota Wildlife Federation, Wisconsin Wildlife Federation.

Mr. CARDIN. I encourage my colleagues to read the language of this amendment. It carries out current law. That is simply what it does. Current law requires this consideration by Fish and Wildlife on these projects.

This amendment makes it clear that we want the Federal agencies to comply with the law. That is why we wrote it that way. And this amendment would make sure the intent of Congress in implementing the statute is, in fact, carried out.

Mr. President, with that, I suggest the absence of a quorum.

The PRESIDING Officer. The clerk will call the roll.

The legislative clerk proceeded to call the roll.

Mr. RUBIO. 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. RUBIO. Mr. President, I ask unanimous consent that I be allowed to speak for up to 10 minutes as in morning business.

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

ZIKA VIRUS

Mr. RUBIO. Mr. President, I come to the floor again today to discuss the Zika virus, which has been in the news quite often in my home State of Florida and internationally.

In a moment, I want to enter into the RECORD a number of articles that have appeared just in the last week in papers across the State of Florida.

On May 7, the newspaper in Pensacola had this headline: "Panhandle conditions create a Zika 'powder keg.'" The argument it makes is that part of the State—as are many of the areas in the South—is an area where you find prevalent a species of mosquito which is the primary one that is now transmitting the Zika virus. It goes on to say that as temperatures rise and rainfall increases—these are the two elements that mosquitoes need to spread. So there is going to be a massive spread—as there is every year—in the specific species of mosquitoes that transmit the Zika virus in the panhandle of Florida.

Mr. President, I ask unanimous consent to have printed in the RECORD the Pensacola News Journal article.

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

[From <http://www.pnj.com/story/news/local/2016/05/07/panhandle-conditions-create-zika-powder-keg/83698034/>, May 7, 2016]

PANHANDLE CONDITIONS CREATE ZIKA 'POWDER KEG'

(By Carlos Gieseken)

Nine out of 10 mosquito bites in Northwest Florida can be attributed to the culprit known to scientists as *aedes albopictus* and colloquially as the Asian Tiger.

It is black and white and measures about a quarter of an inch in length. It is the sister to *aedes aegypti*, best known as the Yellow Fever Mosquito because of its past success at delivering that disease. It is behind the numerous outbreaks that caused panic and killed thousands in Pensacola between 1765 and 1905.

Today the two are once again in the spotlight for all the wrong reasons—they carry Zika, a virus suspected of causing birth defects in Brazil and other Latin American countries as well as the Caribbean.

Aedes aegypti was prevalent in the Florida Panhandle until the mid 1980s, said John P. Smith, a medical entomologist with Florida State University at Panama City who has studied insects that affect public health for more than 30 years.

At that time, the Asian Tiger began to assert itself when it came to the United States from Southeast Asia via the used tire trade. "They are both bad guys, no doubt about it," Smith said. "Or should I say bad girls. Only the females bite."

Both mosquitoes also spread yellow fever, dengue and chikungunya.

The Asian Tiger is found in high concentrations on the Gulf Coast, creating a potential powder keg. This is because Zika

spreads when mosquitoes bite multiple people after biting an infected person.

To date, the Panhandle mosquito population has not been infected. According to the Florida Department of Health, there has been one case of Zika in Santa Rosa County in a person who was infected while traveling abroad. As of Friday, there have been 105 travel-related cases of Zika in Florida.

A great deal of media ink and broadcast time has been spent on the disease, but how worried should the Panhandle be?

"I think it is a real concern," Smith said, "and worth doing something to prevent it."

YEAR-ROUND CONCERN

But mosquito control technicians in Escambia and Santa Rosa counties wage a year-round war against the tiny, slender pests.

When temperatures regularly hit 60 or above in March or April, the teams start spraying to knock out the adult mosquitoes who have hatched and begun their warm weather pursuit for food, i.e. blood.

But during the winter months, even in the coldest frost of January or February, mosquito larvae can lie dormant, stunting their own development to wait for warmer temperatures before emerging.

Keith Hussey and Temika Wilkes are the mosquito control directors at Santa Rosa and Escambia counties, respectively. Their staffs are out inspecting those places where mosquito larvae lie like baby vampires through the brisk weather months.

They inspect drainage ditches, holding ponds and woodland pools. They also do neighborhood sweeps in search of man-made mosquito nurseries like old tires or other containers, foreclosed homes and abandoned swimming pools.

Larvicide and gambusia fish, which are the size of guppies and thrive in stagnant water where they feed on mosquito larvae, are effective weapons.

"You can get more mosquitoes killed in a small pond of water than you can when they fly away all over the place," said Matthew Mello, Escambia County mosquito control supervisor.

FSU's Smith monitors 12 sites in Santa Rosa County. The mosquito control personnel in that county use his data to help strategize where and when they treat for mosquitoes. He and his staff also test the mosquitoes for diseases they are known to carry.

Escambia County's mosquito control budget for fiscal year 2015 to 2016 is just under \$620,000. Santa Rosa County's budget this year is \$495,000, and has proposed a budget of \$594,518 for next year.

Smith said that because of the size of the area that needs to be covered, "The programs in Northwest Florida are some of the poorest funded throughout the state."

Bay County and other counties have specific taxing districts that are used to raise millions of dollars to combat mosquitoes. Their programs include aerial spraying from helicopters and fixed wing aircraft, public education programs and more staff who can cover more area.

The amount of local funding is enough to handle day-to-day and regular mosquito season needs, officials from Escambia and Santa Rosa counties say. But is it enough should a Zika infection break out locally, instead of from a far flung place?

"The county's mosquito control program has adequate funds to fulfill its mission and has successfully protected the residents from disease spread by mosquitoes for many years," said Ron Hixon, environmental manager for Santa Rosa County in a statement. "Every year the county reviews its funding for mosquito control based on prior years

mosquito data to ensure adequate funds are available."

"Please be assured that the Santa Rosa County Environmental Department staff, specifically its Mosquito Control division staff, are actively monitoring the Zika situation and that the SRC Board of County Commissioners are ready to deploy whatever resources are necessary to protect the residents of Santa Rosa County," he said.

The Florida Department of Health said in a statement that it has an incident management team in its central office in Tallahassee. It coordinates with the state departments of agriculture and environmental protection as well as the Division of Emergency Management, the governor's office, VISIT Florida and others. Escambia County's Wilkes said "operations are currently funded at a level that supports effective mosquito control. However, just like during a hurricane or other natural disaster, if we were to have a Zika outbreak and a subsequent state of emergency, we would need additional funding for supplies and overtime costs."

Mr. RUBIO. The second article says: "Zika findings could be 'game changers,' opening doors to research." It begins by saying:

Two groups of scientists reported Wednesday that fetal mice infected with Zika showed brain damage, a finding that confirms the prevailing view that the virus can disrupt the development of fetal brains in humans and provides a clearer avenue to study the problem.

The work should put to rest lingering doubts in some quarters that the Zika outbreak sweeping through Latin America and the Caribbean is responsible for a surge in babies born with microcephaly and other brain anomalies.

It goes on to quote an associate professor of pathology at the University of Texas Medical Branch in Galveston, who says:

Let me put it bluntly: These are game changers. . . . We need to move forward now.

There is an article dated May 10 in the Miami Herald: "Two new Zika cases in Miami-Dade raise state total to 109."

Florida health officials confirmed two new Zika infections in Miami-Dade on Tuesday, raising the statewide total to 109 people who have contracted the virus this year, more than any state.

In Miami-Dade, where most of Florida's Zika cases have been reported, 44 people have been infected with the virus, said the state health department, but the disease has not been transmitted locally by mosquito bites. Broward County has reported 15 cases of Zika.

At about 5 o'clock today, I will meet with the Governor of our State, who is here asking for Federal aid to prepare for and combat the virus in the State of Florida.

The Governor said:

It's going to get warmer, we're going to have more rainfall, we're probably going to see more mosquitoes in our state. Our federal government has a variety of plans they're talking about. . . . We've got to address the Zika issue. Hopefully, we can get ahead of it.

But it isn't just limited to Florida. This is an article from USA TODAY dated May 6, 2016: "Gulf Coast could be ground zero for Zika."

The Gulf Coast may know hurricanes, but this year the region of 60 million people

could find itself unprepared and at ground zero for a different type of storm: a mosquito-borne Zika epidemic.

A look at the region's urban hubs, small towns and rural outposts shows a patchwork of preparedness. Cities such as Houston have robust plans in place, while smaller towns, such as Corpus Christi, Texas, struggle with fewer resources.

This is just part of painting an overall picture of this very serious problem.

I would just say that the notion that we should only be worried about Florida or the States on the gulf coast alone would not be wise. Mosquitoes that infect people are found in 30 of the 50 States in this country. There are now Zika infections and Zika cases in multiple States across the country.

We now know that Zika isn't just transmitted from mosquitoes but can also be sexually transmitted. In fact, the only case of transmission in Florida was one that was sexually transmitted in Central Florida.

As we debate all these other important issues, this is a looming public health crisis. This is the situation we are now facing in this country. The time to act has come. The moment to act has come because right now in this body and in Washington, DC, we are facing a debate about this issue, about how much money we are going to spend on it.

Look, the President has proposed \$1.9 billion to deal with it. About \$500 million of that is designed to pay back the Ebola funding that has been used in the short term to fill in the gap, but the rest of it is for real programs that go into dealing with this issue and particularly dealing with it on the island of Puerto Rico, which has been disproportionately impacted. When I hear people say there haven't been any cases of Zika transmitted in the United States, they are wrong. People of Puerto Rico are American citizens. They travel to the mainland extensively. It is our responsibility to also fight and care for them in this process.

But the bottom line is that it is not a question of if, it is a question of when. There will be a mosquito transmission of Zika in the continental United States at some point over next few days, weeks, or months. We cannot get caught unprepared to deal with the consequences. The consequences, by the way, are not just to pregnant women, which in and of itself is reason to act—I don't mean to diminish it. The impact on pregnant women and their unborn children is extraordinary and devastating. The science on that is indisputable. We are seeing evidence of it all across the world and especially the Western Hemisphere being impacted by it. That alone is reason to act. But there is now a definitive link between Zika and Guillain-Barre syndrome, which is a debilitating, often fatal neurological condition that we know is associated with this.

By the way, these children who are being born after being infected in the womb with Zika, we don't know what the long-term prognosis is. Just because they are not born with

microcephaly does not mean they will not suffer from other neurological deficiencies or other neurological conditions in the years to come. We simply don't know. It is not just a first-trimester threat anymore. We now know Zika can be transmitted and can do serious damage in the second trimester as well.

We know that soon the Olympic games will be played in Brazil, and that means hundreds of thousands of people will travel from and through the United States to the Olympics and back. We know we have constant visitors coming in and out of this country. How else would we get 109 cases in Florida? These are people who have either traveled abroad or have been infected by a partner in the one case I have cited.

This is an issue we should jump on with a real sense of urgency. It is a Federal responsibility to be involved in this. It is the job of the Federal Government to keep our people safe from external threats, and Zika today is an external threat spreading to this country—a country that is at the epicenter of global commerce and transit. It is just a matter of time before someone contracts Zika through a mosquito bite in the United States, and we have not prepared for it.

Localities and States are doing the best they can with their limited resources, but they do not have the comprehensive resources the Federal Government can bring to bear. They do not have the resources for research the Federal Government can bring to bear. They do not have the ability to deal with it at the ports of entry the way the Federal Government can. These are important priorities I hope we will move on.

In the last few hours, I have heard encouraging reports that there are a number of efforts going on behind the scenes in the Senate—at least one of them in a bipartisan way—to begin to address this issue. Over the next few hours, we will meet with the different stakeholders and others who are engaged in this issue to see if we can come up with a way forward.

Here is what I hope we will not do. I hope we will not politicize this issue. Zika is not a Republican issue or a Democratic issue. It shouldn't be a campaign issue, although I promise it will become one if we have a Zika outbreak in the United States and we are back home doing our constituent work and not here voting. People are going to ask: Why did you do nothing on this issue? You knew it was coming. It was clearly broadcasted and predicted. All the indicators were there and nothing happened. Inaction on this is, quite frankly, inexcusable. I don't believe voters will excuse us for refusing to act on this.

This should not be a political issue. It should not be a partisan issue. It shouldn't be used for one party to beat up on the other. There are so many other issues we can fight over but not

on this—not where the real lives of real people are at stake. My hope is very soon—and I mean in the next couple of days—we can bring before this body a way forward on this issue that brings both parties together and that deals with this public health crisis in a responsible way.

Let me say, look, we are running a debt in this country. So if there is a way to pay for it—and I believe there can be a way to pay for it—I am all for that. I have ideas about how we can come up with some of that money. We can find \$1.4 billion, \$1.5 billion, \$1.9 billion to pay for this, and I think we should endeavor to do so, but even if we cannot, we should never allow the inability to agree on how to pay for it to stand in the way of addressing a public health crisis that threatens to become a public health catastrophe. I prefer that we pay for it. I am for that, but I am not going to let an objection to that stand in the way of addressing this issue.

So through all the other issues we are debating today, from Presidential campaigns to water projects, I still do not believe we have given sufficient intensity, urgency or attention to this burgeoning issue that threatens the safety and security of our people. So it is my hope that over the next few hours and days we can come forward in a bipartisan way with a way forward, and I will continue to work to address and to achieve that.

With that, I yield the floor.

I suggest the absence of a quorum.

The PRESIDING OFFICER. The clerk will call the roll.

The bill clerk proceeded to call the roll.

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

The PRESIDING OFFICER (Mr. GARDNER). Without objection, it is so ordered.

UNANIMOUS CONSENT REQUEST—EXECUTIVE CALENDAR

Mr. TOOMEY. Mr. President, I rise to address the issue of vacancies on the Federal bench in the Commonwealth of Pennsylvania.

In the 5½ years I have been in the Senate, I have sought to find common ground with my colleagues on both sides of the aisle, with considerable success—and sometimes we continue to search for that success—whether it is legislation to prevent pedophiles from infiltrating our classrooms or working to fight this terrible scourge of opioid abuse and overdoses in Pennsylvania or trying to keep guns out of the hands of criminals and the dangerously mentally ill.

One of the accomplishments of which I am most proud is the work I have done with Senator CASEY to fill vacancies as they have occurred on the Federal bench in Pennsylvania. Senator CASEY and I have developed a fairly elaborate process. We are blessed to have very talented men and women who have volunteered their time, en-

ergy, and expertise to help us identify and vet candidates when a vacancy occurs, to recommend those candidates, and to begin a process by which we can get some of the best and brightest people in Pennsylvania who are able and willing to serve on the Federal bench to do exactly that.

Using this process, Senator CASEY and I have gotten together, we have agreed, and we have recommended to the President, the President has then nominated, and this Senate has confirmed 16 men and women to the Federal bench in Pennsylvania; 14 are district court judges, 2 circuit court judges. There are only two States in the Union that have confirmed more Federal judges in this period of time, and those are the very large States of California and New York, which have had considerably more vacancies. This makes a difference for the people of Pennsylvania.

For instance, because Senator CASEY and I have cooperated this way, we have been able to fill empty courthouses—Federal courthouses which have sat vacant where people do not have convenient access to justice. In the cities of Reading, Williamsport, and Easton, vacant courthouses are no longer vacant because through our work we now have Federal judges sitting, hearing, and trying cases, and providing justice in those communities.

Despite what has been a very successful record so far, we have more work to be done. We have vacancies in Pennsylvania now. As a matter of fact, there are currently four district court—district court—nominations for Pennsylvania that are pending in the Senate. Two are still being reviewed by the Judiciary Committee, and two have been approved by the committee. They have had their hearing, they have had their markup, they have voted, they have been successfully reported out of committee, and they are on the Executive Calendar.

For some time, Senator CASEY and I have been working to get all four of these nominees through the process and confirmed, and I strongly believe all four should be confirmed.

Today, I want to focus in particular on two, and those are the two who have already been successfully reported out of committee. They are now listed on the Executive Calendar. These are vacancies that are especially concerning to me, because in one case the Federal courthouse in Erie, PA—the fourth biggest city in Pennsylvania—has a vacant courthouse. It is vacant. It has been vacant for almost 3 years. For almost 3 years, there has been no Federal judge able to hear cases, and so the people in Erie and the surrounding counties have very long travel distances. They have to go all the way down to Pittsburgh or take a very long drive to get to another Federal courthouse, and that is not right. It is not right for the people of Erie, and it is not right for the people of Northwestern Pennsylvania generally. We

have another district judgeship in the Western District of Pennsylvania that likewise has been vacant for almost 3 years.

Here is what I want to stress: The two nominees for these judgeships who I am talking about would fill judgeships that have been vacant far longer than any other pending on the Executive Calendar. There are other nominees pending on the Executive Calendar. I get that. There are people who want to confirm every one of them. I understand that, but no vacancies have been outstanding for as long as these two vacancies for which we have two qualified candidates who have been successfully reported out of committee, and they are very well-qualified nominees. In fact, I want to talk briefly about each of them.

Judge Susan Baxter has a very impressive 34 years of legal experience, including over 20 years serving as a Federal magistrate judge and over a decade as a practicing lawyer in both the public and private sectors. She spent 3 years as a teacher. She completed her education at two of Pennsylvania's very impressive schools, getting her law degree from Temple and her undergraduate degree from Penn State. Judge Baxter has agreed to sit in the Erie courthouse, which would eliminate the problem of a vacant Federal courthouse in the city of Erie.

Marilyn Horan is the other judge. Judge Horan likewise has extensive legal experience for 37 years, 20 of those years as a judge in the Pennsylvania Court of Common Pleas in Butler County, PA; 17 years as a practicing lawyer, including 14 as a partner in a law firm. Judge Horan likewise attended two terrific Pennsylvania schools. She got her law degree from the Pittsburgh School of Law and her undergraduate degree from Penn State.

There is no question in my mind, both of these women will make outstanding additions to the Federal bench in Pennsylvania. I believe the seats they will fill, if they are confirmed by the Senate, have been vacant too long. Three years is just far too long.

Yesterday my colleague from Pennsylvania, Senator CASEY, made a unanimous consent request for these 2 Pennsylvania judges but also 9 others, for a total of 11. I was not on the Senate floor at the time. Had I been, I would have voiced my support for that request, and I would have agreed to that vote. Unfortunately, Leader MCCONNELL disagreed and raised an objection. So we find ourselves stuck at zero: We have nobody pending for confirmation. We have our colleagues on the other side saying let's have 11 judges confirmed.

I am suggesting a slightly different course. How about we try a step in the right direction? How about we vote on these 2 judges, 2 of the 11? That is not the entire slate, but it is not zero. They are the two judges who would fill the vacancies that have been vacant the longest.

These women represent real bipartisan cooperation. One was initially suggested to the President by Senator CASEY. I suggested the other. One is a Democrat. The other is a Republican. The other seats have had vacancies for far shorter periods of time.

So I think this would be progress if we could simply agree to have a vote on these two nominees, then see where we go from there. Let's get off this all-or-nothing, 0-or-11 situation, and let's confirm the two judges who would fill the vacancies that have lasted the longest.

Mr. President, I ask unanimous consent that the Senate proceed to executive session to consider the following nominations: Calendar Nos. 460 and 461 en bloc; that the Senate vote on the nominations en bloc without intervening action or debate; that if confirmed, the motions to reconsider be considered made and laid upon the table en bloc; that the President be immediately notified of the Senate's action, and the Senate then resume legislative session without any intervening action or debate.

The PRESIDING OFFICER. Is there objection?

The Senator from Rhode Island.

Mr. WHITEHOUSE. Mr. President, reserving the right to object.

On the Executive Calendar, there is a queue of judges who have come out of the Judiciary Committee and are ready for floor action. By my count, along that queue, the two Pennsylvania judges my distinguished colleague refers to are Nos. 9 and 10; Senator JACK REED's and my Rhode Island judge is No. 8. We would very much like to enter into an agreement where these judges start to be moved in regular order—as we often say we like around here—through the queue, as is the tradition in the Senate, so we can get them all cleared.

The senior Senator from Pennsylvania, Mr. CASEY, as the junior Senator mentioned, came here to move a larger block. I would not object to this request if it were amended to include all 10 of those judges on the Executive Calendar, down to and including the two Pennsylvania judges to whom my distinguished colleague refers. That would be Calendar Nos. 307, 357, 358, 359, 362, 363, 364, the all-important 459 from Rhode Island, and 460 and 461.

So if the Senator from Pennsylvania would amend his unanimous consent request to accommodate that, then I would not object.

The PRESIDING OFFICER. Will the Senator so modify the request?

The majority leader.

Mr. MCCONNELL. I object.

The PRESIDING OFFICER. Objection is heard.

Mr. WHITEHOUSE. Mr. President, parliamentary question.

I am not sure whether the majority leader's objection was to Senator TOOMEY's unanimous consent request or to my attempt to modify it. If it was to the former, we are moot, and this

conversation has concluded. If not, then I will object if I cannot get the regular order for the judges ahead.

The PRESIDING OFFICER. Objection is heard on the modification.

Mr. MCCONNELL. Mr. President, my understanding—what I intended to do was to object to the modification offered by the distinguished Senator from Rhode Island.

The PRESIDING OFFICER. Objection is heard.

Mr. WHITEHOUSE. Mr. President, with that clarification, I must regrettably object to the unanimous consent request propounded by the junior Senator from Pennsylvania. But I do hope very much that we can find a way to work toward getting these judges confirmed. These are judges who came out of the Judiciary Committee, which is a fairly contentious committee, unanimously. They are district judges. If we can't move them, then I suggest the Senate is really not working the way it ought to, and I very much hope we can get to a place where we can move them all.

The PRESIDING OFFICER. Objection is heard.

The majority leader.

Mr. MCCONNELL. Mr. President, I think it bears repeating again what I have said the last few days. If you look at the Barack Obama years—he will ultimately have 8 years in the White House—and the George W. Bush 8 years in the White House, and you draw a line at this point in their Presidencies, Barack Obama has gotten 21 more lifetime appointments, Federal judges, than George W. Bush did during the same period. By any objective standard, President Obama has been treated more than fairly during the course of his Presidency—much more fairly than George W. Bush was treated during the same period of his Presidency.

I yield the floor.

The PRESIDING OFFICER. The Senator from Pennsylvania.

Mr. TOOMEY. Mr. President, I want to make it clear that I did not have an objection to the modification of the unanimous consent request that was made by the Senator from Rhode Island.

I think Senator MCCONNELL makes a valid point about judicial vacancies that have occurred under President Obama. But where we disagree is that I think right before us we have excellent candidates who have been vetted by both sides. They have been chosen by both sides. They have come through the process. They have had their hearings. They have been reported out by the committee. It does not serve the people of the Commonwealth of Pennsylvania to have to continue to wait.

I am not finished in this effort. I am stymied today. I must say that I am disappointed that my friends on the other side can't agree to make some progress. It is not as though I am, for instance, asking that only Republican judges be confirmed or only judges who are chosen by Republicans. I am not

asking that. We have a Democrat and a Republican, chosen by my Democratic colleague and myself, and I understand they are not in the sequence that is traditionally dealt with. But we are at an impasse here. They are the two judges who would fill the vacancies that have lasted the longest, through no fault of their own. I am trying to find a way to get somewhere between 0 and 11, neither of which is accepted. This is a very frustrating and disappointing moment, but I am not going to give up trying.

I yield the floor.

The PRESIDING OFFICER. The Senator from Rhode Island.

Mr. WHITEHOUSE. Mr. President, let me add to what the distinguished Senator from Pennsylvania has said by noting first that the impasse to which he refers is created by his own leadership, which refused to bring up judges that have come out of the Judiciary Committee unanimously.

There is a problem here. It is one that can be solved within the Republican caucus. We can't very much help with that, but we hope that a solution comes.

The second point is that the question here should not be viewed only as to whether the President is being treated fairly but that there are vacancies on Federal courts, and it is our responsibility to provide advice and consent. We have a duty of fairness to the constituents who have empty seats in courtrooms, and we have a duty of fairness to the candidates—the nominees—who have put their lives on hold with the expectation that they would be treated fairly by the Senate. That is our job—to treat nominees fairly and to see to our constituents' needs. It is not just a question of numbers and who is President.

I yield the floor.

I appreciate the persistence of both colleagues from Pennsylvania, and I am sure we will continue to do this until we make some headway.

The PRESIDING OFFICER. The Senator from North Carolina.

Mr. BURR. Mr. President, I ask unanimous consent to speak as in morning business.

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

BIPARTISAN STUDENT LOAN CERTAINTY ACT

Mr. BURR. Mr. President, today is an excellent day for students across the country who are taking out college student loans. For the upcoming school year, the Treasury auction just took place on 10-year notes. Some folks might ask: What is the connection with student loans and Treasury notes?

Three years ago, Senator ALEXANDER, myself, Senator MANCHIN, Senator KING, and others said something very simple: We are going to get politicians out of the business of setting student loan rates, and we are going to let the marketplace do it. That was a wise decision, as was the law we passed—the Bipartisan Student Loan Certainty Act. Since 2013 it has saved students

and their parents \$36 billion in taking out student loans. We will save another \$10 billion again this year. That means that 200,000 North Carolinians—students and their parents—are saving even more on student loans. Those 200,000 North Carolinians take out about \$500 million in student loans to attend universities and colleges. Because of this law, they have been saving. Because of today's Treasury auction, they are going to save even more. They are going to save about \$1.1 billion across my State alone because of the reduction in the Treasury note from a little over 4 percent on the 10-year to 3.76 today.

Congressional Research Service tells us that about \$4,500 less will be paid out for a 4-year degree. I hold this up because I think this is indicative of where we are this year—the lowest student loan rate since the year 2004. I know this is a debate not only within the body of the Senate and the House but also on the campaign trail for our Presidential candidates.

Prior to 2013, interest rates had been written into law by politicians and were essentially set at 6.8 percent. Many of us looked at it and said: This is insane. For the protection of American taxpayers, it ought to be tied to some financial instrument. So we tied it to the 10-year bond. Since that point, taxpayers—specifically, students and their parents—have saved \$36 billion because we decoupled it from the political process here.

In fact, those interest rates have dropped significantly since last year—4.29 percent to 3.76 percent today. That means about \$40 more per month in the average graduate's pocket. It means \$4,500 more overall in saved costs.

What would have happened if we hadn't come together to pass this law? Students would have shelled out another \$46 billion in student loan interest payments. This is one thing that Congress can hold up, and we can highlight the fact that we did something responsible. For those who claim we haven't done anything about the high cost of student loans, let me suggest to you that we have done a lot. We have saved parents and students \$46 billion. We probably could save them more than that if, in fact, we didn't divert some of the proceeds that the Government gets off of student loans to the Affordable Care Act by about \$2 billion a year.

We ran into significant pushback from several Members of this body. In fact, 18 Members of this body, mostly from the other party, opposed this law. The junior Senator from Vermont called it a disaster for young people in our country looking to go to college. This law was also vocally opposed by the senior Senator from Massachusetts. But today, it demonstrates the shortsightedness that was displayed then. Today, because of what we did in a bipartisan fashion passed by this body, parents and students have saved \$46 billion, and in North Carolina this

next year, it is projected that they will save another \$1.1 billion in interest payments on their student loans. This is a day that Congress can be proud of because we have done something good for the American people.

I yield the floor.

The PRESIDING OFFICER. The Senator from Tennessee.

Mr. ALEXANDER. Mr. President, I want to congratulate the Senator from North Carolina. He was the leader in 2013, along with Senator MANCHIN and Senator Coburn, who was here at the time—I was a little bit involved at the time—and Senator ANGUS KING from Maine. We worked with the President and with the House. The Senator is exactly right. The decision that Senator BURR and others made, persuading this Congress and working with the President in 2013 to take the student loan interest rate out of politics and tie it to a certain rate, today reduces the rate by 0.5 percent for nearly 6.4 million students and saves millions and millions of dollars on student loans.

There is a lot of talk about student loans and the cost of them. Some people don't look at all aspects of them. In Tennessee, the independent colleges and universities have pointed out to me that the new overtime rule proposed by the Department of Labor would add as much as \$850 per student to the cost of tuition at all of the independent colleges in Tennessee, which is an outrageous thing to be doing.

Here is an example of real leadership, real action, and real results by the Senator from North Carolina, the Senator from Maine, and the Senator from West Virginia, who by their action in 2013, working with the President, have reduced the cost of going to college for 6.4 million American students. A lot of people can talk; some people can get a result.

The Senator from North Carolina, the Senator from Maine, and the Senator from West Virginia got a result. I thank them for it. Let's give credit where the credit is due. President Obama was instrumental in that decision. He worked with Senator Harkin and with others in helping us come to an agreement.

For those who think that things can't get done, things do get done here, and sometimes they help people who would like to have the help. Congratulations to Senator BURR for saving millions of dollars for students who are taking out student loans.

Mr. President, in just a moment, we will have two votes on the Energy and Water appropriations act. The first is on the amendment by the Senator from Maryland, Mr. CARDIN. The second vote is on the amendment by the Senator from Nebraska, Mrs. FISCHER. Other than a voice vote on Senator FLAKE's amendment, those are the last votes on amendments that we have for the Energy and Water appropriations bill.

As soon as the majority leader and the Democratic leader agree that we can schedule the vote on final passage—either later today or tomorrow—

for the first time since 2009, we will have completed an Energy and Water bill in regular order across the floor of the Senate, which every single Member of this body has a chance to participate in, rather than just having the 30 members of the Appropriations Committee and then everybody else being presented with a great big omnibus bill at the end of the year, which they really don't have a chance to change.

Everybody had a chance to weigh in on this. About 80 Senators did before it came to the floor. We will have considered about 21 more amendments. It has been a very good process. There were a couple of bumps, but this is the Senate. We deal with the bumps. I thank Senator CARDIN for his contributions and Senator FISCHER for hers. When we are through with that, we hope to finish the bill.

VOTE ON AMENDMENT NO. 3871

The PRESIDING OFFICER. Under the previous order, the question is on agreeing to amendment No. 3871, offered by the Senator from Tennessee, Mr. ALEXANDER, for the Senator from Maryland, Mr. CARDIN.

Mr. ALEXANDER. Mr. President, 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 senior assistant legislative clerk called the roll.

Mr. DURBIN. I announce that the Senator from Vermont (Mr. SANDERS) is necessarily absent.

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

The result was announced—yeas 39, nays 60, as follows:

[Rollcall Vote No. 69 Leg.]

YEAS—39

Baldwin	Franken	Nelson
Bennet	Gillibrand	Peters
Blumenthal	Heinrich	Reed
Booker	Hirono	Reid
Boxer	Kaine	Schatz
Brown	Klobuchar	Schumer
Cantwell	Leahy	Shaheen
Cardin	Markey	Stabenow
Carper	Menendez	Udall
Casey	Merkley	Warner
Coons	Mikulski	Warren
Donnelly	Murphy	Whitehouse
Durbin	Murray	Wyden

NAYS—60

Alexander	Fischer	Moran
Ayotte	Flake	Murkowski
Barrasso	Gardner	Paul
Blunt	Graham	Perdue
Boozman	Grassley	Portman
Burr	Hatch	Risch
Capito	Heitkamp	Roberts
Cassidy	Heller	Rounds
Coats	Hoeven	Rubio
Cochran	Inhofe	Sasse
Collins	Isakson	Scott
Corker	Johnson	Sessions
Cornyn	King	Shelby
Cotton	Kirk	Sullivan
Crapo	Lankford	Tester
Cruz	Lee	Thune
Daines	Manchin	Tillis
Enzi	McCain	Toomey
Ernst	McCaskill	Vitter
Feinstein	McConnell	Wicker

NOT VOTING—1

Sanders

The PRESIDING OFFICER. Under the previous order requiring 60 votes for the adoption of this amendment, the amendment is rejected.

VOTE ON AMENDMENT NO. 3888

The PRESIDING OFFICER (Mr. LEE). Under the previous order, the question is on agreeing to amendment No. 3888, offered by the Senator from Tennessee, Mr. ALEXANDER, for the Senator from Nebraska, Mrs. FISCHER.

Mrs. FISCHER. Mr. President, 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. DURBIN. I announce that the Senator from Vermont (Mr. SANDERS) is necessarily absent.

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

The result was announced—yeas 52, nays 47, as follows:

[Rollcall Vote No. 70 Leg.]

YEAS—52

Ayotte	Fischer	Perdue
Barrasso	Flake	Portman
Bennet	Gardner	Risch
Blunt	Graham	Roberts
Boozman	Grassley	Rounds
Burr	Hatch	Rubio
Capito	Heller	Sasse
Cassidy	Hoeven	Scott
Coats	Inhofe	Sessions
Corker	Isakson	Shelby
Cornyn	Johnson	Sullivan
Cotton	Klobuchar	Sullivan
Crapo	Lankford	Thune
Cruz	Lee	Tillis
Daines	McCain	Toomey
Donnelly	McConnell	Vitter
Enzi	Moran	Wicker
Ernst	Paul	

NAYS—47

Alexander	Gillibrand	Murray
Baldwin	Heinrich	Nelson
Blumenthal	Heitkamp	Peters
Booker	Hirono	Reed
Boxer	Kaine	Reid
Brown	King	Schatz
Cantwell	Kirk	Schumer
Cardin	Leahy	Shaheen
Carper	Manchin	Stabenow
Casey	Markey	Stabenow
Cochran	McCaskill	Tester
Collins	Menendez	Udall
Cooms	Merkley	Warner
Durbin	Mikulski	Warren
Feinstein	Murkowski	Whitehouse
Franken	Murphy	Wyden

NOT VOTING—1

Sanders

The PRESIDING OFFICER. Under the previous order requiring 60 votes for the adoption of this amendment, the amendment is rejected.

The majority leader.

UNANIMOUS CONSENT AGREEMENT—EXECUTIVE CALENDAR

Mr. MCCONNELL. Mr. President, I ask unanimous consent that at a time to be determined by the majority leader, in consultation with the Democratic leader, the Senate proceed to executive session for the consideration of

Calendar No. 307; that there be 60 minutes for debate only on the nomination, equally divided in the usual form; that upon the use or yielding back of time, the Senate vote on the nomination without intervening action or debate; that if confirmed, the motion to reconsider be considered made and laid upon the table; that the President be immediately notified of the Senate's action, and the Senate then resume legislative session without any intervening action or debate.

The PRESIDING OFFICER. Is there objection?

Without objection, it is so ordered.

The Senator from Tennessee.

Mr. ALEXANDER. Mr. President, I am pleased to report to the Senate, on behalf of Senator FEINSTEIN and myself, that basically we are finished with our work on the Energy and Water appropriations bill. The final vote—all that remains to be done—will be set whenever the majority leader and the Democratic leader agree it can be.

I will have more to say about the bill tomorrow, but I thank Senators for their cooperation on this. If we are able to pass it tomorrow, this will be the first time we have taken this bill—the Energy and Water appropriations bill—across the floor in the regular order since 2009. What that means is that every single Senator has had a chance to weigh in on it—first in the committee, where we received recommendations for policy from 80 or so Senators on both sides of the aisle, and then we processed another 21 amendments here on the floor. I hope it is a good model for the other 11 appropriations bills that we have.

When we voted for the fourth time on whether to end debate on the bill, I was pleased to see that the vote was 97 to 2. I hope that is an indication of what the final vote will be when the leaders set it. I am confident that Senators will vote for it in big numbers because we have had an open and fair process. We have had a full amendment process.

Almost every Senator is represented in the bill, and many Senators have already been home taking credit for what is in the bill. So I hope they will now vote for what they have been taking credit for when they have an opportunity—hopefully tomorrow.

So we will wait to see when the majority leader and the Democratic leader decide to set the vote, but other than the final passage of the bill, we have completed our work on the Energy and Water appropriations bill, and I thank the Senate for the opportunity to do that.

The PRESIDING OFFICER. The Senator from Mississippi.

Mr. COCHRAN. Mr. President, I am encouraged that the Senate will soon complete consideration of the Energy and Water Development appropriations bill. This legislation funds important components of our national defense, invests in our waterways and flood control infrastructure, and supports a safe and affordable domestic energy supply.

I commend the managers of the bill, the senior Senator from Tennessee, Mr. ALEXANDER, and the senior Senator from California, Mrs. FEINSTEIN. They make a good team. They have been persistent and they have worked diligently to ensure that all Senators' interests have been considered in drafting this legislation.

I look forward to continued progress on appropriations bills in the weeks ahead.

I yield the floor.

Mr. ALEXANDER. Mr. President, I suggest the absence of a quorum.

The PRESIDING OFFICER. The clerk will call the roll.

The legislative clerk proceeded to call the roll.

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

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

MORNING BUSINESS

Mr. ALEXANDER. Mr. President, I ask unanimous consent that the Senate be in a period of morning business, with Senators permitted to speak therein for up to 10 minutes each.

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

REMEMBERING BARBARA BROWN

Mr. DURBIN. Mr. President, southern Illinois lost a legend and one of its brightest lights. Last week, Barbara Brown passed away at the age of 61. Barbara was blessed with every God-given gift one could ask for: intelligence, strength, compassion, kindness—just to name a few. She had it all.

She was a remarkable woman who wore many hats during her political career: vice-chair of the Democratic Party of Illinois, precinct committee-woman, chairwoman of the Randolph County Democratic Central Committee, and treasurer for the Pierre Menard Democrat Club. She also helped found and lead the Southwestern Illinois Democratic Women and the Southern Illinois Democratic Women, two grassroots organizations working toward a more equitable representation of women in all levels of government. Barbara Brown was an exceptional leader.

Born in Red Bud, IL, Barbara spent her life working for the people of southern Illinois. In 1985, she earned her doctorate from Southern Illinois University, at Carbondale, and a love for teaching. Barbara taught political science at SIU for more than 30 years. And when she made a commitment to something, she saw it through. Barbara began playing the organ when she was 14 years old at St. Mary's Catholic Church of Ellis Grove. She became a lifelong parishioner and continued playing the organ for more than 40 years.

The highlights of her life were her family. She and her husband, Dick, had three sons: Jay, Matt, and Nate. The tribute Nate gave to his mother at her

funeral service was every mother's dream: a salute to a life of values, caring, support and love.

Even outside her home, Barbara was the quintessential teacher by the book and by her example. She gave up many summers to teach classes in American Government and democracy for international students through a program funded by the U.S. State Department. Her legendary energy made her an inspirational professor and at the same time a tireless public servant. She was a trailblazer. Barbara ran for office when many women held back. She was a two-time candidate for the Illinois State Senate and a nine-time delegate to the Democratic National Convention, including playing key roles in the Presidential campaigns for Bill Clinton and Barack Obama. And from 2000–2012, Barbara Brown was the clerk of courts for Randolph County, IL.

Outside of politics, Barbara was a co-founder and president of the Illinois Women's Institute for Leadership and helped establish the American Cancer Society's Relay for Life in Randolph County. She was a force of nature. Through her many leadership roles, Barbara became a prominent voice for the rights of women, the underprivileged, and the most vulnerable in the community. And that is what public service meant to Barbara Brown. She was driven by a willingness to offer a helping hand and a caring heart.

Barbara had an amazing career and was known for many accomplishments, but I knew her as a friend, a friend to the people of southern Illinois, and an inspiration to us all. Today there is an empty space in the world without Barbara Brown. She will be missed, but not forgotten. Through the love of her former students, colleagues, friends, family, and everyone who was fortunate enough to cross her path, Barbara's spirit will always shine on southern Illinois.

BUDGET SCOREKEEPING REPORT

Mr. ENZI. Mr. President, I wish to submit to the Senate the budget scorekeeping report for May 2016. The report compares current law levels of spending and revenues with the amounts the Senate agreed to in the budget resolution for fiscal year 2016, the conference report to accompany S. Con. Res. 11, and the Bipartisan Budget Act of 2015, P.L. 114–74, BBA 15. This information is necessary for the Senate Budget Committee to determine whether budget points of order lie against pending legislation. It has been prepared by the Republican staff of the Senate Budget Committee and the Congressional Budget Office, CBO, pursuant to section 308(b) of the Congressional Budget Act.

This is the fourth report that I have made this calendar year. It is the first report since I filed the statutorily required fiscal year 2017 enforceable budget limits on April 18, 2016, pursuant to section 102 of BBA 15, and the eighth report I have made since adoption of the fiscal year 2016 budget reso-

lution on May 5, 2015. My last filing can be found in the CONGRESSIONAL RECORD on April 6, 2016. The information contained in this report is current through May 9, 2016.

Table 1 gives the amount by which each Senate authorizing committee exceeds or is below its allocation for budget authority and outlays under the fiscal year 2016 budget resolution and the fiscal year 2017 enforceable budget levels filing. This information is used for enforcing committee allocations pursuant to section 302 of the Congressional Budget Act of 1974, CBA. For fiscal year 2016, which is still enforced under the 2016 congressional budget resolution, Senate authorizing committees have increased direct spending outlays by \$2.7 billion. Over the fiscal year 2017–2026 period, which is the entire period covered by the fiscal year 2017 enforcement filing, Senate authorizing committees are unchanged from assumed levels. Prior to updating the budget window, however, this table would have shown that Senate authorizing committees violated their allowable outlay levels by \$147.9 billion over the fiscal year 2016–2025 period. This breach is largely attributable to the nonappropriations provisions, extensions of the tax expenditure policies originally found in the American Recovery and Reinvestment Act of 2009, included in last year's consolidated omnibus appropriations bill, most of which were charged to the Committee on Finance.

Table 2 gives the amount by which the Senate Committee on Appropriations exceeds or is below the statutory spending limits for fiscal year 2016. This information is used to determine points of order related to the spending caps found in section 312 and section 314 of the CBA. On December 18, 2015, the President signed H.R. 2029, the Consolidated Appropriations Act, 2016, P.L. 114–113, into law. This bill provided regular appropriations equal to the levels set in BBA 15, specifically \$548.1 billion in budget authority for defense accounts, revised security category, and \$518.5 billion in budget authority for nondefense accounts, revised nonsecurity category.

Table 3 tracks the same enforcement information as Table 2 for fiscal year 2017. While no appropriations bills have been enacted, subcommittees are charged with permanent and advance appropriations that first become available for fiscal year 2017. These include spending on veterans healthcare, special and K–12 education, housing assistance, job training, and the Corporation for Public Broadcasting. The discretionary limits, which were increased by a combined \$30 billion in BBA 15, split evenly between defense and nondefense accounts, are \$551.1 billion for defense and \$518.5 billion for nondefense.

Table 4 gives the amount by which the Senate Committee on Appropriations is below or exceeds its allocation

for overseas contingency operations/global war on terrorism, OCO/GWOT, spending for fiscal year 2016. This separate allocation for OCO/GWOT was established in section 3102 of the conference report for S. Con. Res. 11, and is enforced using section 302 of the CBA. The consolidated appropriations bill included \$73.7 billion in budget authority and \$32.1 billion in outlays for OCO/GWOT in fiscal year 2016. This level is equal to the revised OCO/GWOT levels that I filed in the RECORD on December 18, 2015. There is no equivalent enforcement of OCO/GWOT for fiscal year 2017. Instead, the handling of OCO/GWOT-designated spending will revert back to the traditional treatment with the chairman of the Budget Committee making dollar-for-dollar adjustments to levels for congressional enforcement and the Office of Management and Budget making statutory adjustments to the limits if the President agrees with the congressional designation of spending as OCO/GWOT.

The fiscal year 2016 budget resolution established two new points of order limiting the use of changes in mandatory programs in appropriations bills, CHIMPS. Tables 5 and 6 show compliance with fiscal year 2016 limits for overall CHIMPS and the Crime Victims Fund CHIMP, respectively. This information is used for determining points of order under section 3103 and section 3104, respectively. Enacted CHIMPS are under both the broader CHIMPS limit, \$1.3 billion less, and the Crime Victims Fund limit, \$1.8 billion less. While the Crime Victims Fund limit is enforced only for fiscal year 2016, the overall CHIMPS limit remains in effect for fiscal year 2017 and is displayed in Table 7.

In addition to the tables provided by the Senate Budget Committee Republican staff, I am submitting additional tables from CBO that I will use for enforcement of budget totals agreed to by the Congress.

Because legislation can still be enacted that would have an effect on fiscal year 2016, CBO provided a report for both fiscal year 2016 and fiscal year 2017. This information is used to enforce aggregate spending levels in budget resolutions under section 311 of the CBA. CBO's estimates show that current law levels of spending for fiscal year 2016 exceed the amounts in last year's budget resolution by \$138.9 billion in budget authority and \$103.6 billion in outlays. Revenues are \$155.2 billion below the revenue floor for fiscal year 2016 set by the budget resolution. As well, Social Security outlays are at the levels assumed for fiscal year 2016, while Social Security revenues are \$23 million below levels in the budget.

The significant breach of aggregate spending levels in fiscal year 2016 is attributable to increased spending unaccompanied by action on any of the deficit reduction assumed in the budget resolution. The violation of revenue levels stems from the tax provisions from last year's final appropriations

and tax extenders bill. A point of order was raised against this violation, but Congress waived the budget discipline by a vote of 73 to 25, rollcall vote No. 338 of the 114th Congress, First Session. Of the 73 votes that waived budget discipline on this bill, 37 were from the majority, and 36 were from the minority. In voting no, I was joined by 15 other members of the majority and 9 members of the minority.

For fiscal year 2017, CBO estimates that current law levels are below the fiscal year 2017 enforcement filing's allowable budget authority and outlay aggregates by \$974.3 billion and \$592.4 billion, respectively. The allowable spending room will be reduced as appropriations bills for fiscal year 2017 are enacted. Revenues are at the level assumed for fiscal year 2017. Finally, Social Security outlays and revenues are at the levels assumed in the fiscal year 2017 enforcement filing.

CBO's report also provides information needed to enforce the Senate's pay-as-you-go rule. As part of the fiscal year 2017 enforcement filing, the Senate's pay-as-you-go scorecard was reset to zero. The scorecard will reflect the deficit effects of legislation over the fiscal year 2016–2021 and fiscal year 2016–2026 periods. Prior to updating the pay-as-you-go scorecard for the new budget window, the scorecard showed deficit reduction of \$20.4 billion and \$95.7 billion over the fiscal year 2015–2020 and fiscal year 2015–2025 periods, respectively. This balance was largely attributable to counting the offsets contained in BBA 15 but not the spending, which was discretionary and subject to future appropriations actions, and omitting legislation from the scorecard that increases the deficit, for instance section 1001(b) of title X of division O of P.L. 114–113, which kept most of revenue and direct spending provisions included in the bill from being counted. The Senate's pay-as-you-go rule is enforced by section 201 of S. Con. Res. 21, the fiscal year 2008 budget resolution.

All years in the accompanying tables are fiscal years.

I ask unanimous consent that the accompanying tables be printed in the RECORD.

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

TABLE 1.—SENATE AUTHORIZING COMMITTEES—ENACTED DIRECT SPENDING ABOVE (+) OR BELOW (–) BUDGET RESOLUTIONS

	(In millions of dollars)			
	2016	2017	2017–2021	2017–2026
Agriculture, Nutrition, and Forestry:				
Budget Authority	0	0	0	0
Outlays	0	0	0	0
Armed Services:				
Budget Authority	–66	0	0	0
Outlays	–50	0	0	0
Banking, Housing, and Urban Affairs:				
Budget Authority	0	0	0	0
Outlays	0	0	0	0
Commerce, Science, and Transportation:				
Budget Authority	130	0	0	0

TABLE 1.—SENATE AUTHORIZING COMMITTEES—ENACTED DIRECT SPENDING ABOVE (+) OR BELOW (–) BUDGET RESOLUTIONS—Continued

	(In millions of dollars)			
	2016	2017	2017–2021	2017–2026
Outlays	0	0	0	0
Energy and Natural Resources:				
Budget Authority	0	0	0	0
Outlays	0	0	0	0
Environment and Public Works:				
Budget Authority	2,880	0	0	0
Outlays	252	0	0	0
Finance:				
Budget Authority	365	0	0	0
Outlays	365	0	0	0
Foreign Relations:				
Budget Authority	0	0	0	0
Outlays	0	0	0	0
Homeland Security and Government Affairs:				
Budget Authority	0	0	0	0
Outlays	0	0	0	0
Judiciary:				
Budget Authority	–3,358	0	0	0
Outlays	1,713	0	0	0
Health, Education, Labor, and Pensions:				
Budget Authority	0	0	0	0
Outlays	0	0	0	0
Rules and Administration:				
Budget Authority	0	0	0	0
Outlays	0	0	0	0
Intelligence:				
Budget Authority	0	0	0	0
Outlays	0	0	0	0
Veterans' Affairs:				
Budget Authority	–2	0	0	0
Outlays	388	0	0	0
Indian Affairs:				
Budget Authority	0	0	0	0
Outlays	0	0	0	0
Small Business:				
Budget Authority	0	0	0	0
Outlays	1	0	0	0
Total:				
Budget Authority	–51	0	0	0
Outlays	2,669	0	0	0

TABLE 2.—SENATE APPROPRIATIONS COMMITTEE—ENACTED REGULAR DISCRETIONARY APPROPRIATIONS¹

	(Budget authority, in millions of dollars)	
	2016	
	Security ²	Nonsecurity ²
Statutory Discretionary Limits	548,091	518,491
Amount Provided by Senate Appropriations Subcommittee		
Agriculture, Rural Development, and Related Agencies	0	21,750
Commerce, Justice, Science, and Related Agencies	5,101	50,621
Defense	514,000	136
Energy and Water Development	18,860	18,325
Financial Services and General Government		
Homeland Security	44	23,191
Interior, Environment, and Related Agencies	1,705	39,250
Labor, Health and Human Services, Education and Related Agencies	0	32,159
Legislative Branch	0	162,127
Military Construction and Veterans Affairs, and Related Agencies	0	4,363
State Foreign Operations, and Related Programs	8,171	71,698
Transportation and Housing and Urban Development, and Related Agencies	0	37,780
Total	210	57,091
Current Level Total	548,091	518,491
Total Enacted Above (+) or Below (–) Statutory Limits	0	0

¹ This table excludes spending pursuant to adjustments to the discretionary spending limits. These adjustments are allowed for certain purposes in section 251(b)(2) of BBEDCA.

² Security spending is defined as spending in the National Defense budget function (050) and nonsecurity spending is defined as all other spending.

TABLE 3.—SENATE APPROPRIATIONS COMMITTEE—ENACTED REGULAR DISCRETIONARY APPROPRIATIONS¹

	(Budget authority, in millions of dollars)	
	2017	
	Security ²	Nonsecurity ²
Statutory Discretionary Limits	551,068	518,531
Amount Provided by Senate Appropriations Subcommittee		
Agriculture, Rural Development, and Related Agencies	0	9
Commerce, Justice, Science, and Related Agencies	0	0
Defense	45	0

TABLE 3.—SENATE APPROPRIATIONS COMMITTEE—ENACTED REGULAR DISCRETIONARY APPROPRIATIONS¹—Continued

	2017	
	Security ²	Nonsecurity ²
Energy and Water Development	0	0
Financial Services and General Government	0	0
Homeland Security	0	9
Interior, Environment, and Related Agencies	0	0
Labor, Health and Human Services, Education and Related Agencies	0	24,690
Legislative Branch	0	0
Military Construction and Veterans Affairs, and Related Agencies	0	60,634
State Foreign Operations, and Related Programs	0	0
Transportation and Housing and Urban Development, and Related Agencies	0	4,400
Current Level Total	45	89,742
Total Enacted Above (+) or Below (-) Statutory Limits	-551,023	-428,789

¹ This table excludes spending pursuant to adjustments to the discretionary spending limits. These adjustments are allowed for certain purposes in section 251(b)(2) of BBEDCA.

² Security spending is defined as spending in the National Defense budget function (050) and nonsecurity spending is defined as all other spending.

TABLE 4.—SENATE APPROPRIATIONS COMMITTEE—ENACTED OVERSEAS CONTINGENCY OPERATIONS/GLOBAL WAR ON TERRORISM DISCRETIONARY APPROPRIATIONS (In millions of dollars)

	2016	
	BA	OT
OCO/GWOT Allocation ¹	73,693	32,079
Amount Provided by Senate Appropriations Subcommittee		
Agriculture, Rural Development, and Related Agencies	0	0
Commerce, Justice, Science, and Related Agencies	0	0
Defense	58,638	27,354
Energy and Water Development	0	0
Financial Services and General Government	0	0
Homeland Security	160	128
Interior, Environment, and Related Agencies	0	0
Labor, Health and Human Services, Education and Related Agencies	0	0
Legislative Branch	0	0
Military Construction and Veterans Affairs, and Related Agencies	0	0
State Foreign Operations, and Related Programs	14,895	4,597
Transportation and Housing and Urban Development, and Related Agencies	0	0
Current Level Total	73,693	32,079
Total OCO/GWOT Spending vs. Budget Resolution	0	0

BA = Budget Authority; OT = Outlays

¹ This allocation may be adjusted by the Chairman of the Budget Committee to account for new information, pursuant to section 3102 of S. Con. Res. 11, the Concurrent Resolution of the Budget for Fiscal Year 2016.

TABLE 5.—SENATE APPROPRIATIONS COMMITTEE—ENACTED CHANGES IN MANDATORY SPENDING PROGRAMS (CHIMPS)

	2016
CHIMPS Limit for Fiscal Year 2016	19,100
Senate Appropriations Subcommittees	
Agriculture, Rural Development, and Related Agencies	600
Commerce, Justice, Science, and Related Agencies	9,458
Defense	0
Energy and Water Development	0
Financial Services and General Government	725
Homeland Security	176
Interior, Environment, and Related Agencies	28
Labor, Health and Human Services, Education and Related Agencies	6,799
Legislative Branch	0
Military Construction and Veterans Affairs, and Related Agencies	0
State Foreign Operations, and Related Programs	0
Transportation and Housing and Urban Development, and Related Agencies	0
Current Level Total	17,786
Total CHIMPS Above (+) or Below (-) Budget Resolution	-1,314

TABLE 6.—SENATE APPROPRIATIONS COMMITTEE—ENACTED CHANGES IN MANDATORY SPENDING PROGRAM (CHIMP) TO THE CRIME VICTIMS FUND

	2016
Crime Victims Fund (CVF) CHIMP Limit for Fiscal Year 2016	10,800
Senate Appropriations Subcommittees	
Agriculture, Rural Development, and Related Agencies	0
Commerce, Justice, Science, and Related Agencies	9,000
Defense	0
Energy and Water Development	0
Financial Services and General Government	0
Homeland Security	0
Interior, Environment, and Related Agencies	0
Labor, Health and Human Services, Education and Related Agencies	0
Legislative Branch	0
Military Construction and Veterans Affairs, and Related Agencies	0
State Foreign Operations, and Related Programs	0
Transportation and Housing and Urban Development, and Related Agencies	0
Current Level Total	9,000
Total CVF CHIMP Above (+) or Below (-) Budget Resolution	-1,800

TABLE 7.—SENATE APPROPRIATIONS COMMITTEE—ENACTED CHANGES IN MANDATORY SPENDING PROGRAMS (CHIMPS)

	2017
CHIMPS Limit for Fiscal Year 2017	19,100
Senate Appropriations Subcommittees	
Agriculture, Rural Development, and Related Agencies	0
Commerce, Justice, Science, and Related Agencies	0
Defense	0
Energy and Water Development	0
Financial Services and General Government	0
Homeland Security	0
Interior, Environment, and Related Agencies	0

TABLE 7.—SENATE APPROPRIATIONS COMMITTEE—ENACTED CHANGES IN MANDATORY SPENDING PROGRAMS (CHIMPS)—Continued

	2017
Labor, Health and Human Services, Education and Related Agencies	0
Legislative Branch	0
Military Construction and Veterans Affairs, and Related Agencies	0
State Foreign Operations, and Related Programs	0
Transportation and Housing and Urban Development, and Related Agencies	0
Current Level Total	0
Total CHIMPS Above (+) or Below (-) Budget Resolution	-19,100

U.S. CONGRESS,
CONGRESSIONAL BUDGET OFFICE,
Washington, DC, May 11, 2016.

Hon. MIKE ENZI,
Chairman, Committee on the Budget,
U.S. Senate, Washington, DC.

DEAR MR. CHAIRMAN: The enclosed report shows the effects of Congressional action on the fiscal year 2016 budget and is current through May 9, 2016. This report is submitted under section 308(b) and in aid of section 311 of the Congressional Budget Act, as amended.

The estimates of budget authority, outlays, and revenues are consistent with the technical and economic assumptions of S. Con. Res. 11, the Concurrent Resolution on the Budget for Fiscal Year 2016.

Since our last letter dated April 6, 2016, the Congress has not cleared any legislation for the President's signature that affects budget authority, outlays, or revenues.

Sincerely,

KEITH HALL.

Enclosure.

TABLE 1.—SENATE CURRENT LEVEL REPORT FOR SPENDING AND REVENUES FOR FISCAL YEAR 2016, AS OF MAY 9, 2016

	Budget Resolution	Current Level ^a	Current Level Over/Under (-) Resolution
On-Budget:			
Budget Authority	3,069.8	3,208.7	138.9
Outlays	3,091.2	3,194.9	103.6
Revenues	2,676.0	2,520.7	-155.2
Off-Budget:			
Social Security Outlays ^b	777.1	777.1	0.0
Social Security Revenues	794.0	794.0	0.0

Source: Congressional Budget Office.
^a Excludes emergency funding that was not designated as an emergency requirement pursuant to section 251(b)(2)(A) of the Balanced Budget and Emergency Deficit Control Act of 1985.
^b Excludes administrative expenses paid from the Federal Old-Age and Survivors Insurance Trust Fund and the Federal Disability Insurance Trust Fund of the Social Security Administration, which are off-budget, but are appropriated annually.

TABLE 2.—SUPPORTING DETAIL FOR THE SENATE CURRENT LEVEL REPORT FOR ON-BUDGET SPENDING AND REVENUES FOR FISCAL YEAR 2016, AS OF MAY 9, 2016 (In millions of dollars)

	Budget Authority	Outlays	Revenues
Previously Enacted: ^a			
Revenues	n.a.	n.a.	2,676,733
Permanents and other spending legislation	1,968,496	1,902,345	n.a.
Appropriation legislation	0	500,825	n.a.
Offsetting receipts	-784,820	-784,879	n.a.
Total, Previously Enacted	1,183,676	1,618,291	2,676,733
Enacted Legislation:			
An act to extend the authorization to carry out the replacement of the existing medical center of the Department of Veterans Affairs in Denver, Colorado, to authorize transfers of amounts to carry out the replacement of such medical center, and for other purposes (P.L. 114-25)	0	20	0
Defending Public Safety Employees' Retirement Act & Bipartisan Congressional Trade Priorities and Accountability Act of 2015 (P.L. 114-26)	0	0	5
Trade Preferences Extension Act of 2015 (P.L. 114-27)	445	175	-766
Steve Gleason Act of 2015 (P.L. 114-40)	5	5	0
Surface Transportation and Veterans Health Care Choice Improvement Act of 2015 (P.L. 114-41) ^b	0	0	99
Continuing Appropriations Act, 2016 (P.L. 114-53)	700	775	0
Airport and Airway Extension Act of 2015 (P.L. 114-55)	130	0	0
Department of Veterans Affairs Expiring Authorities Act of 2015 (P.L. 114-58)	-2	368	0
Protecting Affordable Coverage for Employees Act (P.L. 114-60)	0	0	40
Bipartisan Budget Act of 2015 (P.L. 114-74)	3,424	4,870	269
Recovery Improvements for Small Entities After Disaster Act of 2015 (P.L. 114-88)	0	1	0
National Defense Authorization Act for Fiscal Year 2016 (P.L. 114-92)	-66	-50	0

TABLE 2.—SUPPORTING DETAIL FOR THE SENATE CURRENT LEVEL REPORT FOR ON-BUDGET SPENDING AND REVENUES FOR FISCAL YEAR 2016, AS OF MAY 9, 2016—Continued
(In millions of dollars)

	Budget Authority	Outlays	Revenues
Fixing America's Surface Transportation Act (P.L. 114–94)	2,880	252	471
Federal Perkins Loan Program Extension Act of 2015 (P.L. 114–105)	269	269	0
Consolidated Appropriations Act, 2016 (P.L. 114–113) ^b	2,008,016	1,563,177	– 156,107
Patient Access and Medicare Protection Act (P.L. 114–115)	32	32	0
Trade Facilitation and Trade Enforcement Act of 2015 (P.L. 114–125)	20	20	– 7
Total, Enacted Legislation	2,015,853	1,569,914	– 155,996
Entitlements and Mandatories:			
Budget resolution estimates of appropriated entitlements and other mandatory programs	9,170	6,674	0
Total Current Level ^a	3,208,699	3,194,879	2,520,737
Total Senate Resolution ^d	3,069,829	3,091,246	2,675,967
Current Level Over Senate Resolution	138,870	103,633	n.a.
Current Level Under Senate Resolution	n.a.	n.a.	155,230

Source: Congressional Budget Office.

Notes: n.a. = not applicable; P.L. = Public Law.

^aIncludes the following acts that affect budget authority, outlays, or revenues, and were cleared by the Congress during this session, but before the adoption of S. Con. Res. 11, the Concurrent Resolution on the Budget for Fiscal Year 2016: the Terrorism Risk Insurance Program Reauthorization Act of 2014 (P.L. 114–1); the Department of Homeland Security Appropriations Act, 2015 (P.L. 114–4), and the Medicare Access and CHIP Reauthorization Act of 2015 (P.L. 114–10).

^bEmergency funding that was not designated as an emergency requirement pursuant to section 251(b)(2)(A) of the Balanced Budget and Emergency Deficit Control Act of 1985 shall not count for certain budgetary enforcement purposes. These amounts, which are not included in the current level totals, are as follows:

	Budget Authority	Outlays	Revenues
Surface Transportation and Veterans Health Care Choice Improvement Act of 2015 (P.L. 114–41)	0	917	0
Consolidated Appropriations Act, 2016 (P.L. 114–113)	– 2	0	0
Total	– 2	917	0

^cFor purposes of enforcing section 311 of the Congressional Budget Act in the Senate, the resolution, as approved by the Senate, does not include budget authority, outlays, or revenues for off-budget amounts. As a result, current level does not include these items.

^dPeriodically, the Senate Committee on the Budget revises the budgetary levels in S. Con. Res. 11, pursuant to various provisions of the resolution. The Initial Senate Resolution total below excludes \$6,872 million in budget authority and \$344 million in outlays assumed in S. Con. Res. 11 for disaster-related spending. The Revised Senate Resolution total below includes amounts for disaster-related spending:

	Budget Authority	Outlays	Revenues
Initial Senate Resolution	3,032,343	3,091,098	2,676,733
Revisions:			
Pursuant to section 311 of the Congressional Budget Act of 1974 and section 4311 of S. Con. Res. 11	445	175	– 766
Pursuant to section 311 of the Congressional Budget Act of 1974 and S. Con. Res. 11	700	700	0
Pursuant to section 311 of the Congressional Budget Act of 1974 and S. Con. Res. 11	0	1	0
Pursuant to section 311 of the Congressional Budget Act of 1974 and section 4313 of S. Con. Res. 11	269	269	0
Pursuant to section 311 of the Congressional Budget Act of 1974 and section 3404 of S. Con. Res. 11	36,072	– 997	0
Revised Senate Resolution	3,069,829	3,091,246	2,675,967

U.S. CONGRESS,
CONGRESSIONAL BUDGET OFFICE,
Washington, DC, May 11, 2016.

Hon. MIKE ENZI,
Chairman, Committee on the Budget,
U.S. Senate, Washington, DC.

DEAR MR. CHAIRMAN: The enclosed report shows the effects of Congressional action on the fiscal year 2017 budget and is current through May 9, 2016. This report is submitted under section 308(b) and in aid of section 311 of the Congressional Budget Act, as amended.

The estimates of budget authority, outlays, and revenues are consistent with the allocations, aggregates, and other budgetary levels printed in the Congressional Record on April 18, 2016, pursuant to section 102 of the

Bipartisan Budget Act of 2015 (Public Law 114–74).

This is CBO's first current level report for fiscal year 2017.

Sincerely,

KEITH HALL.

Enclosure.

TABLE 1.—SENATE CURRENT LEVEL REPORT FOR SPENDING AND REVENUES FOR FISCAL YEAR 2017, AS OF MAY 9, 2016

	Budget Resolution	Current Level	Current Level Over/Under (–) Resolution
On-Budget Budget Authority	3,212.4	2,238.0	– 974.3

TABLE 1.—SENATE CURRENT LEVEL REPORT FOR SPENDING AND REVENUES FOR FISCAL YEAR 2017, AS OF MAY 9, 2016—Continued

	Budget Resolution	Current Level	Current Level Over/Under (–) Resolution
Outlays	3,219.2	2,626.8	– 592.4
Revenues	2,682.0	2,682.0	0.0
Off-Budget			
Social Security Outlays ^a	805.4	805.4	0.0
Social Security Revenues	826.1	826.1	0.0

Source: Congressional Budget Office.

^aExcludes administrative expenses paid from the Federal Old-Age and Survivors Insurance Trust Fund and the Federal Disability Insurance Trust Fund of the Social Security Administration, which are off-budget, but are appropriated annually.

TABLE 2.—SUPPORTING DETAIL FOR THE SENATE CURRENT LEVEL REPORT FOR ON-BUDGET SPENDING AND REVENUES FOR FISCAL YEAR 2017, AS OF MAY 9, 2016
(In millions of dollars)

	Budget Authority	Outlays	Revenues
Previously Enacted			
Revenues	n.a.	n.a.	2,681,976
Permanents and other spending legislation	2,054,886	1,960,659	n.a.
Appropriation legislation	0	504,803	n.a.
Offsetting receipts	– 834,250	– 834,301	n.a.
Total, Previously Enacted	1,220,636	1,631,161	2,681,976
Entitlements and Mandatories:			
Budget resolution estimates of appropriated entitlements and other mandatory programs	1,017,381	995,610	0
Total Current Level ^a	2,238,017	2,626,771	2,681,976
Total Senate Resolution	3,212,350	3,219,191	2,681,976
Current Level Over Senate Resolution	n.a.	n.a.	n.a.
Current Level Under Senate Resolution	974,333	592,420	n.a.
Memorandum:			
Revenues, 2017–2026:			
Senate Current Level	n.a.	n.a.	32,350,752
Senate Resolution	n.a.	n.a.	32,350,752
Current Level Over Senate Resolution	n.a.	n.a.	n.a.
Current Level Under Senate Resolution	n.a.	n.a.	n.a.

Source: Congressional Budget Office.

Notes: n.a. = not applicable; P.L. = Public Law.

^aFor purposes of enforcing section 311 of the Congressional Budget Act in the Senate, the budget resolution does not include budget authority, outlays, or revenues for off-budget amounts. As a result, current level does not include these items.

TABLE 3.—SUMMARY OF THE SENATE PAY-AS-YOU-GO SCORECARD FOR THE 114TH CONGRESS, AS OF MAY 9, 2016

(In millions of dollars)

	2016–2021	2016–2026
Beginning Balance ^a	0	0
Enacted Legislation: ^b		
Breast Cancer Awareness Commemorative Coin Act (P.L. 114–148) ^c	0	0
Protect and Preserve International Cultural Property Act (P.L. 114–151)	*	*
Defend Trade Secrets Act of 2016 (S. 1890)	*	*
Current Balance	0	0
	2016–2021	2016–2026
Memorandum:		
Changes to Revenues	0	0
Changes to Outlays	0	0

Source: Congressional Budget Office.

Notes: n.e. = not able to estimate; P.L. = Public Law.

* = between –\$500,000 and \$500,000.

^a Pursuant to the statement printed in the Congressional Record on April 18, 2016, the Senate Pay-As-You-Go Scorecard was reset to zero.

^b The amounts shown represent the estimated impact of the public laws on the deficit. Negative numbers indicate an increase in the deficit; positive numbers indicate a decrease in the deficit.

^c Excludes off-budget amounts.

^d Excludes amounts designated as emergency requirements.

^e P.L. 114–148 will cause a decrease in spending of \$7 million in 2018 and an increase in spending of \$7 million in 2020 for a net impact of zero over the six-year and eleven-year periods.

**OLDER AMERICANS ACT
REAUTHORIZATION ACT OF 2016**

Mr. GARDNER. Mr. President, we wish to highlight an issue of importance to Colorado and its community of senior citizens. Earlier this month, Congress passed the Older Americans Act Reauthorization Act of 2016 and sent it to the President for his signature. This reauthorization ensures that a wide range of social and nutritional services directed to assist senior citizens is not disrupted. While the reauthorization improves the status quo for the State of Colorado, we continue to have concerns about the disproportionate level of funding going to our State in comparison to the rest of the country.

Mr. BENNET. I agree with my colleague from Colorado. In an attempt to protect certain States with guaranteed funding levels, in 2006 Congress changed the Older Americans Act funding formula to ensure States received a guaranteed funding level based on senior populations. Due to Colorado's growing senior population and this provision from 2006, Colorado saw massive cuts during sequestration, when other States did not.

Mr. GARDNER. Instead of allowing the funding to go to States with growing senior populations, the hold-harmless funding formula in the current reauthorization continues the disproportionate trend by preventing funding in States with lower senior populations from going to States with growing levels of senior citizens. While we are supportive of the services provided by the Older Americans Act, Congress's priority should be ensuring the stability of the programs that millions of seniors around the country depend upon.

Mr. BENNET. We believe that, moving forward, it is imperative that steps are taken in future reauthorizations to safeguard services for all seniors regardless of their State of residence. It is our hope that as Congress continues to address issues that are important to all senior citizens, we find a path forward to address the issue we have raised here today.

ADDITIONAL STATEMENTS

**TRIBUTE TO BRIGADIER GENERAL
TAMHRA HUTCHINS-FRYE**

● Mr. BOOZMAN. Mr. President, today I wish to congratulate Tamhra Hutchins-Frye on her recent promotion to brigadier general in the Arkansas Air National Guard.

Brigadier General Hutchins-Frye was born in Bakersfield, CA, and entered the Air National Guard in November 1984 as an airman first class. She received her commission in August 1989 through the Academy of Military Science in Knoxville, TN, and has held various assignments in the 188th Fighter Wing in Fort Smith, AR, the 189th Airlift Wing at the Little Rock Air Force Base, and Arkansas Air National Guard and Joint Force Headquarters at Camp Robinson in North Little Rock.

She was deployed to Kabul, Afghanistan, in support of Operation Enduring Freedom as the chief of staff of the North Atlantic Treaty Organization's Afghanistan Transformation Task Force and then the Headquarters International Security Assistance Force, where she helped lead the transformation of the Government of the Islamic Republic of Afghanistan as it transitioned to self-rule.

Tamhra earned a bachelor of science in elementary education from Arkansas Tech University in 1983 and a master of arts in human resource management from Webster University in 2012. She has also completed numerous trainings and programs during her time in the Air National Guard.

As a dedicated member of the Air National Guard, Hutchins-Frye has been awarded the Legion of Merit and a Bronze Star. She is also an active member of her community and takes a proactive role in giving back and investing in the lives of others as displayed by her roles as cochairman of the Women's Foundation of Arkansas's Girls of Promise and as a member of the board of directors of Heart of Arkansas United Way, among other types of service.

It is also important to note that Brigadier General Hutchins-Frye is the first woman to obtain this rank in the

Arkansas Air National Guard. By virtue of this latest achievement in her impressive and distinguished career, she serves as role model for many, including the young women in our Armed Forces, of how hard work and professionalism can lead to historic and ground-breaking achievements.

I offer my sincere congratulations to BG Tamhra Hutchins-Frye on this momentous occasion, and I applaud her continued commitment and dedication to our Nation's readiness. I know she will continue to make Arkansas proud in this new chapter of her career.●

**RECOGNIZING THE BENTONVILLE
POLICE DEPARTMENT**

● Mr. BOOZMAN. Mr. President, today I wish to celebrate the 100th anniversary of the Bentonville Police Department, which was established on May 9, 1916, when community leaders adopted an ordinance to create the Office of Watch to protect its 2,000 citizens.

As the community grew, so did the need to increase police personnel. In 1951, community leaders approved expanding the department by adding a chief of police, two patrolmen, and the first patrol car. A lot has changed with the Bentonville Police Department in the last century. Today there are 99 men and women in the police department providing services that extend beyond the description of the 1916 department, and they are doing things only imagined at that time.

The talents and abilities of the men and women serving in today's department are put to good use to protect the 44,000 Bentonville residents. They work tirelessly to ensure the public is safe as members of investigative units, forensic analysis teams, K9 teams, a bomb squad, a bicycle team, a SWAT team, and a crisis negotiations team. Their commitment to the community is exemplified by the numerous programs and outreach efforts they offer to the people of Bentonville.

The wide range of calls members of the Bentonville Police Department respond to shows the need for preparation and training. These officers are

among the most visible public servants and risk their lives to protect the community.

I offer my congratulations on this milestone and thank Bentonville Police Chief Jon Simpson and the officers and staff who serve and protect the citizens of Bentonville for their service to the community. They have made Bentonville one of the safest communities in Arkansas and in the United States.●

TRIBUTE TO AL RANKINS, SENIOR

● Mr. COCHRAN. Mr. President, I am pleased to commend Al Rankins, Sr., of Greenville, MS, for his service and contributions to the State of Mississippi while serving as the 80th president of the Delta Council. Since its founding in 1935, this important organization has grown into a widely respected economic development collaborative representing the business, professional, and agricultural interests of the Mississippi Delta region. I am grateful to Delta Council for its continuous role in meeting the economic and quality of life challenges in this unique part of our country.

Al Rankins' tenure as council president began in May 2015, and he has been a notably strong advocate for the Delta Council's role in water resources development. His effective leadership on flood control issues affecting the alluvial floodplain has served the area well. His former service as a local public official has provided him a unique perspective on the needs of proper access to healthcare, workforce readiness, educational progress, and important matters related to transportation infrastructure in this rural, predominantly agricultural region.

A native of Washington County, MS, Mr. Rankins graduated from Simmons High School in Hollandale, MS, and later received a bachelor's degree in criminal justice from Mississippi Valley State University. Prior to his contributions as president of Delta Council, Mr. Rankins served his community as a law enforcement officer, an elected county official, past president of 100 Black Men of the Mississippi Delta, and active participant in the local Boys and Girls Club. Mr. Rankins' dedication to the future of the delta and all of those who live there is laudable. I am pleased to join the people of my State in commending Al Rankins and sharing our appreciation with his wife, Mary, and their children, CeCelia, Alfred, Jr., Ansel, and Anthony, as the 81st annual meeting of the Delta Council organizational membership convenes.●

40TH ANNIVERSARY OF THE IMMIGRANT AND REFUGEE COMMUNITY ORGANIZATION

● Mr. WYDEN. Mr. President, this year marks the 40th anniversary of the Immigrant and Refugee Community Organization, IRCO, a nonprofit organiza-

tion that serves the many immigrant and refugee communities that come to Oregon seeking a new and better life.

Since its founding in 1976, IRCO has been helping individuals and families who come to the United States with few resources and little support. Established by refugees, for refugees, the organization has a long track record of providing vital housing, healthcare, and employment services. IRCO staff offer peer-to-peer assistance and culturally specific services through programs like the Asian Family Center and Africa House. IRCO served more than 28,000 people in 2015 alone, helping these new Oregonians integrate into communities across our State while maintaining an important connection to their rich heritage and traditions.

Beyond offering immediate support for those starting a life in the United States, IRCO has also become an advocacy arm for Oregon's immigrants and refugees. Its leadership development programs have graduated many individuals who have worked with key decisionmakers to pursue change in Oregon and beyond.

As many in this Chamber know, I am the son of immigrants who fled Nazi Germany to avoid persecution. The act of helping immigrants and refugees resettle, to become contributing Americans, is close to my heart. I know firsthand how this country thrives by harnessing the ideas, energy, and hard work of those who come to our shores—in fact, I stand here today as the proof. That is why I will continue to do what I can to support organizations, like IRCO, working day-in and day-out to ensure everyone gets a fair shot at success.

I conclude by congratulating IRCO on 40 years of tremendous service and by wishing all of its staff, volunteers, and partners continued success in the years to come.●

MESSAGES FROM THE PRESIDENT

Messages from the President of the United States were communicated to the Senate by Mr. Pate, one of his secretaries.

EXECUTIVE MESSAGES REFERRED

As in executive session the Presiding Officer laid before the Senate messages from the President of the United States submitting sundry nominations and a withdrawal which were referred to the appropriate committees.

(The messages received today are printed at the end of the Senate proceedings.)

MESSAGE FROM THE HOUSE

At 11:30 a.m., a message from the House of Representatives, delivered by Mrs. Cole, one of its reading clerks, announced that the House has passed the following bills, without amendment:

S. 32. An act to provide the Department of Justice with additional tools to target

extraterritorial drug trafficking activity, and for other purposes.

S. 125. An act to amend title I of the Omnibus Crime Control and Safe Streets Act of 1968 to extend the authorization of the Bulletproof Vest Partnership Grant Program through fiscal year 2020, and for other purposes.

S. 2755. An act to provide Capitol-flown flags to the immediate family of firefighters, law enforcement officers, members of rescue squads or ambulance crews, and public safety officers who are killed in the line of duty.

The message further announced that the House has passed the following bills, in which it requests the concurrence of the Senate:

H.R. 2137. An act to ensure Federal law enforcement officers remain able to ensure their own safety, and the safety of their families, during a covered furlough.

H.R. 3209. An act to amend the Internal Revenue Code of 1986 to permit the disclosure of certain tax return information for the purpose of missing or exploited children investigations.

H.R. 4063. An act to improve the use by the Secretary of Veterans Affairs of opioids in treating veterans, and for other purposes.

H.R. 4957. An act to designate the Federal building located at 99 New York Avenue, N.E., in the District of Columbia as the "Ariel Rios Federal Building".

H.R. 4985. An act to amend the Foreign Narcotics Kingpin Designation Act to protect classified information in Federal court challenges.

H.R. 5048. An act to require a study by the Comptroller General of the United States on Good Samaritan laws that pertain to treatment of opioid overdoses, and for other purposes.

H.R. 5052. An act to direct the Attorney General and the Secretary of Health and Human Services to evaluate the effectiveness of grant programs that provide grants for the primary purpose of providing assistance in addressing problems pertaining to opioid abuse, and for other purposes.

MEASURES REFERRED

The following bills were read the first and the second times by unanimous consent, and referred as indicated:

H.R. 3209. An act to amend the Internal Revenue Code of 1986 to permit the disclosure of certain tax return information for the purpose of missing or exploited children investigations; to the Committee on Finance.

H.R. 4063. An act to improve the use by the Secretary of Veterans Affairs of opioids in treating veterans, and for other purposes; to the Committee on Veterans' Affairs.

H.R. 4985. An act to amend the Foreign Narcotics Kingpin Designation Act to protect classified information in Federal court challenges; to the Committee on the Judiciary.

H.R. 5048. An act to require a study by the Comptroller General of the United States on Good Samaritan laws that pertain to treatment of opioid overdoses, and for other purposes; to the Committee on the Judiciary.

H.R. 5052. An act to direct the Attorney General and the Secretary of Health and Human Services to evaluate the effectiveness of grant programs that provide grants for the primary purpose of providing assistance in addressing problems pertaining to opioid abuse, and for other purposes; to the Committee on the Judiciary.

EXECUTIVE AND OTHER
COMMUNICATIONS

The following communications were laid before the Senate, together with accompanying papers, reports, and documents, and were referred as indicated:

EC-5359. A communication from the Secretary of the Senate, transmitting, pursuant to law, the report of the receipts and expenditures of the Senate for the period from October 1, 2015 through March 31, 2016, received in the Office of the President of the Senate on May 11, 2016; ordered to lie on the table.

EC-5360. A communication from the Director of the Regulatory Management Division, Environmental Protection Agency, transmitting, pursuant to law, the report of a rule entitled "Butanedioic acid, 2-sulfo-, C-C9-11-isoalkyl esters, ClO-rich, disodium salts; Exemption from the Requirement of a Tolerance" (FRL No. 9945-58-OCSPP) received during adjournment of the Senate in the Office of the President of the Senate on May 5, 2016; to the Committee on Agriculture, Nutrition, and Forestry.

EC-5361. A communication from the Director of the Regulatory Management Division, Environmental Protection Agency, transmitting, pursuant to law, the report of a rule entitled "Clethodim; Pesticide Tolerances" (FRL No. 9945-68-OCSPP) received during adjournment of the Senate in the Office of the President of the Senate on May 5, 2016; to the Committee on Agriculture, Nutrition, and Forestry.

EC-5362. A communication from the Director of the Regulatory Management Division, Environmental Protection Agency, transmitting, pursuant to law, the report of a rule entitled "Fluxapyroxad; Pesticide Tolerances" (FRL No. 9945-48-OCSPP) received during adjournment of the Senate in the Office of the President of the Senate on May 5, 2016; to the Committee on Agriculture, Nutrition, and Forestry.

EC-5363. A communication from the Administrator of the Specialty Crops Program, Agricultural Marketing Service, Department of Agriculture, transmitting, pursuant to law, the report of a rule entitled "Grapes Grown in a Designated Area of Southeastern California and Imported Table Grapes; Revisions to the Administrative Rules and Regulations for Shipments to Charitable Organizations" (Docket No. AMS-FV-14-0100) received during adjournment of the Senate in the Office of the President of the Senate on May 4, 2016; to the Committee on Agriculture, Nutrition, and Forestry.

EC-5364. A communication from the Under Secretary of Defense (Acquisition, Technology and Logistics), transmitting, pursuant to law, a report entitled "Report to Congress on Corrosion Policy and Oversight Budget Materials"; to the Committee on Armed Services.

EC-5365. A communication from the Director of Defense Procurement and Acquisition Policy, Department of Defense, transmitting, pursuant to law, the report of a rule entitled "Defense Federal Acquisition Regulation Supplement: Long-Haul Telecommunications" ((RIN0750-A172) (DFARS Case 2015-D023)) received during adjournment of the Senate in the Office of the President of the Senate on May 5, 2016; to the Committee on Armed Services.

EC-5366. A communication from the Director of Defense Procurement and Acquisition Policy, Department of Defense, transmitting, pursuant to law, the report of a rule entitled "Defense Federal Acquisition Regulation Supplement: Duty-Free Entry Threshold" ((RIN0750-A176) (DFARS Case 2015-D036)) received during adjournment of the Senate in the Office of the President of the

Senate on May 5, 2016; to the Committee on Armed Services.

EC-5367. A communication from the Director of Defense Procurement and Acquisition Policy, Department of Defense, transmitting, pursuant to law, the report of a rule entitled "Defense Federal Acquisition Regulation Supplement: Multiyear Contract Requirements" ((RIN0750-A180) (DFARS Case 2015-D009)) received during adjournment of the Senate in the Office of the President of the Senate on May 5, 2016; to the Committee on Armed Services.

EC-5368. A communication from the Director of Defense Procurement and Acquisition Policy, Department of Defense, transmitting, pursuant to law, the report of a rule entitled "Defense Federal Acquisition Regulation Supplement: Disclosure to Litigation Support Contractors" ((RIN0750-AH54) (DFARS Case 2012-D029)) received during adjournment of the Senate in the Office of the President of the Senate on May 5, 2016; to the Committee on Armed Services.

EC-5369. A communication from the Director of Defense Procurement and Acquisition Policy, Department of Defense, transmitting, pursuant to law, the report of a rule entitled "Defense Federal Acquisition Regulation Supplement: Contract Term Limit for Energy Savings Contracts" ((RIN0750-A174) (DFARS Case 2015-D018)) received during adjournment of the Senate in the Office of the President of the Senate on May 5, 2016; to the Committee on Armed Services.

EC-5370. A communication from the Assistant Secretary of Defense (Personnel and Readiness), transmitting, pursuant to law, a report entitled "Report Specifying for Each Reserve Component The Additional Items of Equipment That Would be Procured, and the Additional Military Construction Projects That Would be Carried Out When the Aggregate Amounts Identified For Reserve Component Equipment And Construction In The Future-Years Defense Program Is Less Than An Amount Equal To 90 Percent Of The Average Authorized Amount For These Requirements In The Preceding Two Fiscal Years"; to the Committee on Armed Services.

EC-5371. A communication from the Secretary of Energy, transmitting, pursuant to law, a report concerning operations at the Naval Petroleum Reserves for fiscal year 2015; to the Committee on Armed Services.

EC-5372. A communication from the Secretary, Division of Corporation Finance, Securities and Exchange Commission, transmitting, pursuant to law, the report of a rule entitled "Changes to Exchange Act Registration Requirements to Implement Title V and Title VI of the JOBS Act" (RIN3235-AL40) received during adjournment of the Senate in the Office of the President of the Senate on May 4, 2016; to the Committee on Banking, Housing, and Urban Affairs.

EC-5373. A communication from the President of the United States, transmitting, pursuant to law, a report on the continuation of the national emergency that was originally declared in Executive Order 13338 of May 11, 2004, with respect to the blocking of property of certain persons and prohibition of exportation and re-exportation of certain goods to Syria; to the Committee on Banking, Housing, and Urban Affairs.

EC-5374. A communication from the Chief Counsel, Federal Emergency Management Agency, Department of Homeland Security, transmitting, pursuant to law, the report of a rule entitled "Suspension of Community Eligibility" ((44 CFR Part 64) (Docket No. FEMA-2016-0002)) received during adjournment of the Senate in the Office of the President of the Senate on May 4, 2016; to the Committee on Banking, Housing, and Urban Affairs.

EC-5375. A communication from the Secretary of the Treasury, transmitting, pursuant to law, a six-month periodic report on the national emergency with respect to the situation in or in relation to the Democratic Republic of the Congo that was declared in Executive Order 13413 of October 27, 2006; to the Committee on Banking, Housing, and Urban Affairs.

EC-5376. A communication from the Secretary of the Treasury, transmitting, pursuant to law, a report relative to operation of the Exchange Stabilization Fund (ESF) for fiscal year 2015; to the Committee on Banking, Housing, and Urban Affairs.

EC-5377. A communication from the Secretary of Commerce, transmitting, pursuant to law, a report relative to the export to the People's Republic of China of items not detrimental to the U.S. space launch industry; to the Committee on Banking, Housing, and Urban Affairs.

EC-5378. A communication from the Assistant General Counsel for Legislation, Regulation and Energy Efficiency, Office of Energy Efficiency and Renewable Energy, Department of Energy, transmitting, pursuant to law, the report of a rule entitled "Establishment of Procedures for Requests for Correction of Errors in Rules" (RIN1904-AD63) received during adjournment of the Senate in the Office of the President of the Senate on May 5, 2016; to the Committee on Energy and Natural Resources.

EC-5379. A communication from the Principal Deputy Assistant Secretary for Fish and Wildlife and Parks, Fish and Wildlife Service, Department of the Interior, transmitting, pursuant to law, the report of a rule entitled "Refuge-Specific Regulations; Public Use; Kenai National Wildlife Refuge" (RIN1018-AX56) received during adjournment of the Senate in the Office of the President of the Senate on May 3, 2016; to the Committee on Energy and Natural Resources.

EC-5380. A communication from the Director of the Regulatory Management Division, Environmental Protection Agency, transmitting, pursuant to law, the report of a rule entitled "Technical Amendments to Performance Specification 18 and Procedure 6" ((RIN2060-AS86) (FRL No. 9944-26-OAR)) received during adjournment of the Senate in the Office of the President of the Senate on May 5, 2016; to the Committee on Environment and Public Works.

EC-5381. A communication from the Director of the Regulatory Management Division, Environmental Protection Agency, transmitting, pursuant to law, the report of a rule entitled "Revision to the Research, Development and Demonstration Permits Rule for Municipal Solid Waste Landfills" ((RIN2050-AG75) (FRL No. 9943-87-OLEM)) received during adjournment of the Senate in the Office of the President of the Senate on May 5, 2016; to the Committee on Environment and Public Works.

EC-5382. A communication from the Director of the Regulatory Management Division, Environmental Protection Agency, transmitting, pursuant to law, the report of a rule entitled "Designation of Areas for Air Quality Planning Purposes; Redesignation Request and Associated Maintenance Plan for Billings, MT 2010 SO2 Nonattainment Area" (FRL No. 9945-64-Region 8) received during adjournment of the Senate in the Office of the President of the Senate on May 5, 2016; to the Committee on Environment and Public Works.

EC-5383. A communication from the Director of the Regulatory Management Division, Environmental Protection Agency, transmitting, pursuant to law, the report of a rule entitled "Approval and Promulgation of Implementation Plans; Idaho; Interstate Transport Requirements for the 2010 Nitrogen Dioxide National Ambient Air Quality Standards" (FRL No. 9946-00-Region 10) received

during adjournment of the Senate in the Office of the President of the Senate on May 5, 2016; to the Committee on Environment and Public Works.

EC-5384. A communication from the Director of the Regulatory Management Division, Environmental Protection Agency, transmitting, pursuant to law, the report of a rule entitled "Air Plan Approval; Indiana; Commissioner's Orders for A. B. Brown and Clifty Creek" (FRL No. 9946-08-Region 5) received during adjournment of the Senate in the Office of the President of the Senate on May 5, 2016; to the Committee on Environment and Public Works.

EC-5385. A communication from the Assistant Secretary of the Army (Civil Works), transmitting, pursuant to law, an annual report on civil works activities for fiscal year 2012; to the Committee on Environment and Public Works.

EC-5386. A communication from the Chief of the Publications and Regulations Branch, Internal Revenue Service, Department of the Treasury, transmitting, pursuant to law, the report of a rule entitled "Suspension of Benefits Under the Multiemployer Pension Reform Act of 2014" ((RIN1545-BM66 and RIN1545-BM86) (TD 9765)) received during adjournment of the Senate in the Office of the President of the Senate on May 2, 2016; to the Committee on Finance.

EC-5387. A communication from the Regulations Coordinator, Centers for Medicare and Medicaid Services, Department of Health and Human Services, transmitting, pursuant to law, the report of a rule entitled "Medicare and Medicaid Programs; Fire Safety Requirements for Certain Health Care Facilities" ((RIN0938-AR72) (CMS-3277-F)) received during adjournment of the Senate in the Office of the President of the Senate on May 4, 2016; to the Committee on Finance.

EC-5388. A communication from the Chief of the Publications and Regulations Branch, Internal Revenue Service, Department of the Treasury, transmitting, pursuant to law, the report of a rule entitled "Annual Price Inflation Adjustments for Contribution Limitations Made to a Health Savings Account Pursuant to Section 223 of the Internal Revenue Code" (Rev. Proc. 2016-28) received during adjournment of the Senate in the Office of the President of the Senate on May 2, 2016; to the Committee on Finance.

EC-5389. A communication from the Chief of the Publications and Regulations Branch, Internal Revenue Service, Department of the Treasury, transmitting, pursuant to law, the report of a rule entitled "Applicable Federal Rates—May 2016" (Rev. Rul. 2016-11) received during adjournment of the Senate in the Office of the President of the Senate on May 2, 2016; to the Committee on Finance.

EC-5390. A communication from the Chief of the Publications and Regulations Branch, Internal Revenue Service, Department of the Treasury, transmitting, pursuant to law, the report of a rule entitled "Examples of Program Related Investments" ((RIN1545-BK76) (TD 9762)) received during adjournment of the Senate in the Office of the President of the Senate on May 2, 2016; to the Committee on Finance.

EC-5391. A communication from the Chief of the Publications and Regulations Branch, Internal Revenue Service, Department of the Treasury, transmitting, pursuant to law, the report of a rule entitled "Determination of Adjusted Applicable Federal Rates and the Adjusted Federal Long-Term Rate" ((RIN1545-BM20) (TD 9763)) received during adjournment of the Senate in the Office of the President of the Senate on May 2, 2016; to the Committee on Finance.

EC-5392. A communication from the Chief of the Publications and Regulations Branch, Internal Revenue Service, Department of the

Treasury, transmitting, pursuant to law, the report of a rule entitled "Section 6708 Failure to Maintain List of Advisees With Respect to Reportable Transactions" ((RIN1545-BF39) (TD 9764)) received during adjournment of the Senate in the Office of the President of the Senate on May 2, 2016; to the Committee on Finance.

EC-5393. A communication from the Assistant Secretary, Legislative Affairs, Department of State, transmitting, pursuant to law, two reports relative to the Treaty Between the United States of America and the Russian Federation on Measures for the Further Reduction and Limitation of Strategic Offensive Arms (the New START Treaty) (OSS-2016-0098); to the Committee on Foreign Relations.

EC-5394. A communication from the Principal Deputy Assistant Secretary, Bureau of Political-Military Affairs, Department of State, transmitting, pursuant to law, an addendum to a certification, of the proposed sale or export of defense articles and/or defense services to a Middle East country regarding any possible affects such a sale might have relating to Israel's Qualitative Military Edge over military threats to Israel (OSS-2016-0712); to the Committee on Foreign Relations.

EC-5395. A communication from the Principal Deputy Assistant Secretary, Bureau of Political-Military Affairs, Department of State, transmitting, pursuant to law, an addendum to a certification, of the proposed sale or export of defense articles and/or defense services to a Middle East country regarding any possible affects such a sale might have relating to Israel's Qualitative Military Edge over military threats to Israel (OSS-2016-0713); to the Committee on Foreign Relations.

EC-5396. A communication from the Acting Assistant Secretary, Bureau of Political-Military Affairs, Department of State, transmitting, pursuant to law, an addendum to a certification, of the proposed sale or export of defense articles and/or defense services to a Middle East country regarding any possible affects such a sale might have relating to Israel's Qualitative Military Edge over military threats to Israel (OSS-2016-0643); to the Committee on Foreign Relations.

EC-5397. A communication from the Acting Assistant Secretary, Bureau of Political-Military Affairs, Department of State, transmitting, pursuant to law, an addendum to a certification, of the proposed sale or export of defense articles and/or defense services to a Middle East country regarding any possible affects such a sale might have relating to Israel's Qualitative Military Edge over military threats to Israel (OSS-2016-0644); to the Committee on Foreign Relations.

EC-5398. A communication from the Assistant Legal Adviser for Treaty Affairs, Department of State, transmitting, pursuant to the Case-Zablocki Act, 1 U.S.C. 112b, as amended, the report of the texts and background statements of international agreements, other than treaties (List 2016-0064 - 2016-0065); to the Committee on Foreign Relations.

EC-5399. A communication from the Assistant Secretary, Legislative Affairs, Department of State, transmitting, pursuant to law, a report relative to the status of the Government of Cuba's compliance with the United States-Cuba September 1994 "Joint Communiqué" and on the treatment of persons returned to Cuba in accordance with the United States-Cuba May 1995 "Joint Statement"; to the Committee on Foreign Relations.

EC-5400. A communication from the Director of Regulations and Policy Management Staff, Food and Drug Administration, Department of Health and Human Services, transmitting, pursuant to law, the report of

a rule entitled "Standard Preparations, Limits of Potency, and Dating Period Limitations for Biological Products" (Docket No. FDA-2016-N-1170) received in the Office of the President of the Senate on May 9, 2016; to the Committee on Health, Education, Labor, and Pensions.

EC-5401. A communication from the Regulations Coordinator, Administration for Community Living, Department of Health and Human Services, transmitting, pursuant to law, the report of a rule entitled "National Institute on Disability, Independent Living, and Rehabilitation Research" (RIN0985-AA12) received in the Office of the President of the Senate on May 10, 2016; to the Committee on Health, Education, Labor, and Pensions.

EC-5402. A communication from the Regulations Coordinator, Centers for Medicare and Medicaid Services, Department of Health and Human Services, transmitting, pursuant to law, the report of a rule entitled "Patient Protection and Affordable Care Act; Amendments to Special Enrollment Periods and the Consumer Operated and Oriented Plan Programs" (RIN0938-AS87) received in the Office of the President of the Senate on May 10, 2016; to the Committee on Health, Education, Labor, and Pensions.

EC-5403. A communication from the Assistant Secretary for Legislation, Department of Health and Human Services, transmitting, pursuant to law, a report entitled "2015 National Healthcare Quality and Disparities Report"; to the Committee on Health, Education, Labor, and Pensions.

EC-5404. A communication from the Assistant Secretary for Legislation, Department of Health and Human Services, transmitting, pursuant to law, reports entitled "Community Services Block Grant (CSBG) Report to Congress" for fiscal year 2015; to the Committee on Health, Education, Labor, and Pensions.

EC-5405. A communication from the Director of Regulations and Policy Management Staff, Food and Drug Administration, Department of Health and Human Services, transmitting, pursuant to law, the report of a rule entitled "Foreign Supplier Verification Programs for Importers of Food for Humans and Animals; Technical Amendment" ((RIN0910-AG64) (Docket No. FDA-2011-N-0143)) received during adjournment of the Senate in the Office of the President of the Senate on May 2, 2016; to the Committee on Health, Education, Labor, and Pensions.

EC-5406. A communication from the Director of Regulations and Policy Management Staff, Food and Drug Administration, Department of Health and Human Services, transmitting, pursuant to law, the report of a rule entitled "Standards for the Growing, Harvesting, Packing, and Holding of Produce for Human Consumption; Technical Amendment" ((RIN0910-AG35) (Docket No. FDA-2011-N-0921)) received during adjournment of the Senate in the Office of the President of the Senate on May 4, 2016; to the Committee on Health, Education, Labor, and Pensions.

EC-5407. A communication from the Assistant Secretary for Administration and Management, Department of Labor, transmitting, pursuant to law, the report of a rule entitled "Department of Labor Implementation of OMB Guidance on Nonprocurement Debarment and Suspension"; to the Committee on Health, Education, Labor, and Pensions.

EC-5408. A communication from the Assistant Attorney General, Office of Legislative Affairs, Department of Justice, transmitting, pursuant to law, the Department's fiscal year 2015 annual report relative to the Notification and Federal Employee Anti-discrimination and Retaliation Act of 2002 (No FEAR Act); to the Committee on Homeland Security and Governmental Affairs.

EC-5409. A communication from the District of Columbia Auditor, transmitting, pursuant to law, a report entitled "Review of Summer Youth Employment Programs in Eight Major Cities and the District of Columbia"; to the Committee on Homeland Security and Governmental Affairs.

EC-5410. A communication from the Chair of the Board of Governors, Federal Reserve System, transmitting, pursuant to law, the Inspector General's Semiannual Report for the six-month period from October 1, 2015 through March 31, 2016; to the Committee on Homeland Security and Governmental Affairs.

EC-5411. A communication from the Chairman of the National Credit Union Administration, transmitting, pursuant to law, the semi-annual report of the Inspector General for the period from October 1, 2015 through March 31, 2016; to the Committee on Homeland Security and Governmental Affairs.

EC-5412. A communication from the Chairman of the Council of the District of Columbia, transmitting, pursuant to law, a report on D.C. Act 21-374, "Youth Suicide Prevention and School Climate Survey Amendment Act of 2016"; to the Committee on Homeland Security and Governmental Affairs.

EC-5413. A communication from the Chairman of the Council of the District of Columbia, transmitting, pursuant to law, a report on D.C. Act 21-375, "Firehouse Parking Exception Regulation Amendment Act of 2016"; to the Committee on Homeland Security and Governmental Affairs.

EC-5414. A communication from the Chairman of the Council of the District of Columbia, transmitting, pursuant to law, a report on D.C. Act 21-376, "Director of the Homeland Security and Emergency Management Agency Salary Approval Temporary Amendment Act of 2016"; to the Committee on Homeland Security and Governmental Affairs.

EC-5415. A communication from the Chairman of the Council of the District of Columbia, transmitting, pursuant to law, a report on D.C. Act 21-377, "Supporting Normalcy and Empowering Children in Foster Care Temporary Amendment Act of 2016"; to the Committee on Homeland Security and Governmental Affairs.

EC-5416. A communication from the Chairman of the Council of the District of Columbia, transmitting, pursuant to law, a report on D.C. Act 21-378, "Transportation Reorganization Amendment Act of 2016"; to the Committee on Homeland Security and Governmental Affairs.

EC-5417. A communication from the Assistant Attorney General, Office of Legislative Affairs, Department of Justice, transmitting proposed legislation; to the Committee on the Judiciary.

EC-5418. A communication from the Assistant Attorney General, Office of Legislative Affairs, Department of Justice, transmitting, pursuant to law, an annual report on applications made by the Government for authority to conduct electronic surveillance for foreign intelligence during calendar year 2015 relative to the Foreign Intelligence Surveillance Act of 1978; to the Committee on the Judiciary.

EC-5419. A communication from the Clerk of the Supreme Court of the United States, transmitting, pursuant to law, a report relative to submitted amendments to the Rules of Appellate and Criminal Procedure; to the Committee on the Judiciary.

EC-5420. A communication from the Deputy Assistant Administrator of the Office of Diversion Control, Drug Enforcement Agency, Department of Justice, transmitting, pursuant to law, the report of a rule entitled "Schedules of Controlled Substances: Temporary Placement of Butyryl Fentanyl and

Beta-Hydroxythiofentanyl into Schedule I" (Docket No. DEA-434F) received in the Office of the President of the Senate on May 9, 2016; to the Committee on the Judiciary.

EC-5421. A communication from the Deputy Assistant Administrator of the Office of Diversion Control, Drug Enforcement Agency, Department of Justice, transmitting, pursuant to law, the report of a rule entitled "Schedules of Controlled Substances: Placement of Brivaracetam into Schedule V" (Docket No. DEA-435) received in the Office of the President of the Senate on May 9, 2016; to the Committee on the Judiciary.

EC-5422. A communication from the Attorney-Advisor, Office of General Counsel, Department of Transportation, transmitting, pursuant to law, a report relative to a vacancy in the position of Administrator, Federal Transit Administration, Department of Transportation, received during adjournment of the Senate in the Office of the President of the Senate on May 3, 2016; to the Committee on Commerce, Science, and Transportation.

EC-5423. A communication from the Deputy Assistant Administrator, Office of Sustainable Fisheries, Department of Commerce, transmitting, pursuant to law, the report of a rule entitled "List of Fisheries for 2016" (RIN0648-BE88) received during adjournment of the Senate in the Office of the President of the Senate on May 4, 2016; to the Committee on Commerce, Science, and Transportation.

EC-5424. A communication from the Assistant General Counsel for Regulatory Affairs, Consumer Product Safety Commission, transmitting, pursuant to law, the report of a rule entitled "Commission Participation and Commission Employee Involvement in Voluntary Standards Activities" (RIN3041-AD32) received during adjournment of the Senate in the Office of the President of the Senate on May 4, 2016; to the Committee on Commerce, Science, and Transportation.

PETITIONS AND MEMORIALS

The following petition or memorial was laid before the Senate and was referred or ordered to lie on the table as indicated:

POM-165. A resolution adopted by the House of Representatives of the State of Florida condemning the international Boycott, Divestment, and Sanctions (BDS) movement against the State of Israel and calls upon its governmental institutions to denounce hatred and discrimination whenever they appear; to the Committee on Foreign Relations.

HOUSE RESOLUTION 1001

Whereas, the citizens of the State of Florida have long opposed bigotry, oppression, discrimination, and injustice as a matter of public policy, and

Whereas, Florida and Israel have enjoyed a long history of friendship and are great allies in support of each other's interests, and

Whereas, the State of Israel, the only democracy in the Middle East, is the greatest friend and ally of the United States in that region, and

Whereas, the elected representatives of the state recognize the importance of expressing Florida's unwavering support of the Jewish people and the State of Israel's right to exist and right to self-defense, and

Whereas, there are increasing incidents of anti-Semitism throughout the world, including in the United States and in Florida, reflected in official hate crime statistics, and

Whereas, the international Boycott, Divestment, and Sanctions (BDS) movement is one of the main vehicles for spreading anti-

Semitic perspectives and advocating the elimination of the Jewish State, and

Whereas, activities promoting Boycott, Divestment, and Sanctions against Israel have increased in the State of Florida, including on university campuses and in other Florida communities, and contribute to the promotion anti-Semitic and anti-Zionist propaganda, and

Whereas, the increase in BDS campaign activities on college campuses around the country has resulted in increased confrontation, intimidation, and discrimination against Jewish students, and

Whereas, leaders of the BDS movement express that their goal is to eliminate Israel as the national home of the Jewish people, and

Whereas, the BDS campaign's call for academic and cultural boycotts has been condemned by many of our nation's largest academic associations, more than 250 university presidents, and many other leading scholars as a violation of the bedrock principle of academic freedom: Now, therefore, be it

Resolved by the House of Representatives of the State of Florida, That the Florida House of Representatives condemns the international Boycott, Divestment, and Sanctions (BDS) movement against the State of Israel and calls upon its governmental institutions to denounce hatred and discrimination whenever they appear; and be it further

Resolved, That copies of this resolution be presented to the President of the United States, the President and Secretary of the United States Senate, the Speaker and Clerk of the United States House of Representatives, and the Israeli Embassy in Washington, D.C., for transmission to the proper authorities of the State of Israel as a tangible token of the sentiments expressed herein.

INTRODUCTION OF BILLS AND JOINT RESOLUTIONS

The following bills and joint resolutions were introduced, read the first and second times by unanimous consent, and referred as indicated:

By Mr. TOOMEY (for himself and Mr. CORNYN):

S. 2919. A bill to amend title 38, United States Code, to provide greater flexibility to States in carrying out the Disabled Veterans' Outreach Program and employing local veterans' employment representatives, and for other purposes; to the Committee on Veterans' Affairs.

By Mr. BARRASSO (for himself and Mr. MCCAIN):

S. 2920. A bill to amend the Tribal Law and Order Act of 2010 and the Indian Law Enforcement Reform Act to provide for advancements in public safety services to Indian communities, and for other purposes; to the Committee on Indian Affairs.

By Mr. ISAKSON (for himself, Mr. BLUMENTHAL, Mr. TILLIS, Mr. TESTER, Mr. UDALL, Mr. BENNET, Mr. ROUNDS, Mrs. FEINSTEIN, Mr. BOOZMAN, Mr. HELLER, Mrs. MURRAY, Mr. MANCHIN, Ms. HIRONO, Mr. BROWN, Mr. LEAHY, Mr. DAINES, Mr. SULLIVAN, Mrs. SHAHEEN, Mr. DURBIN, Mr. NELSON, Ms. CANTWELL, Ms. BALDWIN, Mr. CASEY, Mr. KAINE, Mr. BOOKER, Mr. SCHATZ, Mr. MORAN, Mr. BLUNT, Mr. FRANKEN, Ms. KLOBUCHAR, Mr. HEINRICH, and Mrs. MCCASKILL):

S. 2921. A bill to amend title 38, United States Code, to improve the accountability of employees of the Department of Veterans Affairs, to improve health care and benefits for veterans, and for other purposes; to the Committee on Veterans' Affairs.

By Mr. WHITEHOUSE:

S. 2922. A bill to amend title 38, United States Code, to provide for partnerships and contracts between the Secretary of Veterans Affairs and eligible academic affiliates for the mutually beneficial coordination, use, or exchange of health-care resources, and for other purposes; to the Committee on Veterans' Affairs.

ADDITIONAL COSPONSORS

S. 386

At the request of Mr. THUNE, the names of the Senator from West Virginia (Mrs. CAPITO) and the Senator from Arizona (Mr. FLAKE) were added as cosponsors of S. 386, a bill to limit the authority of States to tax certain income of employees for employment duties performed in other States.

S. 927

At the request of Mr. NELSON, his name was added as a cosponsor of S. 927, a bill to provide regulatory relief for certain financial institutions, and for other purposes.

S. 1148

At the request of Mr. NELSON, the name of the Senator from New Jersey (Mr. BOOKER) was added as a cosponsor of S. 1148, a bill to amend title XVIII of the Social Security Act to provide for the distribution of additional residency positions, and for other purposes.

S. 1175

At the request of Mr. WYDEN, the name of the Senator from Connecticut (Mr. BLUMENTHAL) was added as a cosponsor of S. 1175, a bill to improve the safety of hazardous materials rail transportation, and for other purposes.

S. 2040

At the request of Mr. CORNYN, the name of the Senator from Massachusetts (Ms. WARREN) was added as a cosponsor of S. 2040, a bill to deter terrorism, provide justice for victims, and for other purposes.

S. 2067

At the request of Mr. WICKER, the name of the Senator from New Jersey (Mr. BOOKER) was added as a cosponsor of S. 2067, a bill to establish EUREKA Prize Competitions to accelerate discovery and development of disease-modifying, preventive, or curative treatments for Alzheimer's disease and related dementia, to encourage efforts to enhance detection and diagnosis of such diseases, or to enhance the quality and efficiency of care of individuals with such diseases.

S. 2341

At the request of Mr. BENNET, the name of the Senator from Pennsylvania (Mr. CASEY) was added as a cosponsor of S. 2341, a bill to designate a portion of the Arctic National Wildlife Refuge as wilderness.

S. 2437

At the request of Ms. MIKULSKI, the name of the Senator from Texas (Mr. CORNYN) was added as a cosponsor of S. 2437, a bill to amend title 38, United States Code, to provide for the burial of the cremated remains of persons who

served as Women's Air Forces Service Pilots in Arlington National Cemetery, and for other purposes.

S. 2566

At the request of Mrs. SHAHEEN, the name of the Senator from New Hampshire (Ms. AYOTTE) was added as a cosponsor of S. 2566, a bill to amend title 18, United States Code, to provide sexual assault survivors with certain rights, and for other purposes.

S. 2577

At the request of Mr. CORNYN, the name of the Senator from California (Mrs. FEINSTEIN) was added as a cosponsor of S. 2577, a bill to protect crime victims' rights, to eliminate the substantial backlog of DNA and other forensic evidence samples to improve and expand the forensic science testing capacity of Federal, State, and local crime laboratories, to increase research and development of new testing technologies, to develop new training programs regarding the collection and use of forensic evidence, to provide post-conviction testing of DNA evidence to exonerate the innocent, to support accreditation efforts of forensic science laboratories and medical examiner offices, to address training and equipment needs, to improve the performance of counsel in State capital cases, and for other purposes.

S. 2659

At the request of Mr. BURR, the name of the Senator from Arkansas (Mr. BOOZMAN) was added as a cosponsor of S. 2659, a bill to reaffirm that the Environmental Protection Agency cannot regulate vehicles used solely for competition, and for other purposes.

S. 2702

At the request of Mr. CASEY, the name of the Senator from Connecticut (Mr. MURPHY) was added as a cosponsor of S. 2702, a bill to amend the Internal Revenue Code of 1986 to allow individuals with disabilities to save additional amounts in their ABLE accounts above the current annual maximum contribution if they work and earn income.

S. 2750

At the request of Mr. WYDEN, the name of the Senator from Minnesota (Ms. KLOBUCHAR) was added as a cosponsor of S. 2750, a bill to amend the Internal Revenue Code to extend and modify certain charitable tax provisions.

S. 2825

At the request of Ms. COLLINS, the names of the Senator from Wisconsin (Ms. BALDWIN) and the Senator from Michigan (Ms. STABENOW) were added as cosponsors of S. 2825, a bill to amend title 37, United States Code, to require compliance with domestic source requirements for footwear furnished to enlisted members of the Armed Forces upon their initial entry into the Armed Forces.

S. 2833

At the request of Mr. BLUMENTHAL, the name of the Senator from New York (Mrs. GILLIBRAND) was added as a

cosponsor of S. 2833, a bill to amend section 214(c)(8) of the Immigration and Nationality Act to modify the data reporting requirements relating to nonimmigrant employees, and for other purposes.

S. 2840

At the request of Mr. CORNYN, the names of the Senator from North Carolina (Mr. TILLIS) and the Senator from North Dakota (Ms. HEITKAMP) were added as cosponsors of S. 2840, a bill to amend the Omnibus Crime Control and Safe Streets Act of 1968 to authorize COPS grantees to use grant funds for active shooter training, and for other purposes.

S. 2864

At the request of Mr. WYDEN, the names of the Senator from New York (Mr. SCHUMER) and the Senator from Rhode Island (Mr. WHITEHOUSE) were added as cosponsors of S. 2864, a bill to amend title XVIII of the Social Security Act to prevent catastrophic out-of-pocket spending on prescription drugs for seniors and individuals with disabilities.

S. 2865

At the request of Mr. CARDIN, the name of the Senator from Florida (Mr. RUBIO) was added as a cosponsor of S. 2865, a bill to promote stability and security in the Asia-Pacific maritime domains, and for other purposes.

S. 2904

At the request of Mr. WHITEHOUSE, the name of the Senator from Arkansas (Mr. COTTON) was added as a cosponsor of S. 2904, a bill to amend title II of the Social Security Act to eliminate the five month waiting period for disability insurance benefits under such title for individuals with amyotrophic lateral sclerosis.

S.J. RES. 15

At the request of Mr. CARDIN, the name of the Senator from New York (Mr. SCHUMER) was added as a cosponsor of S.J. Res. 15, a joint resolution removing the deadline for the ratification of the equal rights amendment.

S.J. RES. 16

At the request of Mr. MENENDEZ, the name of the Senator from New York (Mr. SCHUMER) was added as a cosponsor of S.J. Res. 16, a joint resolution proposing an amendment to the Constitution of the United States relative to equal rights for men and women.

S. RES. 349

At the request of Mr. ROBERTS, the name of the Senator from North Carolina (Mr. BURR) was added as a cosponsor of S. Res. 349, a resolution congratulating the Farm Credit System on the celebration of its 100th anniversary.

S. RES. 459

At the request of Mr. ISAKSON, the name of the Senator from New Hampshire (Ms. AYOTTE) was added as a cosponsor of S. Res. 459, a resolution recognizing the importance of cancer research and the vital contributions of scientists, clinicians, cancer survivors,

and other patient advocates across the United States who are dedicated to finding a cure for cancer, and designating May 2016, as “National Cancer Research Month”.

At the request of Mrs. FEINSTEIN, the name of the Senator from Ohio (Mr. BROWN) was added as a cosponsor of S. Res. 459, supra.

STATEMENTS ON INTRODUCED BILLS AND JOINT RESOLUTIONS

By Mr. BARRASSO (for himself and Mr. MCCAIN):

S. 2920. A bill to amend the Tribal Law and Order Act of 2010 and the Indian Law Enforcement Reform Act to provide for advancements in public safety services to Indian communities, and for other purposes; to the Committee on Indian Affairs.

Mr. BARRASSO. Mr. President, I rise today to speak on the Tribal Law and Order Act Reauthorization and Amendments Act of 2016. Senator MCCAIN and I are introducing this important piece of legislation to enhance public safety efforts in American Indian and Alaska Native communities.

I want to thank Senator MCCAIN for his leadership, as a former Chairman and a current Member of the Senate Committee on Indian Affairs, on this issue. He has been a staunch advocate for safe Indian communities, particularly for the children.

This bill would build on the improvements made by the Tribal Law and Order Act of 2010 passed by Congress to address the unconscionably high crime rates in these communities. The Tribal Law and Order Act of 2010 was intended to be a first step in the right direction in improving the effectiveness of criminal justice systems in Indian Country.

The Tribal Law and Order Act of 2010 was based on five fundamental principles: to increase the Federal response and accountability; encourage greater cooperation between tribal, Federal, and State law enforcement; provide tribal justice officials with additional tools to combat crime; improve Federal programs to strengthen tribal justice systems; and improve data collection and information sharing relating to Indian Country crime.

Since that time, numerous reports have been issued by the Departments of the Interior, Justice, and Health and Human Services as required by the act. The Committee has held oversight hearings on public safety issues in Indian communities, including a field hearing in my home state of Wyoming on the Wind River Indian Reservation. The Committee also held a roundtable with many stakeholders regarding the next steps needed for improving justice systems in these communities.

The testimony and discussions were clear that the crime rates have diminished some but still remain unacceptably high on too many reservations. Likewise, barriers for Indian law enforcement agencies still exist to accessing criminal databases, sharing in-

formation, receiving required reports, training, and technical assistance. The Committee received testimony on the need for more resources to develop various part of tribal justice systems including jury trials and public defenders services.

Most notably, the testimony indicated that alcohol and substance abuse were contributing factors in nearly all crimes in Indian communities. Several witnesses, including U.S. Attorney Christopher “Kip” Crofts from my home state of Wyoming, highlighted the need to address this problem to improve public safety.

The most troubling aspect of the reports, the discussions, and the hearings is that the children face the most heartbreaking situations. In particular, American Indian and Alaska Native juveniles are overrepresented in Federal and State juvenile justice systems. In addition, there is a lack of training, collaboration, communication, and cooperation among agencies regarding juvenile justice for these youth.

The tribal youth in the Federal system may spend more time in secure confinement than youth in the state systems, sometimes by several years. Tribal youth in the Federal system may also be placed in facilities which can be located far away from their communities and families. On top of this, appropriate services for tribal youth in the Federal system may be unavailable as well.

Tribal leaders have expressed concerns to me that they do not want to lose a generation of their people. It is incumbent upon Congress and the administration to do everything we can to help these young people turn their lives around.

For these reasons, we introduced this bill to work toward safer communities and provide more accountability from the Federal agencies which have a trust responsibility to the Indian tribes and their members.

The bill would address Federal accountability; increase data sharing and access to data bases; support alternatives in detention; reauthorize and build on resources for public safety efforts; and improve justice for Indian youth. It would also assist Indian tribes in addressing violent and drug crimes through Federal courts.

This is the type of bill that we can all get behind and get signed into law this year. I urge Members to join me in the effort to improve the lives of Indian people through these stronger public safety measures.

AUTHORITY FOR COMMITTEES TO MEET

COMMITTEE ON ARMED SERVICES

Mr. ALEXANDER. Mr. President, I ask unanimous consent that the Committee on Armed Services be authorized to meet during the session of the Senate on May 11, 2016, at 9:30 a.m.

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

COMMITTEE ON COMMERCE, SCIENCE, AND TRANSPORTATION

Mr. ALEXANDER. Mr. President, I ask unanimous consent that the Committee on Commerce, Science, and Transportation be authorized to meet during the session of the Senate on May 11, 2016, at 10 a.m., in room SR-253 of the Russell Senate Office Building to conduct a hearing entitled “Leveraging the U.S. Science and Technology Enterprise.”

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

COMMITTEE ON FINANCE

Mr. ALEXANDER. Mr. President, I ask unanimous consent that the Committee on Finance be authorized to meet during the session of the Senate on May 11, 2016, at 10 a.m., in room SD-215 of the Dirksen Senate Office Building, to conduct a hearing entitled “Oversight of the United States Customs and Border Protection Agency.”

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

COMMITTEE ON FINANCE

Mr. ALEXANDER. Mr. President, I ask unanimous consent that the Committee on Finance be authorized to meet during the session of the Senate on May 11, 2016, at 3 p.m., in room SD-215 of the Dirksen Senate Office Building.

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

COMMITTEE ON INDIAN AFFAIRS

Mr. ALEXANDER. Mr. President, I ask unanimous consent that the Committee on Indian Affairs be authorized to meet during the session of the Senate on May 11, 2016, in room SD-628 of the Dirksen Senate Office Building, at 2:15 p.m.

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

COMMITTEE ON SMALL BUSINESS AND ENTREPRENEURSHIP

Mr. ALEXANDER. Mr. President, I ask unanimous consent that the Committee on Small Business and Entrepreneurship be authorized to meet during the session of the Senate on May 11, 2016.

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

SUBCOMMITTEE ON PRIVACY, TECHNOLOGY, AND THE LAW

Mr. ALEXANDER. Mr. President, I ask unanimous consent that the Committee on the Judiciary, Subcommittee on Privacy, Technology, and the Law be authorized to meet during the session of the Senate on May 11, 2016, at 2:30 p.m., in room SD-226 of the Dirksen Senate Office Building, to conduct a hearing entitled “Examining the Proposed FCC Privacy Rules.”

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

PRIVILEGES OF THE FLOOR

Mr. REID. Mr. President, I ask unanimous consent that Brad Hatcher, who is serving as my legislative fellow for defense issues this year, be granted

privileges of the floor for the duration of 2016.

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

Mr. CARDIN. Mr. President, I ask unanimous consent that floor privileges be granted to Michael Wolfe, who is a fellow on my staff, during consideration of H.R. 2028, the Fiscal Year 2017 Energy and Water Appropriations Act.

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

ORDERS FOR THURSDAY, MAY 12, 2016

Mr. ALEXANDER. Mr. President, I ask unanimous consent that when the Senate completes its business today, it adjourn until 9:30 a.m., Thursday, May 12; that following the prayer and pledge, the morning hour be deemed expired, the Journal of proceedings be approved to date, and the time for the two leaders be reserved for their use later in the day; further, that following leader remarks, the Senate be in a period of morning business for 1 hour, equally divided, with Senators permitted to speak therein; further, that following morning business, the Senate resume consideration of H.R. 2028; finally, that all time during the adjournment and morning business count postclosure on the Alexander substitute amendment No. 3801.

The PRESIDING OFFICER. Is there objection?

Without objection, it is so ordered.

ADJOURNMENT UNTIL 9:30 A.M. TOMORROW

Mr. ALEXANDER. Mr. President, if there is no further business to come before the Senate, I ask unanimous consent that it stand adjourned under the previous order.

There being no objection, the Senate, at 5:49 p.m., adjourned until Thursday, May 12, 2016, at 9:30 a.m.

NOMINATIONS

Executive nominations received by the Senate:

DEPARTMENT OF THE TREASURY

ROBERT M. TOBIAS, OF THE DISTRICT OF COLUMBIA, TO BE A MEMBER OF THE INTERNAL REVENUE SERVICE OVERSIGHT BOARD FOR A TERM EXPIRING SEPTEMBER 14, 2020, VICE DEBORAH L. WINCE-SMITH, TERM EXPIRED.

DEPARTMENT OF TRANSPORTATION

BLAIR ANDERSON, OF CALIFORNIA, TO BE UNDER SECRETARY OF TRANSPORTATION FOR POLICY, VICE PETER M. ROGOFF, RESIGNED.

DEPARTMENT OF STATE

CAROL Z. PEREZ, OF VIRGINIA, A CAREER MEMBER OF THE SENIOR FOREIGN SERVICE, CLASS OF MINISTER-COUNSELOR, TO BE AMBASSADOR EXTRAORDINARY AND PLENIPOTENTIARY OF THE UNITED STATES OF AMERICA TO THE REPUBLIC OF CHILE.

DEPARTMENT OF JUSTICE

J. PATRICIA WILSON SMOOT, OF MARYLAND, TO BE A COMMISSIONER OF THE UNITED STATES PAROLE COMMISSION FOR A TERM OF SIX YEARS. (REAPPOINTMENT)

IN THE AIR FORCE

THE FOLLOWING AIR NATIONAL GUARD OF THE UNITED STATES OFFICER FOR APPOINTMENT IN THE RESERVE OF THE AIR FORCE TO THE GRADE INDICATED UNDER TITLE 10, U.S.C., SECTIONS 12203 AND 12212:

To be brigadier general

COL. SIDNEY N. MARTIN

IN THE ARMY

THE FOLLOWING NAMED OFFICER FOR APPOINTMENT AS CHIEF OF ARMY RESERVE/COMMANDING GENERAL, UNITED STATES ARMY RESERVE COMMAND, AND APPOINTMENT IN THE RESERVE OF THE ARMY TO THE GRADE INDICATED WHILE ASSIGNED TO A POSITION OF IMPORTANCE AND RESPONSIBILITY UNDER TITLE 10, U.S.C., SECTIONS 601 AND 3038:

To be lieutenant general

MAJ. GEN. CHARLES D. LUCKEY

IN THE NAVY

THE FOLLOWING NAMED OFFICER FOR APPOINTMENT AS VICE CHIEF OF NAVAL OPERATIONS AND APPOINTMENT IN THE UNITED STATES NAVY TO THE GRADE INDICATED WHILE ASSIGNED TO A POSITION OF IMPORTANCE AND RESPONSIBILITY UNDER TITLE 10, U.S.C., SECTIONS 601 AND 5035:

To be admiral

VICE ADM. WILLIAM F. MORAN

THE FOLLOWING NAMED OFFICER FOR APPOINTMENT AS CHIEF OF NAVAL PERSONNEL AND APPOINTMENT IN THE UNITED STATES NAVY TO THE GRADE INDICATED WHILE ASSIGNED TO A POSITION OF IMPORTANCE AND RESPONSIBILITY UNDER TITLE 10, U.S.C., SECTIONS 601 AND 5141:

To be vice admiral

REAR ADM. (LH) ROBERT P. BURKE

THE FOLLOWING NAMED OFFICER FOR APPOINTMENT IN THE UNITED STATES NAVY TO THE GRADE INDICATED WHILE ASSIGNED TO A POSITION OF IMPORTANCE AND RESPONSIBILITY UNDER TITLE 10, U.S.C., SECTION 601:

To be vice admiral

REAR ADM. THOMAS J. MOORE

THE FOLLOWING NAMED OFFICER FOR APPOINTMENT IN THE UNITED STATES NAVY TO THE GRADE INDICATED WHILE ASSIGNED TO A POSITION OF IMPORTANCE AND RESPONSIBILITY UNDER TITLE 10, U.S.C., SECTION 601:

To be vice admiral

VICE ADM. JAN E. TIGHE

IN THE AIR FORCE

THE FOLLOWING NAMED OFFICER FOR APPOINTMENT IN THE GRADE INDICATED IN THE RESERVE OF THE AIR FORCE UNDER TITLE 10, U.S.C., SECTION 12203:

To be colonel

CHRISTOPHER R. MCNULTY

IN THE ARMY

THE FOLLOWING NAMED ARMY NATIONAL GUARD OFFICER FOR APPOINTMENT TO THE GRADE INDICATED IN THE RESERVE OF THE ARMY UNDER TITLE 10, U.S.C., SECTIONS 12203 AND 12211:

To be colonel

ERNEST C. LEE, JR.

THE FOLLOWING NAMED OFFICERS FOR APPOINTMENT TO THE GRADE INDICATED IN THE RESERVE OF THE ARMY UNDER TITLE 10, U.S.C., SECTION 12203:

To be colonel

TERRANCE W. ADAMS
KRISTAFER R. ALLSIEGER
JOHN B. ALEXANDER
JAMES P. ALLEN
STEPHEN D. ALLEN, JR.
BRUCE A. ANDERSEN
TAMARA R. ARENDT
JEFFREY T. AVOLIO
JEFFREY S. BAUM
AMY E. BEUSCHLEIN
KELVIN L. BOONE
BENJAMIN L. BOURGOYNE
KEVIN N. BURAS
SEAN M. CAMPION
MARTIN A. CASE
PHILIP F. CHURCHILL
DAVID A. CLARK
TODD A. COE
DAWN M. CONNER
CHRISTOPHER W. COOK
ROBERT L. CORDRAY III
RONALD G. CORSETTI
DAVID E. COVOLESKY
EDWIN C. COX
JOHN R. CUNLIFFE
HARVEY A. CUTCHIN
PHILIP S. DIZON
DALE D. DRAEGER
DANIEL D. EDDY
JOHN F. EGAN
TODD L. ERSKINE
PETER E. FECHTMANN
AMY L. FIELDS
JAMES W. FORBES
JEFFREY D. GABEL
GINA R. GARABEDIAN
BENJAMIN G. GARCIA
CONSTANCE M. GARCIA
MARC L. GAUVAL
MATTHEW N. GEBHARD
LAWRENCE A. GNEWUCH
CHRISTINA S. GRAMOND
DENNIS H. GRECO
MICHAEL M. GREER

RUSSELL L. GREGORY III
RUSSELL W. GRIFFIN
JAY J. GUEVARRA
JOHN C. HAPLEY
KELLY A. HAGENBECK
DAVID A. HAGLER
JENS J. HANSEN
CATHERINE B. HARKER
STEVEN C. HART
CAROL A. HAYMAN
ROBERT L. HOHMAN, JR.
GARY J. HOLBEN
MATTHEW C. HOLBERT
FREDERICK J. HOLMES
ANTHONY T. HUY
JEROME JACKSON
NICOLE S. JONES
AARON J. JUSTICE
MICHAEL A. KARNIS
LAURA A. KENNEY
ROBERT T. KRUMM
EVELYN E. LAPTOOK
ANDREW M. LAWFIELD
MATTHEW A. LAZAR
DANIEL E. LEAVITT
JOHN M. LEGG
MICHAEL D. LEWIS
KENT J. LIGHTNER
ELDON S. LOWDERMILK
ROBERT W. MARTIN
CHRISTOPHER D. MASON
DONALD N. MATCHECK
ANDREAS J. MCGHEE
WILLIAM J. MCNEELY
KELLY D. MCNEESE
MICHAEL S. MIKULSKI
JONATHAN C. MOYER
LISANDRO MURPHY, JR.
KEN R. NANCE
DAVID W. NAVRATIL
TREVOR J. NEHLS
MICHAEL P. OBRIEN
BRANDI B. PEASLEY
SCOTT D. PERRY
TROY A. POSTIN
WILLIAM J. POTTERTON
ROBERT S. POWELL, JR.
SONYA A. POWELL
SALVATORE L. RAO, JR.
ROYCE P. RESOSO
REGINALD T. RICHARDSON
JAVIER J. RIVERA
STEVEN J. ROBERTSON
DAVID D. ROBINSON
DAVID M. SAMUELSEN
ANDREW F. SCARCELLA
JOHN C. SCHARRETT
WILLIAM H. SCHERMERHORN
JAMES E. SIMPSON, JR.
DAVID R. SKAVNAK
SHAD G. SMITH
RANDALL A. SNOW
MATTHEW C. STACKER
MARK A. STIEFBOLD
PAUL B. STRICKLAND
JOEL S. STRINGER
SHAWN P. SULLIVAN
STEPHEN R. SUTTON
LESLIE A. TEMPLIN
CHRISTOPHER C. THIEL
TUAN A. TRUONG
DOUGLAS A. VANDERHOOF
LESLIE Y. VAZQUEZ
GITA R. VELU
KIRK J. VENABLE
BRENDA L. VERVOORT
SCOTT W. WARD
JOHN F. WELLS
PETER J. WHALEN
HEATHER B. WHITE
LEO WHITE III
RONALD E. WIER
STEPHANIE R. WIESING
DAVID M. WILSON
DENISE M. WURZBACH
MOLLY D. YOUNG
ROBERT E. YOUNG, JR.
CYNTHIA M. ZAPOTOCZNY

THE FOLLOWING NAMED OFFICERS FOR APPOINTMENT TO THE GRADE INDICATED IN THE RESERVE OF THE ARMY UNDER TITLE 10, U.S.C., SECTION 12203:

To be colonel

JENNIFER L. ADAMSBUCKHOUSE
PAUL M. AMRHEIN
ALFRED J. ANTONIK
SALVATORE S. BARBARIA
GUY D. BASS
ALBERT L. BENSON, JR.
TEERAPHAN BEVILL
DANIEL A. CHITWOOD
DANIEL A. COLE
JAMES G. CRAIG III
KENNETH R. CROWE
KEVIN F. DANIELS
MANU L. DAVIS
TRAVIS C. DELK
STEVEN F. EGAN
TAD P. FICHTTEL
JEFFREY GATCHEL
VINCENT A. GILKEY
VICTOR R. GREEN
MARCUS W. HARRING
RICHARD P. HARVEY
FRANK E. HOPKINS III
CHARLES L. KIDD II

LEWIS G. KNAPP
CARL W. KOEHLINGER
JAMES P. LINCOLN
JOHN W. MAENHARDT, JR.
ANDREA L. MCCOLLUM
ELGIN MERCADO
JAMAL MILES
KERRY E. NORMAN
JAMES A. PARKINSON
FRANK O. PFAU
CHARLES R. PHARISS II
MICHAEL D. POSS
JAMES A. ROGERS
JEFFREY S. RYNEARSON
PETER J. SCHMIDT
JASON J. SCHRANK
WILLIAM C. SEARS
MICHAEL W. SHARP
JACQUELINE M. SIMMONS
JOHN A. STEWART
CHRISTOPHER J. SWEENEY
BRIAN A. THOMAS
MICHAEL S. UNDERWOOD
MICHAEL S. VAIL
CLAUDIUS R. VONFAHNSTOCK
STUART E. WERNER
RICHARD E. WILLIAMS
ASHLEY D. WORBOYS
WILLIAM S. WYNN
MELVIN W. ZIMMER, JR.

THE FOLLOWING NAMED OFFICERS FOR APPOINTMENT TO THE GRADE INDICATED IN THE RESERVE OF THE ARMY UNDER TITLE 10, U.S.C., SECTION 12203:

To be colonel

JEFFREY A. ABELE
ANDREW C. ANDERSON
LAWRENCE B. AUSTIN
PETER R. BARAJAS
JAMEY J. BARCOMB
ROBERT S. BAREFOOT
REGINALD L. BARNES
JOHN L. BATES
DAVID A. BECKER
SHAWN P. BELL
REED L. BERRY
RENITA L. BERRY
WILEY O. BLEVINS, JR.
TODD M. BOOKLESS
STEPHEN M. BOUSQUET
RHONDA S. BRACH
LONNIE J. BRANUM, JR.
WILLIAM T. BREEZE
JASON E. BRIGGS
RYAN C. BROWN
KEITH M. BROWNELL
DAVID J. BRUSCHWEIN
ROBERT K. BRYAN
JAMES M. CAHILL
TIMOTHY A. CAREY
MOIRA E. CARPENTER
LUKE E. CARPENTIER
CHRISTOPHER CHOMOSH
DANIEL J. COLEMAN
BRETT P. CONAWAY
CHARLES H. CONNORS
CHRISTOPHER R. CRONIN
DANIEL P. CROUCH
JOHN R. CUNNINGHAM
CARL C. DANBERG
RICHARD R. DANRVEAU
DARRELL J. DEBISH
THOMAS P. DENNIS
ERIC A. DERUE
KENNETH H. DILG
JOHN T. DONNELLAN, JR.
CRAIG S. DRISKELL
ILOS J. DUCKSWORTH
CHARLTON T. DUNN
ANDRA M. DUSKIE
JOHN H. EBBIGHAUSEN
ANDREW L. EDISON
TIMOTHY J. EICH
GARY T. ELLIOTT, JR.
THOMAS J. FIELDS III
RYAN D. FLACHSBART
RYAN P. FLOYD
DONOVAN T. FONTENOT
JEREMY R. FOOT
THOMAS W. FORREST
GREGORY E. FRUITZ
NICOLE M. GABRIEL
RAYMOND G. GARCIA
STANLEY T. GARCIA
DAVID S. GAYLE
JERALD R. GILBERT
RODNEY K. GINTER
WESLEY R. GOLDEN
KIRBY S. GONYER
QUAYTOR R. GORE
MIRIAM GRAY
ARNOLD J. GRIFFIN
MICHAEL P. GRUNDMAN
JEFFREY S. HACKETT
ROBERT D. HALES
DAVID W. HALL
KELLY S. HAMMOND
CYNTHIA J. HARKRIDER
WILLIAM M. HARLOW
MARY E. HARRIS
JAMES A. HARRISON
GREGORY B. HARTVIGSEN
DENNIS R. HAWTHORNE
DAVID L. HAYES
JEFFREY S. HEASLEY
JASON A. HENRY

JEFFREY W. HOLZWORTH
BARRY D. HON
ERIC W. HONAKER
MARK A. HOWARD
FRED D. HRYHORCHUK
DAMON M. HUNT
STEPHEN W. JACO
JOSEPH V. JACOBSON
REOLITO G. JAO
DANIEL T. JOHNSON
EDWARD M. JOHNSON
MICHAEL J. KARWATKA
PATRICK E. KEEPE
SCOTT M. KEELEY
RICKY A. KIMMEL
CECIL W. KING
RAY A. KNUITSON
JOHN M. KRUTHAUP
MICHAEL A. LADD
JAMES G. LAKE
THOMAS J. LESNIESKI
JEFFREY E. LONG
PHILIP H. MACCHI
ROBERT W. MANDELL
TODD M. MANION
JAMES W. MANN
RANDALL P. MANTOOTH
KELSEY A. MARCHALK
HUGH A. MCCALLUM
DONALD L. MCFADDEN
DAVID D. MCGRAW, JR.
TIMOTHY S. MCLAUGHLIN
WILLIAM E. MEADE
CHRISTOPHER W. MICKAN
GLENN E. MILLER
JESSE L. MILLER
VALENTINE M. MILLER
MICHAEL S. MISMAH
STEVEN C. MOE
CRISTINA M. MOORE
WILLIAM M. MOORE
LAUREN E. MUGLIA
GARY W. MUNDFROM
ERIK A. MYHRE
CRAIG T. NORMAND
JAMES R. OLSON
ANGEL M. ORTIZ
TERRI L. OSWALD
GREGORY S. OTA
GEORGE A. OTEIZA
KELTON E. PANKEY
VICTOR J. PARZALE
GREGORY L. PELTS
LOREN D. PENNEY
STEVEN D. PERRY
STEVEN P. PETERSEN
HENRY S. PETTTT
CORNELIUS E. PUTNAM
DAVID B. RAYNOR
DAVID W. REED
BENJAMIN M. RICHARDSON
ROBERT J. RODGERS
DARYL R. ROERICK
FRANCISCO L. ROMERO
GARY A. ROPERS
KELLY S. ROSENBERGER
PAUL R. ROWE
WILLIAM P. SCOTT, JR.
JOSHUA M. SEMLER
GARRY W. SEYB, JR.
THEODORE A. SOBOCIENSKI
WILLIAM J. SPENCE
PATRICK D. STAPLETON
CHARLES G. STEPHENSON
SHANE R. STEWART
RICHARD J. STRADINGER
PAUL W. STROUD
JEFFREY A. SUVER
SHAHRAM A. TAKMILI
EMMA F. THYEN
RONALD L. TILLOTSON
DONALD N. TINGEN
MICHAEL A. TOUGHER III
JOHN N. TUMINO
THOMAS O. TYLER
MARK A. ULVIN
DAVID A. UPDEGRAFF
RICKY S. UTLEY
BENJAMIN S. VALENTINE
DENISE W. WALKER
ROBERT H. WALTER, JR.
MICHAEL T. WARFEL
MICHAEL P. WARRINGTON
WILLIAM G. WATSON
MARK T. WEAVER
MICHAEL E. WEGSCHEIDER
DOUGLAS L. WHITE
KATHERINE E. WHITE
RONALD R. WILKINS
DENISE L. WILKINSON
MAURY A. WILLIAMS
JOHN J. WOJCIK
JAMES M. ZIEBA

THE FOLLOWING NAMED OFFICER FOR REGULAR APPOINTMENT IN THE GRADE INDICATED IN THE UNITED STATES ARMY MEDICAL SPECIALIST CORPS UNDER TITLE 10, U.S.C., SECTIONS 531 AND 3064:

To be major

KATHRYN A. KATZ

THE FOLLOWING NAMED OFFICER FOR REGULAR APPOINTMENT IN THE GRADE INDICATED IN THE UNITED STATES ARMY MEDICAL CORPS UNDER TITLE 10, U.S.C., SECTIONS 531 AND 3064:

To be major

BRYAN P. HENDREN

THE FOLLOWING NAMED OFFICER FOR REGULAR APPOINTMENT IN THE GRADE INDICATED IN THE UNITED STATES ARMY MEDICAL SERVICE CORPS UNDER TITLE 10, U.S.C., SECTIONS 531 AND 3064:

To be major

WESTON C. GORING

THE FOLLOWING NAMED OFFICER FOR REGULAR APPOINTMENT IN THE GRADE INDICATED IN THE UNITED STATES ARMY MEDICAL CORPS UNDER TITLE 10, U.S.C., SECTIONS 531 AND 3064:

To be major

SRILALITHA DONEPUDI

IN THE NAVY

THE FOLLOWING NAMED OFFICERS FOR APPOINTMENT TO THE GRADE INDICATED IN THE UNITED STATES NAVY UNDER TITLE 10, U.S.C., SECTION 624:

To be captain

OLIVIA L. BETHEA
KERTRECK V. BROOKS
BRENT E. COWER
SUZANNE M. JOHNSON
CHRISTIAN A. STOVER

THE FOLLOWING NAMED OFFICERS FOR APPOINTMENT TO THE GRADE INDICATED IN THE UNITED STATES NAVY UNDER TITLE 10, U.S.C., SECTION 624:

To be captain

ROGER S. AKINS
MANUEL F. ALSINA
HERNAN O. ALTAMAR
MICHAEL R. ANCONA
SUSAN F. ANTLE
KYLE R. BERRY
BRADLEY L. BUNTEN
ALEXANDER I. BUSTAMANTE
JAMES E. CALLAN
RUSSELL B. CARR
WALTER W. DALITSCHE
GERARD DEMERS
CHRISTOPHER I. ELLINGSON
JENNIFER M. ESPERITU
BRIAN L. FELDMAN
MARC A. FRANZOS
KATERINA M. GALLUS
JONATHAN E. GILHOOLY
HERMANN F. GONZALEZ
RODNEY S. HAGERMAN
KEITH A. HANLEY
STEVEN R. HANLING
SEAN M. HUSSEY
DAVID P. JOHNSON
MICHAEL L. JULIANO
ARNETT KLUGH
ERIC A. LAVERY
MIKE H. LEE
MARK J. LENART
EUGENIO LUJAN
GREGORY N. MATWIYOFF
MATTHEW D. MCLEAN
JOHN W. MORONEY
GEORGE P. NANOS III
CRAIG D. NORRIS
KEVIN M. OMEARA
CHRISTOPHER A. ORSELLO
JOSEPH F. PENTA
BLAINE M. POWELL
TIMOTHY M. QUAST
SCOTT B. RADER
ALFREDO R. RAMIREZ
CRAIG J. RANDALL
ROBERT L. RICCA
GEORGE M. RICE
MICHAEL A. ROBINSON
JOHN P. H. RUE
MARLENE L. SANCHEZ
TIMOTHY E. SAYLES
ANDREW W. SCHIEMEL
DANNY T. SHIAU
STUART H. SHIPPEY III
MICHAEL P. SHUSKO
BRYAN M. SPALDING
MICHAEL T. SPOONER
ERIC T. STEDJELARSEN
WALTER A. STEIGLEMAN
RICHARD W. TEMPLE
KARIN E. THOMAS
ANTHONY TUCKER
BRIAN P. WELLS
DAVID R. WHITTAKER
CHARLES E. WILSON
MICHAEL D. WITTENBERGER

THE FOLLOWING NAMED OFFICERS FOR APPOINTMENT TO THE GRADE INDICATED IN THE UNITED STATES NAVY UNDER TITLE 10, U.S.C., SECTION 624:

To be captain

RICHARD S. ADCOOK
ANDREW J. AVILLO
DAVID M. CRAIG
SEAN P. DONOVAN
ERIC S. EVANS
CHAD A. LEE
JOHN D. MCLAUGHLIN
ANN B. MONASKY
ENRIQUE M. MORALES
RACHEL MYAINGMISFELDT
STEVEN M. STOKES
GARY J. WALKER
JOHN H. WILSON
BENJAMIN W. YOUNG, JR.

THE FOLLOWING NAMED OFFICERS FOR APPOINTMENT TO THE GRADE INDICATED IN THE UNITED STATES NAVY UNDER TITLE 10, U.S.C., SECTION 624:

To be captain

ANDREW M. ARCHILA
ANTHONY R. ARTINO, JR.
MATTHEW F. BOUMA
DAVID B. BRENNER
GABRIEL T. BROWN
ROGER L. BUNCH
ALAN B. CHRISTIAN
JASON B. DABBY
PAUL B. DURAND
GREGG W. GELLMAN
SCOTT L. GREENSTEIN
JESSIE E. GROSS
BRANDON W. HARDIN
TRACI J. HINDMAN
KRISTIN R. HODAPP
PETER O. IM
TODD J. LAUBY
KARLA M. LEPORE
JAMES R. LINDERMAN
CHAD E. MCKENZIE
STEVEN W. NEWELL
KEITH B. NEWTON
PETER J. OBENAUER
GUILLERMO PIMENTEL
WENDY H. PINKHAM
ROSE E. RICE
CHERYL C. RINGER
KATHARINE K. SHOBE
TARA N. SMITH
JEFFREY D. STANCL
DOUGLAS E. STEPHENS

THE FOLLOWING NAMED OFFICERS FOR APPOINTMENT TO THE GRADE INDICATED IN THE UNITED STATES NAVY UNDER TITLE 10, U.S.C., SECTION 624:

To be captain

SHANE D. COOPER
LAURIN N. ESKRIDGE
JENNIE L. GOLDSMITH
DAVID M. GONZALEZ
JOSEPH G. HOELZ
THOMAS F. LEARY
IRVE C. LEMOYNE, JR.
MICHAEL J. LUKEN
JONATHAN M. MCLEOD
ROBERT P. MONAHAN, JR.
JOSHUA P. NAUMAN
ELYSIA G. H. NGBAUMHACKL
RANDALL J. VAVRA

THE FOLLOWING NAMED OFFICERS FOR APPOINTMENT TO THE GRADE INDICATED IN THE UNITED STATES NAVY UNDER TITLE 10, U.S.C., SECTION 624:

To be captain

JOHANNES M. BAILEY
MELISSA A. BARNETT
LISA A. BRAUN
KEVIN P. BUSS
RAUL J. CARRILLO
CRAIG A. CUNNINGHAM
LAURA D. DEATON
EVA S. DOMOTORFFY
JOHN E. ECKENRODE
MELISSA A. FARINO
JEAN F. FISAK
JEREMY J. HAWKER
JULIE M. HILLERY
LONNIE S. HOSEA
HEATHER C. KING
MICHAEL S. KOHLER
CLINT A. LEMAIRE
RACHEL M. LEWIS
PAUL A. LOESCHE
EDDIE LOPEZ
SCOTT J. MESSMER
DANIEL N. MEYERHUBER
STEVEN J. PARKS
JUSTICE M. PARROTT
SARA S. PICKETT
THECLY H. SCOTT
KATHALEEN L. SMITH
JOSEPH L. TAYLOR
ELIZABETH G. VOGELROGERS
JOHN E. VOLK

THE FOLLOWING NAMED OFFICERS FOR APPOINTMENT TO THE GRADE INDICATED IN THE UNITED STATES NAVY UNDER TITLE 10, U.S.C., SECTION 624:

To be captain

SUSAN L. AYERS
MICHAEL V. BENEDETTO
PATRICK C. BLAKE
WILLIAM D. BOOTH
DAVID D. CARNAL
EUGENE S. CASH
DAVID E. DOYLE
PAMELA C. DOZIER
JOHN S. DUENAS
CHARLES DWY
JOSE L. FELIZ
JASON B. FITCH
MARK R. GARRIGUS
NICOLA M. GATHRIGHT
EDMOND J. GAWARAN
MICHAEL W. HERYFORD
MATTHEW D. HOLMAN
JULIE M. HUNTER
JERRY A. KING
GREGORY R. LASK

DOUGLAS S. MACKENZIE
THOMAS J. NEVILLE III
THOMAS A. SCOTT
JULIE M. TREANOR
MILTON W. TROY III
ALSANDRO H. TURNER
DENNIS J. TURNER
TODD A. WANACK
LEROY H. WEBER
ANTHONY D. YANERO
MICHAEL YORK

THE FOLLOWING NAMED OFFICERS FOR APPOINTMENT TO THE GRADE INDICATED IN THE UNITED STATES NAVY UNDER TITLE 10, U.S.C., SECTION 624:

To be captain

MICHAEL D. BROWN
KIM M. DONAHUE
JOHN M. HARANSON
BRIAN J. C. HALEY
JAMES L. JOHNSON
JOHN A. KALANTZIS
DANIEL L. MODE
EMILE G. MOURÉD
JAMES H. PITTMAN
GREG T. SCHLUTER
WILLIAM D. STALLARD
BRIAN J. STAMM

THE FOLLOWING NAMED OFFICERS FOR APPOINTMENT TO THE GRADE INDICATED IN THE UNITED STATES NAVY UNDER TITLE 10, U.S.C., SECTION 624:

To be captain

JOHN R. ANDERSON
DANIEL W. COOK
JORGE R. CUADROS
EILEEN J. DANDREA
JEFFREY C. DEVINEY
CAMERON J. GEERTSEMA
KENT R. HENDRICKS
JEFFREY D. LENGKEEK
NATHANAEAL B. PRICE
WILLIAM A. SIEMER
KEMIT W. SPEARS
STEVEN J. STASICK
CHRISTOPHER R. VIA
BURR M. VOGEL

THE FOLLOWING NAMED INDIVIDUAL FOR APPOINTMENT TO THE GRADE INDICATED IN THE REGULAR NAVY UNDER TITLE 10, U.S.C., SECTION 531:

To be lieutenant commander

DEVIN D. BURNS

THE FOLLOWING NAMED OFFICERS FOR APPOINTMENT TO THE GRADE INDICATED IN THE UNITED STATES NAVY UNDER TITLE 10, U.S.C., SECTION 624:

To be captain

RACHAEL A. DEMPSEY
CHRISTOPHER L. GABRIEL
RONALD J. PIRETT
IVO J. PRIKASKY
SEAN D. ROBINSON

THE FOLLOWING NAMED OFFICERS FOR APPOINTMENT TO THE GRADE INDICATED IN THE UNITED STATES NAVY UNDER TITLE 10, U.S.C., SECTION 624:

To be captain

ANN E. CASEY
COLIN W. CHINN
HAROLD T. COLE
MICHAEL C. ELLIOT
SHELLY V. FRANK
JENNA K. HAUSVIK
JAMES H. HENDERSONCOFFEY
OWEN M. SCHOOLSKY
HENRY M. VEGTER
DARYK E. ZIRKLE

THE FOLLOWING NAMED OFFICERS FOR APPOINTMENT TO THE GRADE INDICATED IN THE UNITED STATES NAVY UNDER TITLE 10, U.S.C., SECTION 624:

To be captain

CLAUDE W. ARNOLD, JR.
THANONGDETH T. CHINYAVONG
TRACY L. HINES
DONALD E. HOCUTT
KAMBRA R. JUVE
KRISTIAN P. KEARTON
BRADLEY L. KINKAD
MATTHEW J. LABERT
JOHN E. LARSON, JR.
ROB W. STEVENSON

THE FOLLOWING NAMED OFFICERS FOR APPOINTMENT TO THE GRADE INDICATED IN THE UNITED STATES NAVY UNDER TITLE 10, U.S.C., SECTION 624:

To be captain

ALBERT ANGEL
ANDREW J. CHARLES
CHRISTOPHER R. KOPACH
KEVIN E. NELSON
DAVID M. OVERCASH
FRANK G. SCHLERETH III
PETER N. SHEPARD
SETH A. WALTERS
SCOTT D. YOUNG

THE FOLLOWING NAMED OFFICERS FOR APPOINTMENT TO THE GRADE INDICATED IN THE UNITED STATES NAVY UNDER TITLE 10, U.S.C., SECTION 624:

To be captain

THOMAS L. GIBBONS

RICKY L. GILBERT
MAXINE GOODRIDGE
THOMAS M. GOREY III
GLEN P. JACKSON
MICHAEL J. MCGINN, JR.
ALONZA J. ROSS
VINCENT E. SMITH
KURT E. STRONACH

THE FOLLOWING NAMED OFFICERS FOR APPOINTMENT TO THE GRADE INDICATED IN THE UNITED STATES NAVY UNDER TITLE 10, U.S.C., SECTION 624:

To be captain

DAVID L. AAMODT
DREK S. ADAMETZ
CHRISTOPHER W. ADAMS
ALLEN D. ADKINS
ALBERT A. ALARCON
DAMON K. AMARAL
ALYSA L. AMBROSEMANSFIELD
WAYNE W. ANDREWS III
STEVEN W. ANTCLIFF
CORY R. APPELBE
LONNIE L. APPELEGET
SCOTT A. AVERY
DAVID N. BACH
JAMES D. BACH
CHRISTOPHER G. BAILEY
SHAWN T. BAILEY
DAVID S. BAIRD
GREGORY E. BAKER
NATHAN A. BALLOU
CRAIG D. BANGOR
MATTHEW A. BARKER
ANTHONY C. BARNES
JOHN J. BARNETT
MICHAEL C. BECKETTE
JERRIS L. BELACK
STEVEN J. BENNETT
RYAN J. BERNACCHI
ROBERT A. BERNER
MICHAEL A. BISBEE
CORY J. BLASE
GREGORY D. BLYDEN
MATTHEW R. BOLAND
MATT L. BOREN
MOLLY J. BORON
JOHN J. BRABAZON
WESLEY W. BRINGHAM
JOHN L. BUB
WILLIAM H. BUCEY III
JOHN E. CAGE
MARK J. CALLARI
DARYLE D. CARDONE
ADAM T. CARLSTROM
SCOTT A. CARROLL
GARY L. CAVE
JEFFERY E. CHISM
MARC R. CHRISTINO
TODD F. CIMICATA
FRANKIE J. CLARK
PATRICK B. CLARK
JOSEPH W. COLEMAN
MATTHEW T. COLLINS
CLARKE F. CRAINE
WESLEY S. DAUGHERTY
MICHAEL F. DAVIS
COLIN P. DAY
ANDREW P. DEMONTE
WILLIAM F. DENTON
JOHN W. DEPREE
MICHAEL B. DEVORE
GRAHAME A. DICKS
BRAN J. DIEBOLD
CYNTHIA A. DIETERLY
KEITH B. DOWLING
MATTHEW J. DUFFY
TREVOR B. ESTES
CHAD M. FALGOUT
DAVID B. FIELDS
LONNIE L. FIELDS
CHRISTOPHER C. FOLLIN
THOMAS F. FOSTER, JR.
WILLIAM D. FRASER
JOHN P. FRIEDMAN
SEAN D. FUJIMOTO
JOSEPH A. GAGLIANO
RUSSELL M. GERALDI
MATTHEW G. GILLE
ANTHONY S. GRAYSON
CRAIG M. GUMER
PETER A. HAGE
PATRICK D. HANSEN
SCOTT A. HARDY
MICHAEL J. HARRIS
ROBERT E. HAWTHORNE III
THOMAS B. HECK
CHRISTOPHER H. HERR
BRETT C. HERSHMAN
CHRISTOPHER F. HILL
RICHARD B. HIL
JESSIE W. HILLIKER
STEVEN E. HNATT
ERICA L. HOFFMANN
JEFFREY P. HOLZER
MICHAEL G. HRTZ
SHAWN W. HUEY
JESSIE D. HUGHES, JR.
LIAM M. HULIN
CHRISTOPHER H. INSKEEP
DENNIS J. JACKO
SCOTT P. JANIK
PATRICK E. JANKOWSKI
MICHAEL R. JARRETT, JR.
MATTHEW J. JERBI
ROBERT J. JEZEK, JR.

THADDEUS M. JOHNSON
 SCOTT A. JONES
 PRZEMYSŁAW J. KACZYNSKI
 ERIC S. KELLUM
 JAMES P. KENNEDY IV
 JAMES R. KENNY
 GEORGE A. KESSLER, JR.
 RYAN T. KEYS
 HENRY S. KIM
 TIMOTHY F. KINSELLA, JR.
 DALE D. KLEIN
 NEIL A. KOPROWSKI
 VICTOR A. LAKE
 DAVID P. LAMMERS
 ROBERT W. LANDIS
 KEVIN A. LANE
 CHANDEN S. LANGHOFER
 LANCE C. LANTIER
 CURTIS G. LARSON
 BRETT A. LASSEN
 GREGORY J. LELAND
 RAYMOND C. LEUNG
 TODD A. LIBBY
 ANTHONY C. LITTMANN
 ABDEL I. LOPEZ
 MICHAEL J. MAJEWSKI
 DAVID R. MARKLE
 BOBBY MARKOVICH
 ERIC L. MASON
 NICOLE L. MAVERSHUE
 ANTOINETTE M. MCCANN
 SCOTT C. MCCLELLAND
 WILLIAM R. MCCOMBS
 LOUIS M. MCCRAY
 CARLOS A. MEDINA
 JEFFREY A. MELODY
 LEONARD H. J. MILLIKEN
 PETER T. MIRISOLA
 DANIEL D. MOORE
 TODD D. MOORE
 EVAN L. MORRISON
 JONATHAN R. MURPHY
 BRIAN T. MUTTY
 DEREK A. NELSON
 MATTHEW D. NORRIS
 THEODORE J. NUNAMAKER
 CHRISTINE R. OCONNELL
 DAVID M. ODEN
 BRIAN P. OLAVIN
 JUSTIN P. ORLICH
 ERIN P. OSBORNE
 PAUL R. PAMPURO
 WILLIAM A. PATTERSON
 BRYAN S. PEEPLES
 ANDREW M. PENCE
 SAMUEL E. PENNINGTON
 WILLIAM C. PENNINGTON
 WILLIAM A. PERKINS
 MIKAL J. PHILLIPS
 KEVIN PICKARD, JR.
 JOHN T. PITTA
 DAVIDTAVIS M. POLLARD
 MATTHEW T. POTTENBURGH
 MICHAEL E. RAY
 KEVIN K. ROACH
 CHRISTOPHER A. ROBERTO
 GREGORY G. ROBERTS
 EDWARD J. ROBLEDO

MICHAEL A. ROVENOLT
 DAVID R. SAUVE
 GREGORY P. SAWTELL
 JONATHAN L. SCHMITZ
 PETER M. SCHNAPPAUF II
 BRIAN T. SCHRUM
 BRUCE G. SCHUETTE
 KURT M. SELLERBERG
 THOMAS H. SHUGART III
 JOHN W. SKARIN
 JEFFREY S. SMITH
 DAVID T. SNEE
 KEVIN L. SNODE
 MARK D. SOHANEY
 DAVID W. STALLWORTH
 VERNON H. STANFIELD
 CHARLES M. STICKNEY
 MONIKA W. STOKER
 JOHN D. STONER, JR.
 JEFFREY W. SUMMERS
 BRIAN C. TADDIKEN
 BRIAN J. TANAKA
 DONALD I. TENNEY
 RYAN T. TEWELL
 PATRICK C. THIEN
 JOHN A. THOMPSON
 GREGORY S. THOROMAN
 ERIK M. THORS
 MATTHEW J. THRASHER
 BRENT K. TORNGA
 BRIAN L. TOTHERO
 JOHN E. TURNER, JR.
 TIMOTHY T. URBAN
 DANIEL W. VALASCHO
 RANDY J. VANROSSUM
 GABRIEL A. VARELA
 DENNIS J. VIGEANT
 MATTHEW I. WEBER
 MICHAEL L. WEELDREYER
 RICHARD H. WEITZEL
 CHRISTOPHER K. WELLS
 ROBERT R. WILLIAMS
 MARGARET V. WILSON
 HUGH E. WINKEL
 NATHAN S. YORK

THE FOLLOWING NAMED OFFICERS FOR APPOINTMENT TO THE GRADE INDICATED IN THE UNITED STATES NAVY UNDER TITLE 10, U.S.C., SECTION 624:

To be captain

MICHAEL B. BILZOR
 JOSEPH C. FORAKER III
 RICHARD G. MCGRATH, JR.
 JOSEPH J. MCINERNEY
 MATTHEW A. TESTERMAN

THE FOLLOWING NAMED OFFICERS FOR APPOINTMENT TO THE GRADE INDICATED IN THE UNITED STATES NAVY UNDER TITLE 10, U.S.C., SECTION 624:

To be captain

PAUL D. CLIFFORD
 PATRICK A. CROLEY
 CHARLES W. EHNES
 DANIELLE N. GEORGE
 JOSEPH J. KELLER
 DAVID S. KUHN
 CARA G. LAPONTE

JEREMY T. LEGHORN
 THOMAS D. MCKAY
 JOSEPH A. SAEGERT
 NATHAN A. SCHNEIDER
 BRIAN K. VAZQUEZ
 RICARDO VIGIL
 STEVEN P. WERNER
 DIANNA WOLFSON

THE FOLLOWING NAMED OFFICERS FOR APPOINTMENT TO THE GRADE INDICATED IN THE UNITED STATES NAVY UNDER TITLE 10, U.S.C., SECTION 624:

To be captain

ERROL A. CAMPBELL, JR.
 WILLIAM E. COLEMAN, JR.
 JOHN E. DOUGHERTY IV
 BENJAMIN W. HARRIS
 MICHAEL K. KASLIK
 MICHAEL J. ORR
 KENNETH B. STERBENZ
 JEFFREY M. VICARIO

THE FOLLOWING NAMED OFFICERS FOR APPOINTMENT TO THE GRADE INDICATED IN THE UNITED STATES NAVY UNDER TITLE 10, U.S.C., SECTION 624:

To be captain

JEFFREY J. CHOWN
 THOMAS M. DALL
 DARREN T. JONES
 ANTHONY S. KELLY
 DEMICHAEL T. MORGAN
 BRET A. WASHBURN

THE FOLLOWING NAMED OFFICERS FOR APPOINTMENT TO THE GRADE INDICATED IN THE UNITED STATES NAVY UNDER TITLE 10, U.S.C., SECTION 624:

To be captain

BROOK DEWALT
 PHILIP R. ROSI II

THE FOLLOWING NAMED OFFICERS FOR APPOINTMENT TO THE GRADE INDICATED IN THE UNITED STATES NAVY UNDER TITLE 10, U.S.C., SECTION 624:

To be captain

AARON C. HOFF
 JENNIFER R. MILLS
 RAYMOND P. OWENS III
 JOHN M. TULLY

WITHDRAWAL

Executive Message transmitted by the President to the Senate on May 11, 2016 withdrawing from further Senate consideration the following nomination:

SETH B. CARPENTER, OF THE DISTRICT OF COLUMBIA, TO BE AN ASSISTANT SECRETARY OF THE TREASURY, VICE MATTHEW S. RUTHERFORD, RESIGNED, WHICH WAS SENT TO THE SENATE ON FEBRUARY 12, 2015.

EXTENSIONS OF REMARKS

CELEBRATING THE 50TH ANNIVERSARY OF THE ALABAMA HISTORICAL COMMISSION

HON. BRADLEY BYRNE

OF ALABAMA

IN THE HOUSE OF REPRESENTATIVES

Wednesday, May 11, 2016

Mr. BYRNE. Mr. Speaker, I rise today to recognize the 50th Anniversary of the Alabama Historical Commission and the National Historic Preservation Act.

On October 15, 1966, the National Historic Preservation Act was signed into law by President Lyndon Johnson. The legislation established the nation's legal framework for the protection and preservation of historic buildings, landscapes, and archaeological discoveries.

My home state of Alabama played a key role in the creation of the National Historic Preservation Act. In fact, the book "With Heritage So Rich," written by Alabama Congressman Albert Rains, drew attention to the importance of preserving historical sites throughout the nation and led to the creation of the Alabama Historical Commission.

Over the last 50 years, the National Historic Preservation Act and the creation of the Alabama Historical Commission has had a profound impact on communities throughout Alabama and all across the United States. In the past year alone, the Alabama Historical Commission welcomed over 250,000 visitors to its historic sites and engaged more than 1,000 volunteers in 8,958 hours of service.

The Federal Preservation Tax Incentives Program, created by the National Historic Preservation Act and implemented by the Alabama Historical Commission in my home state, is the largest federal program supporting historic preservation. The program has helped spur job creation, saved thousands of historic structures, and attracted billions of dollars in investment.

The National Register of Historic Places, also created by the National Historic Preservation Act, contains more than 80,000 historic properties, with at least one place listed in almost every county in the United States.

In Alabama, we are home to over 1,200 historic places including the Bottle Creek Site, the First Confederate Capitol, Fort Morgan, Fort Toulouse-Fort Jackson Park, Gaineswood, and the Freedom Rides Museum.

This year, thousands of public, private, and nonprofit sector partners are commemorating the 50th anniversary of the National Historic Preservation Act throughout 2016 under the banner of "Preservation50."

Mr. Speaker, in order to remain an optimistic and hopeful nation, it is critical we understand our history and how we got to this point. So on their 50th Anniversary, I am proud to highlight the important impact of the Alabama Historical Commission and the National Historic Preservation Act.

ABIGAIL MOORE

HON. ED PERLMUTTER

OF COLORADO

IN THE HOUSE OF REPRESENTATIVES

Wednesday, May 11, 2016

Mr. PERLMUTTER. Mr. Speaker, I rise today to recognize and applaud Abigail Moore for receiving the Arvada Wheat Ridge Service Ambassadors for Youth award.

Abigail Moore is an 11th grader at Arvada West High School and received this award because her determination and hard work have allowed her to overcome adversities.

The dedication demonstrated by Abigail Moore is exemplary of the type of achievement that can be attained with hard work and perseverance. It is essential students at all levels strive to make the most of their education and develop a work ethic which will guide them for the rest of their lives.

I extend my deepest congratulations to Abigail Moore for winning the Arvada Wheat Ridge Service Ambassadors for Youth award. I have no doubt she will exhibit the same dedication and character in all of her future accomplishments.

HONORING NATHANIEL CAMPBELL

HON. SAM GRAVES

OF MISSOURI

IN THE HOUSE OF REPRESENTATIVES

Wednesday, May 11, 2016

Mr. GRAVES of Missouri. Mr. Speaker, I proudly pause to recognize Nathaniel Campbell. Nathaniel is a very special young man who has exemplified the finest qualities of citizenship and leadership by taking an active part in the Boy Scouts of America, Troop 271, and earning the most prestigious award of Eagle Scout.

Nathaniel has been very active with his troop, participating in many scout activities. Over the many years Nathaniel has been involved with scouting, he has not only earned numerous merit badges, but also the respect of his family, peers, and community. Most notably, Nathaniel has led his troop as the Senior Patrol Leader, earned the rank of Tom-Tom Beater in the Tribe of Mic-O-Say, and become a Brotherhood member of the Order of the Arrow. Nathaniel has also contributed to his community through his Eagle Scout project. Nathaniel designed and constructed "The Bear", a laser-cut steel and powder-coated artwork depicting the school mascot for Briarcliff Elementary School in Kansas City, Missouri.

Mr. Speaker, I proudly ask you to join me in commending Nathaniel Campbell for his accomplishments with the Boy Scouts of America and for his efforts put forth in achieving the highest distinction of Eagle Scout.

CELEBRATING THE 2016 KING KAMEHAMEHA LEI DRAPING CEREMONY

HON. MARK TAKAI

OF HAWAII

IN THE HOUSE OF REPRESENTATIVES

Wednesday, May 11, 2016

Mr. TAKAI. Mr. Speaker, I rise today to announce that the annual lei draping ceremony for King Kamehameha the Great will be held in the Emancipation Hall on May 22, 2016.

King Kamehameha's statue stands in the Capitol building as a representation of Hawaii's rich history and the legacy of the Native Hawaiian people. Each year, we drape lei or garlands on his statue to celebrate his accomplishment of uniting the Hawaiian Islands into one Kingdom, which secured a future for the Native Hawaiian people and protected the islands' resources in a quickly westernizing world. Kamehameha's foresight shows us the importance of uniting to face dramatic changes to our world, which today includes climate change.

This year, the celebration draws upon an ancient prophecy and saying—"e hea aku ana i ka iwa kilou mokula; the frigate bird which interweaves the islands is calling"—that characterizes King Kamehameha as the war bird destined to hook the islands into a single nation. The theme is meant not only to honor King Kamehameha's success in uniting the Native Hawaiian people, but also to recognize this year's special guests, sailors of the Polynesian Voyaging Society. On the Malama Honua Worldwide Voyage, they are currently sailing the voyaging canoe, Hokulea around the world on a mission to hook countries, nations and peoples of island Earth together for a sustainable future that preserves our Earth's cultural and natural resources—a vital lesson for stabilizing our climate.

I am grateful to have assisted the Hawaii State Society, whose members work tirelessly each year to bring us the King Kamehameha Lei Draping Ceremony. I look forward to honoring the legacy of King Kamehameha and Hokulea, which hopefully will inspire us to unite to protect our Earth.

HONORING HUNTER CLOUSE ON BEING ACCEPTED AS A DELEGATE TO THE CONGRESS OF FUTURE SCIENTISTS AND TECHNOLOGY LEADERS BY THE NATIONAL ACADEMY OF FUTURE SCIENTISTS AND TECHNOLOGISTS

HON. BILLY LONG

OF MISSOURI

IN THE HOUSE OF REPRESENTATIVES

Wednesday, May 11, 2016

Mr. LONG. Mr. Speaker, I rise today to honor Springfield Catholic High School student Hunter Clouse, of Springfield, Missouri, on his

• This "bullet" symbol identifies statements or insertions which are not spoken by a Member of the Senate on the floor.

Matter set in this typeface indicates words inserted or appended, rather than spoken, by a Member of the House on the floor.

being accepted as a delegate to the Congress of Future Scientists and Technology Leaders by the National Academy of Future Scientists and Technologists.

The Congress of Future Science and Technology Leaders is an honors-only program that is designed to motivate and direct the top students in the United States. It is specifically for students who aspire to be scientists, engineers and technologists, and helps to provide a path and mentorship for students to accomplish those dreams. It takes place at the University of Massachusetts over 3 days, and helps to spark meaningful dialogues and exchanges of ideas between future leaders in the fields of science and technology.

To be considered for acceptance as a delegate, applicants must be recommended by either a teacher or member of the Academy based on a proven track record of academic excellence. Students must have a minimum of a 3.5 GPA and represent all 50 states and Puerto Rico. Students like Clouse, who qualify for this incredibly selective honor, exemplify top-tier diligence and academic talent.

Mr. Speaker, Hunter Clouse has dedicated himself to his studies and exhibited a passion for science and technology. He will soon be representing the future of the state of Missouri at this conference, and I have the utmost confidence that he will do an excellent job. I would like to extend my personal congratulations for his achievement, and on behalf of the 7th District of Missouri, I would like to thank him for representing our community.

HONORING MR. RICHARD BURNS

HON. MIKE THOMPSON

OF CALIFORNIA

IN THE HOUSE OF REPRESENTATIVES

Wednesday, May 11, 2016

Mr. THOMPSON of California. Mr. Speaker, I, along with Representative HUFFMAN rise today to honor Rich Burns, who has retired after 36 years of public service. Throughout his career, Rich demonstrated his commitment to protecting our nation's lands through his work ethic, integrity, and genuine interest in the well-being of his community and employees.

After completing his degree in Rangeland Sciences at Oregon State University in 1979, Rich began his career with the U.S. Forest Service as a Range Technician at the Humboldt National Forest in Nevada. He joined the Bureau of Land Management as a Range Conservationist in 1980, and, over the next decade, he served in a variety of positions with the Bureau in Nevada, Colorado, and California.

He has served as Field Manager for the Bureau of Land Management Ukiah Field Office for the last 19 years of his federal career, overseeing more than 270,000 acres of public land in California across Marin, Napa, Sonoma, Solano, Mendocino, Lake, Yolo, Colusa, and Glenn Counties.

Among his many achievements, Rich led the successful effort to save the Black Forest from logging in 1999. Thanks to his work with the community, Lake County and the Lake County Land Trust were able to purchase the forest, which was then deeded to the Bureau of Land Management for preservation.

During his tenure, Rich also managed and assisted successful projects including the Ce-

dars Area of Critical Environmental Concern in 1987, the Cache Creek Wilderness Area in 2000, the Cedar Roughs Wilderness Area in 2006, the Cedars ACEC Main Canyon Addition in 2011, the Point Arena-Stornetta portion of the California Coastal National Monument in 2014, and the Berryessa Snow Mountain National Monument in 2015.

Mr. Speaker, Rich dedicated his career to preserving our country's natural resources. Therefore, it is fitting and proper that we honor him here today and extend our best wishes for an enjoyable retirement and many happy memories to come with Kelly, his wife of 36 years, and their daughter and son-in-law Ashley and Travis in retirement.

CAL MARSELLA

HON. ED PERLMUTTER

OF COLORADO

IN THE HOUSE OF REPRESENTATIVES

Wednesday, May 11, 2016

Mr. PERLMUTTER. Mr. Speaker, I rise today to recognize and applaud the vision and leadership of Cal Marsella during his tenure with the Regional Transportation District in the Denver Metro area.

Under Cal's leadership, the expansion project along Interstate 25 was conceived and completed on time and under budget. In addition, he also assisted in the planning, and implementation of FasTracks, one of the biggest projects in our nation's transit systems. According to Colorado Governor John Hickenlooper, there would be no FasTracks without Cal Marsella.

While completing his master's program at the University of Connecticut, Cal participated in a transportation-related internship which turned into a career. In 1995, he was hired as the General Manager and CEO of the Denver Regional Transit District and served in this capacity for 14 years until his retirement in 2009.

In that position, Cal oversaw the addition of the Southeast and Southwest rail lines, the C line serving the Auraria Campus, Sports Authority Field at Mile High and the Pepsi Center, as well as worked with the Colorado Department of Transportation to create high-occupancy toll lanes on I-25. Sadly due to his unexpected death, he was not able to see the completion of the transit system he's credited for starting.

I extend my deepest thanks and condolences to Cal Marsella's family for his service and dedication to the Denver Metro Area.

PERSONAL EXPLANATION

HON. LUIS V. GUTIÉRREZ

OF ILLINOIS

IN THE HOUSE OF REPRESENTATIVES

Wednesday, May 11, 2016

Mr. GUTIÉRREZ. Mr. Speaker, I was unavoidably absent in the House chamber for votes on Tuesday, May 10, 2016. Had I been present, I would have voted "yea" on roll call votes 180 and 181.

HONORING CHASE FOLSOM

HON. SAM GRAVES

OF MISSOURI

IN THE HOUSE OF REPRESENTATIVES

Wednesday, May 11, 2016

Mr. GRAVES of Missouri. Mr. Speaker, I proudly pause to recognize Chase Folsom. Chase is a very special young man who has exemplified the finest qualities of citizenship and leadership by taking an active part in the Boy Scouts of America, Troop 271, and earning the most prestigious award of Eagle Scout.

Chase has been very active with his troop, participating in many scout activities. Over the many years Chase has been involved with scouting, he has not only earned numerous merit badges, but also the respect of his family, peers, and community. Most notably, Chase has led his troop as the Senior Patrol Leader, earned the rank of Shaman in the Tribe of Mic-O-Say, and become a Brotherhood member of the Order of the Arrow. Chase has also contributed to his community through his Eagle Scout project. Chase designed and constructed the Briarcliff Elementary School 'Veggie Patch,' which included constructing six planter boxes and a six foot chain link fence around the garden.

Mr. Speaker, I proudly ask you to join me in commending Chase Folsom for his accomplishments with the Boy Scouts of America and for his efforts put forth in achieving the highest distinction of Eagle Scout.

IN RECOGNITION OF BRENDA BURNS

HON. KEVIN BRADY

OF TEXAS

IN THE HOUSE OF REPRESENTATIVES

Wednesday, May 11, 2016

Mr. BRADY of Texas. Mr. Speaker, for the last 35 years Brenda Burns has set the gold standard for public service with her selfless contribution to her hometown. Born and raised in Willis, Brenda's strong love of community and ability to develop strong relationships have served all of Willis well.

Through a vocational education program at Willis High School, Brenda began her career working for the City of Willis on May 26, 1981. She started as a part-time Utility Billing Clerk, but her value was obvious and the position quickly became full-time. Only two short years later, Brenda took on new duties as the city's Tax Assessor/Collector while continuing to handle utility issues. Brenda kept learning every day as she mastered the intricacies and minutiae of municipal government. She found a mentor in then-City Secretary Janice Wilson. In 1994, Brenda assumed the mantle of City Secretary, a position Willis would be blessed to have her serve in for 22 years.

During her 35 years of service to the City of Willis, much has changed as this community has grown and prospered. While Brenda served as the rock for 4 mayors and countless councilmembers, and the interstate highway grew from 2 to 6 lanes. As Willis' population soared into the several thousands, city staff quadrupled, meaning more and more people came to rely on Brenda. You might say Willis has been her family even longer than her husband, David, and their daughters, Monica and Katie.

Court Administrator Chrissy Dahse has been working with Brenda for a decade and will miss her “warm smile”. Chrissy says Brenda can always be counted on for “a thoughtful answer and an honest opinion. Her commitment and dedication to The City of Willis is unmatched.”

During her tenure, Brenda considers the move from a General Law to Home-Rule form of government as Willis’ greatest accomplishment. While she may not know quite as many people who come into City Hall now as she used to, her vast and unmatched contribution to the City of Willis and its citizens has set an amazing example of service.

Assistant City Secretary Marissa Quintanilla summed up how Willis feels as they prepare to wish Brenda a happy retirement, “It’s hard to say goodbye to a person so valued and respected and who is in my opinion the “City of Willis.” Marissa has spent the last 13 years working with Brenda and personally knows how hard it will be to fill her shoes. For 35 years Brenda Burns has been an example of public service and selfless contribution to the City of Willis, Texas.

Through all of this change the City of Willis has been able to rely on one constant, Brenda Burns. She has become synonymous with Willis and her love for her hometown has shone through her entire career. Thank you, Brenda, for your service and the great example you have set.

PERSONAL EXPLANATION

HON. JOSÉ E. SERRANO

OF NEW YORK

IN THE HOUSE OF REPRESENTATIVES

Wednesday, May 11, 2016

Mr. SERRANO. Mr. Speaker, during Roll Call Vote number 181 on H.R. 5052, I mistakenly recorded my vote as Nay when I should have voted Yea.

EMILY KIMBALL

HON. ED PERLMUTTER

OF COLORADO

IN THE HOUSE OF REPRESENTATIVES

Wednesday, May 11, 2016

Mr. PERLMUTTER. Mr. Speaker, I rise today to recognize and applaud Emily Kimball for receiving the Arvada Wheat Ridge Service Ambassadors for Youth award.

Emily Kimball is a 12th grader at Arvada West High School and received this award because her determination and hard work have allowed her to overcome adversities.

The dedication demonstrated by Emily Kimball is exemplary of the type of achievement that can be attained with hard work and perseverance. It is essential students at all levels strive to make the most of their education and develop a work ethic which will guide them for the rest of their lives.

I extend my deepest congratulations to Emily Kimball for winning the Arvada Wheat Ridge Service Ambassadors for Youth award. I have no doubt she will exhibit the same dedication and character in all of her future accomplishments.

PERSONAL EXPLANATION

HON. LOUISE McINTOSH SLAUGHTER

OF NEW YORK

IN THE HOUSE OF REPRESENTATIVES

Wednesday, May 11, 2016

Ms. SLAUGHTER. Mr. Speaker, I was unavoidably detained and missed Roll Call vote numbers 180 and 181. Had I been present, I would have voted aye on both.

IN RECOGNITION OF FIONE EVANS & ABBIE O'BRIEN, SECOND PLACE WINNERS OF 2016 NATIONAL C-SPAN STUDENT CAM VIDEO CONTEST

HON. MATT CARTWRIGHT

OF PENNSYLVANIA

IN THE HOUSE OF REPRESENTATIVES

Wednesday, May 11, 2016

Mr. CARTWRIGHT. Mr. Speaker, I rise today to honor Fione Evans & Abbie O'Brien, who participated in the 2016 National C-SPAN Student Cam Video Contest. The 7-minute entry entitled “National Immigration Issues” earned Fione and Abbie 2nd Place in the nationwide contest.

In the video, Fione and Abbie covered a variety of aspects regarding immigration, currently facing the United States. The two students inquired what actions should be taken for individuals that reside in the United States without legal status and how to best provide for those seeking asylum. The video featured interviews with local leaders Scranton Mayor Bill Courtright and Congressman LOU BARLETTA, as well as an interview with U.S. Park Rangers Dennis Mulligan & Kathleen Durkin of the Ellis Island Immigration Museum. C-SPAN footage of politicians speaking about immigration policy was included in the piece to show the scope of positions within the national debate. The two advocated for a fair but compassionate approach to resolve current immigration issues and urged lawmakers to work together. Fione and Abbie concluded their video by urging presidential aspirants to make immigration a top priority of their message.

It is an honor to recognize the achievement of these two industrious young women. I extend my congratulations and applaud Fione and Abbie on a job well done. May they continue to strive for excellence in their education and achieve ever greater honor in the future.

HONORING HUNTER D. HALL

HON. SAM GRAVES

OF MISSOURI

IN THE HOUSE OF REPRESENTATIVES

Wednesday, May 11, 2016

Mr. GRAVES of Missouri. Mr. Speaker, I proudly pause to recognize Hunter D. Hall. Hunter is a very special young man who has exemplified the finest qualities of citizenship and leadership by taking an active part in the Boy Scouts of America, Troop 324, and earning the most prestigious award of Eagle Scout.

Hunter has been very active with his troop, participating in many scout activities. Over the many years Hunter has been involved with scouting, he has not only earned numerous

merit badges, but also the respect of his family, peers, and community. Most notably, Hunter has earned the rank of Tom-Tom Beater in the Tribe of Mic-O-Say. Hunter has also contributed to his community through his Eagle Scout project. Hunter collected items for care packages and sent them to members of the United States Marine Corps deployed overseas.

Mr. Speaker, I proudly ask you to join me in commending Hunter D. Hall for his accomplishments with the Boy Scouts of America and for his efforts put forth in achieving the highest distinction of Eagle Scout.

GOING TO THE CHAPEL DIFFERENT THIS TIME BY INA HUGHS

HON. JOHN J. DUNCAN, JR.

OF TENNESSEE

IN THE HOUSE OF REPRESENTATIVES

Wednesday, May 11, 2016

Mr. DUNCAN of Tennessee. Mr. Speaker, Ina Hughs, a longtime columnist for the Knoxville News-Sentinel, has written a very honest and entertaining column about her upcoming marriage at the age of 75.

First, I want to congratulate her and her husband-to-be. Second, I want to call this enjoyable column to the attention of my colleagues and other readers.

Third, I will recall a story I heard in the News Sentinel many years ago when Senator Strom Thurmond was running for re-election one month short of his 94th birthday.

Someone—either the Senator or somebody on his staff—had found a 105-year-old woman who had been a babysitter for Senator Thurmond when she was 16 and he was five.

This 105-year-old endorsed the almost 94-year-old and called him a “fine young man.” I hope Ms. Hughs and her “intended” will be a fine young couple.

GOING TO THE CHAPEL DIFFERENT THIS TIME

Well, I have a bit of news. Not breaking news worthy of interrupting regularly scheduled programs. But rather shocking nevertheless. Close friends with whom I first shared this—well, their reaction over the phone was a long silence, howling laughter, and then they dropped the receiver.

I am getting married.

In three days.

I met him and his late wife in the early 1960s, when he and my husband served churches in the Norfolk area. As couples we became friends. Over time our families exchanged Christmas cards, but then a few years ago he and I landed in the same area in retirement. His wife sadly died of invasive cancer, and I had been single for some 20 years.

Shortly after the news got around town, I called a friend to wish her a happy birthday. When she read on the caller ID who I was, she answered by saying, “Oh, goody! You’re calling to ask me to be a bridesmaid?”

After my daughter digested the news—in great joy—she asked what was I going to wear. Did I want her to go with me to David’s Bridal?

“Honey,” I said, laughing, “I don’t even own a dress. How do you expect me to wear a gown?” She made me promise I’d find a friend with better taste in clothes than me to help find my outfit so I wouldn’t embarrass the family.

I am not doing any of that young bride stuff except maybe the old-new-borrowed-

blue. The something old, of course, will be me. At 75, what else could you call it? The Zombie Bride?

The borrowed item will be white pants I inherited from my older sister, who will no doubt be peering over a cloud from heaven saying, "Don't you have any clothes of your own? What on earth did you wear before I died and you got all mine?"

Something blue? That would be a necklace my younger sister gave me for my 21st birthday back in the previous millennium: a strand of white and blue pearls to match a blue jacket that is new, closing out my four-part matrimonial couture.

I do worry a bit that I'll look like a sea captain: white top, white pants, blue jacket. But it doesn't have brass buttons and I won't have on the cap. Or, Lord forbid, a veil.

And we aren't throwing rice or birdseed or rose petals. If there's any throwing to do, it'll be me sick with nerves. Blushing, teary-eyed and bashful is charming in youth. It just makes old women look wrinkled, frog-eyed and acutely geriatric.

Although I am 100 percent sure I won't be left at the altar, I find it humbling and altogether amazing that my intended (Where, pray tell, did that word come from? Does that mean every relationship that doesn't end in marriage is unintended? I think not.) is willing to cast lots with me at our ripe old age.

Me of the elastic-waist pants. Me of age-spotted hands. Me of trifocals and bunions. I sleep in socks. On the rare occasions I do wear a bathing suit, it's always under a cover-up. I often fall asleep in the recliner and drool. I sometimes break wind when getting out of the back seat of a car, and if you find that funny you are either under 50 or your grandmother is dead.

We are like the old couple that came into the drugstore holding hands. "Do you sell wheelchairs and canes?" they asked.

The pharmacist answered, "Yes. We have a whole back room full of the latest models."

"Do you sell magnifying glasses?"

"Yes. Right over there."

"Heating pads? Walk-in bathtubs? Medical alert systems? Adjustable bed rails? Blood pressure kits? TV sound amplifiers?"

"Yes. Yes. Yes."

"We'd like to use you as our bridal registry."

So, my friends, never say never. One day you, too, might have your friends dropping the phone.

MARAWAN ALTAWEEL

HON. ED PERLMUTTER

OF COLORADO

IN THE HOUSE OF REPRESENTATIVES

Wednesday, May 11, 2016

Mr. PERLMUTTER. Mr. Speaker, I rise today to recognize and applaud Marawan Altaweel for receiving the Arvada Wheat Ridge Service Ambassadors for Youth award.

Marawan Altaweel is an 8th grader at Drake Middle School and received this award because his determination and hard work have allowed him to overcome adversities.

The dedication demonstrated by Marawan Altaweel is exemplary of the type of achievement that can be attained with hard work and perseverance. It is essential students at all levels strive to make the most of their education and develop a work ethic which will guide them for the rest of their lives.

I extend my deepest congratulations to Marawan Altaweel for winning the Arvada

Wheat Ridge Service Ambassadors for Youth award. I have no doubt he will exhibit the same dedication and character in all of his future accomplishments.

CONGRATULATING THE PIPER HIGH ROCKETRY TEAM ON QUALIFYING FOR THE 2016 TARC FINALS

HON. ALCEE L. HASTINGS

OF FLORIDA

IN THE HOUSE OF REPRESENTATIVES

Wednesday, May 11, 2016

Mr. HASTINGS. Mr. Speaker, I rise today to congratulate the members of the Piper High School Rocketry Team from Broward County, Florida and their advisor on qualifying for the 2016 Team America Rocketry Challenge (TARC) Finals, being held this weekend in The Plains, Virginia. Piper High School is one of only 100 teams from across the United States to qualify.

In order to qualify for this event, the Piper High School team had to design a rocket capable of flying to an altitude of 850 feet with a flight duration of 44 to 46 seconds, while carrying two raw eggs and return them to Earth uncracked. To make this more difficult, this year the eggs had to be placed perpendicular to each other in the rocket, complicating rocket body design.

TARC is the world's largest student rocket contest—approximately 5,000 students participate each year. The competition gives middle and high school students a chance to pursue further study and careers in science, technology, engineering and mathematics (STEM), and is a critical piece of the aerospace and defense industry's strategy to build a stronger workforce development pipeline.

It is important to recognize not only the achievement of the Piper High School Team in qualifying for the TARC finals, but also the interest and drive that makes these young people want to participate in STEM oriented extracurricular activities, so I want to personally recognize each of them here today: Joseph Callahan, Shaun Cochrane, Jared Eckert, Adam Husein, Amit Lalchan, and Benjamin Liang. I also want to thank their advisor, Mr. Walter Weidler, for inspiring the interest of these students in science and engineering. It is educators like Mr. Weidler who are responsible for keeping America at the forefront of technology.

Mr. Speaker, I am extremely proud of these students, and of all of the students in Florida and the United States who are engaged in STEM education. They represent the future of this great nation.

REMEMBERING JUDGE THOMAS A. RYMER

HON. STENY H. HOYER

OF MARYLAND

IN THE HOUSE OF REPRESENTATIVES

Wednesday, May 11, 2016

Mr. HOYER. Mr. Speaker, I rise to honor the memory of the Hon. Thomas A. Rymer, who passed away on April 15. He was ninety-one years old and had dedicated his career to public service on behalf of the State of Maryland and Calvert County.

I was privileged to be Tom's friend for decades, and I was deeply saddened by his passing. He served in the Maryland House of Delegates from 1971–1987 and was Majority Whip for a good portion of that time. During part of that period, I served as President of the Maryland State Senate, and we worked together on a number of occasions. During his tenure, Tom fought for school funding that invested in education for students in Calvert County. He spearheaded efforts to build roads and infrastructure and encourage development in what was then a very rural part of our state. Tom was also a tireless advocate for justice and equal opportunity.

Judge Rymer was born in Asheville, North Carolina, and he moved with his family to Washington, D.C., in 1939. A student at the University of Maryland when World War II broke out, he enlisted in the U.S. Navy and was commissioned as an Ensign. After serving our nation honorably, he returned stateside and finished his degree at Cornell University in New York in 1948. He then went on to earn his law degree from the George Washington University in 1955.

During the 1950's, Tom worked as an engineer with the Washington Suburban Sanitary Commission and served in a number of civilian roles with the Navy, Air Force, and Secretary of Defense's office. When he left the Pentagon in 1964, he was serving as chief of the Air Force Military Construction Program.

From 1966–1970, Tom served the people of Calvert County as State's Attorney before running for the House of Delegates. In Annapolis, he chaired the Calvert County delegation and served as Chair of the Tri-County Council for Southern Maryland from 1979–1982. He also chaired the Joint Ethics Committee. Tom was well respected in the Assembly, lauded for his integrity and honesty and for his mentorship of younger lawmakers. After leaving office, Tom was appointed to sit on the Calvert County Circuit Court. He served until his retirement in 1995.

Mr. Speaker, I extend my condolences to his beloved wife of four decades, Grace Mead Rymer. My thoughts and prayers are also with his sons Gary Rymer, Ronald Rymer, and Thomas Rymer Jr.; his stepchildren, Grace Mary Brady, Robert Manual Garrett, John Michael Garrett, Nell-Marie Chaney, William Francis Garrett, and Allan Garrett; his fifteen grandchildren and step-grandchildren; and his ten great-grandchildren. Sadly, his stepson Thomas Garrett passed away last year. Many of the Rymers and Garretts continue to live in Calvert County, on which their father and stepfather leaves a lasting impact that will surely benefit generations to come. I join in thanking Judge Thomas A. Rymer for his service to Calvert County, to the Fifth District, to the State of Maryland, and to our nation, and I hope my colleagues will do the same.

IN HONOR OF GULINDA LOUISE ESTERS-SMILEY

HON. JOHN CONYERS, JR.

OF MICHIGAN

IN THE HOUSE OF REPRESENTATIVES

Wednesday, May 11, 2016

Mr. CONYERS. Mr. Speaker, it is with a heavy heart that I rise today to pay tribute to the life of my sister-in-law, Gulinda Louise

Esters-Smiley, who passed away on April 28, 2016.

Gulinda was born on August 21, 1963 in River Rouge, Michigan to the union of the late Robert Harris and Alice Esters. She was the eldest of seven children and affectionately called "G" by family and friends who will always cherish her memory. Gulinda transitioned from this life at peace surrounded by her family with a smile on her face knowing she was loved.

For more than 19 years she worked for Detroit Diesel. She also worked at Orchards Children Services where she cared for the well-being of children.

Gulinda married Tyrone Smiley on May 22, 1992, they had one daughter, Dominique Alexis Smiley. She also raised Darryl, Jr., Tyrone, Tyeshia, Tyrell and Tyese. Gulinda had an infectious smile, she was the go to person for all the teenagers in the family especially my son John, III and Tyrell.

Gulinda leaves to cherish her memory: her husband Tyrone; her children Darryl and Dominique; her mother Alice (Delbert); mother-in-law Ada; her siblings Monica (John), Robert, Michael (Peaches), Reginald (Sherry), Ervin, Kimberly (Kevin); brother-in-laws Lewis and Joe of Detroit; sister-in-laws Ada and Christine (Rodney); grandchildren Zyrell, Tyrell and Terrell along with a host of other relatives and friends.

I urge my colleagues to join me in honoring the life of my sister-in-law, Gulinda Louise Esters-Smiley—a beloved Wife, Mom, Sister, Daughter, Friend, Grandma, Auntie, Cousin, Co-Worker, Protector, Angel and GodMom.

HONORING PRESTON SIVILS

HON. SAM GRAVES

OF MISSOURI

IN THE HOUSE OF REPRESENTATIVES

Wednesday, May 11, 2016

Mr. GRAVES of Missouri. Mr. Speaker, I proudly pause to recognize Preston Sivils. Preston is a very special young man who has exemplified the finest qualities of citizenship and leadership by taking an active part in the Boy Scouts of America, Troop 271, and earning the most prestigious award of Eagle Scout.

Preston has been very active with his troop, participating in many scout activities. Over the many years Preston has been involved with scouting, he has not only earned numerous merit badges, but also the respect of his family, peers, and community. Most notably, Preston has led his troop as the Senior Patrol Leader, earned the rank of Tom-Tom Beater in the Tribe of Mic-O-Say, and become a Brotherhood member of the Order of the Arrow. Preston has also contributed to his community through his Eagle Scout project. Preston designed, planned, and installed five agility obstacles for Waggin Tails, the new North Kansas City, Missouri, off-leash dog park.

Mr. Speaker, I proudly ask you to join me in commending Preston Sivils for his accomplishments with the Boy Scouts of America and for his efforts put forth in achieving the highest distinction of Eagle Scout.

SKIE CLARK

HON. ED PERLMUTTER

OF COLORADO

IN THE HOUSE OF REPRESENTATIVES

Wednesday, May 11, 2016

Mr. PERLMUTTER. Mr. Speaker, I rise today to recognize and applaud Skie Clark for receiving the Arvada Wheat Ridge Service Ambassadors for Youth award.

Skie Clark is a 12th grader at Arvada High School and received this award because her determination and hard work have allowed her to overcome adversities.

The dedication demonstrated by Skie Clark is exemplary of the type of achievement that can be attained with hard work and perseverance. It is essential students at all levels strive to make the most of their education and develop a work ethic which will guide them for the rest of their lives.

I extend my deepest congratulations to Skie Clark for winning the Arvada Wheat Ridge Service Ambassadors for Youth award. I have no doubt she will exhibit the same dedication and character in all of her future accomplishments.

IN RECOGNITION OF ARTMAN'S 100TH ANNIVERSARY

HON. PATRICK MEEHAN

OF PENNSYLVANIA

IN THE HOUSE OF REPRESENTATIVES

Wednesday, May 11, 2016

Mr. MEEHAN. Mr. Speaker, I rise today to congratulate Artman, a personal care and nursing community in Ambler, PA that is celebrating 100 years of care to seniors in the community.

Since opening its doors in 1916, Artman has provided personal care, skilled nursing, rehabilitation and hospice services to seniors in the greater Philadelphia area as a part of Liberty Lutheran Services, a non-profit faith-based social ministry organization. Groups like Liberty Lutheran Services are essential to ensuring our region's seniors receive the quality care they deserve.

I congratulate the administrators and staff at Artman throughout the years on this milestone.

RECOGNIZING AURORA WEST COLLEGE PREPARATORY ACADEMY

HON. MIKE COFFMAN

OF COLORADO

IN THE HOUSE OF REPRESENTATIVES

Wednesday, May 11, 2016

Mr. COFFMAN. Mr. Speaker, I rise today to recognize Aurora West College Preparatory Academy (AWCPA), a runner-up for the prestigious Game Plan for Success Award. I also applaud AWCPA for maintaining their "Performance level" school status, the highest rating that can be granted to a Colorado school. This status serves as well-deserved tribute to their students' sustained growth over time toward state standards and proficiency levels.

The students, teachers and administration of Aurora West College Preparatory Academy have worked hard to transform their school

into a thriving and active educational environment. AWCPA fosters an inspiring learning environment and their school community is certainly seeing the positive results. Their dedication to high expectations, independent learning, and consistent, constructive testing has earned them runner-up for the Game Plan for Success Award.

Today, I also honor the principal of Aurora West College Preparatory Academy, Brian Duwe. Mr. Duwe has shown incredible leadership and his passion for education is an inspiration for students and educators alike.

Mr. Speaker, I congratulate the entire Aurora West College Preparatory Academy community for their academic achievement, and I am confident that the school will continue to excel.

HONORING GASPAR ENRIQUEZ

HON. BETO O'ROURKE

OF TEXAS

IN THE HOUSE OF REPRESENTATIVES

Wednesday, May 11, 2016

Mr. O'ROURKE. Mr. Speaker, I rise today to commend internationally renowned artist and pride of El Paso's Segundo Barrio, Gaspar Enriquez.

Mr. Enriquez's art is synonymous with the Chicano movement and El Paso. His celebrated works have been displayed across the country, from the Tucson Museum of Art, to the Lyndon Baines Johnson Library in Austin, the Albuquerque Museum of Art, the El Paso Museum of Art and the Smithsonian National Portrait Gallery in Washington, D.C.

Born in 1942, Mr. Enriquez was raised in El Paso's Segundo Barrio, a neighborhood known as the cradle of the Chicano movement and the soul of El Paso. The neighborhood served as the inspiration for Mr. Enriquez's art, always present in the faces and landmarks depicted in his art.

As a teacher and mentor for 33 years at Bowie High School, Mr Enriquez worked to inspire the youth of Segundo Barrio teaching self-expression through art.

Mr. Enriquez is a continuing source inspiration and pride to our community.

HONORING THE WORLD WAR II AND KOREAN WAR VETERANS OF ILLINOIS

HON. MIKE QUIGLEY

OF ILLINOIS

IN THE HOUSE OF REPRESENTATIVES

Wednesday, May 11, 2016

Mr. QUIGLEY. Mr. Speaker, I rise to honor the World War II and Korean War veterans who traveled to Washington, D.C. on May 11, 2016 with Honor Flight Chicago, a program that provides World War II and Korean War veterans the opportunity to visit their memorials on The National Mall in Washington, D.C. These memorials were built to honor their courage and service to their country.

The American Veteran is one of our greatest treasures. The Soldiers, Airmen, Sailors, Marines, and Coast Guardsmen who traveled here on May 11th answered our nation's call to service during one of its greatest times of need. From the European Campaign to the

Pacific Asian Theatre to the African Theater, these brave Americans risked life and limb, gave service and sacrificed much, all while embodying what it is to be a hero. We owe them more gratitude than can ever be expressed.

I welcome these brave veterans to Washington and to their memorials. I am proud to submit the names of these men and women for all to see, hear, and recognize, and I call on my colleagues to rise and join me in expressing gratitude.

Russell Joseph Allabastro, Gerald W. Arnold, Jack P. Astorino, Joseph F. Baron, Richard M. Bieniek, Robert J. Bierwirth, Raymond E. Bogard, William A. Bonacci, Howard C. Boone Jr., Frank Bossi, Marvin Brantman, Kazimierz Brenski, Lawrence E. Bromley, Rudolph Brunner, Joseph Chmielewski, Warren E. Cochran, Myron Cohen, Donald K. Collins, David E. Conrad, Donald L. Cothorn, James M. Davis, Donald Clyde Day, Richard A. Dolejs, Peter R. Doyle, Richard L. Duchossois, Jacob L. Dvoratchek, Henry J. Dziekan, Robert W. Enloe, Richard A. Evans, Samuel D. Faircloth, Stanley L. Fazy, Robert J. Gecas, Michael Glienna, John O. Goad, Albert Godra, Donald J. Greenhill, James A. Grigsby, Davis H. Hall, James L. Hanrahan, William Harris, Walter L. Hayes, Phillip Healey, Charles P. Healy, Charles J. Henczel, James T. Hendron, Frank E. Hennig, Paul K. Heuberger, William F. Jones, William B. Kort, Joseph F. Kossman, Alfred C. Kotlarz, Paul E. Kroll, William G. Kruse, Eugene L. Lakinski, Fred Lane, George Lee Jr., Arthur J. Lietz, William P. Littell Jr., Ralph Markus, Allen C. McClellan, Ned L. McCray, Ewing Metoyer, Kenneth Warren Miller, Walter Miller, Wilbert P. Minnich, Louis Joseph Mirabelli, James Ward Montgomery, Ted E. Mueller, Donald R. Mundt, Richard J. Nicola, Ralph L. O'Brien, Hugh B. O'Hagan, Verner H. Ohst, Gerald Petersen, Paul P. Ponschke, Harold C. Pritchard, Walter E. Rapata, Anthony Repeta, Gilbert Romo, Elliott D. Rosenberg, Sam Schechter, Arthur W. Schultz, Charles A. Sengstock Jr., Fred H. Siebert, Richard L. Smith, Robert L. Snyder, Lawrence J. Solarski, William Swale, David G. Tillinghast, Raymond Tinley, Wayne L. Uecker, Everett Van Kuiken, Edward F. Vascik, Raymond J. Vatch, Sidney J. Wallach, John H. Weir, Robert D. Wheeler, Quentin Wilmington, Eugene Wojciechowski, Carl M. Wolak, Harold D. Wolin, Walter J. Zielinski Jr., Richard P. Zukowski.

ZACH McCOLLUM

HON. ED PERLMUTTER

OF COLORADO

IN THE HOUSE OF REPRESENTATIVES

Wednesday, May 11, 2016

Mr. PERLMUTTER. Mr. Speaker, I rise today to recognize and applaud Zach McCollum for receiving the Arvada Wheat Ridge Service Ambassadors for Youth award.

Zach McCollum is a 7th grader at Drake Middle School and received this award because his determination and hard work have allowed him to overcome adversities.

The dedication demonstrated by Zach McCollum is exemplary of the type of achievement that can be attained with hard work and perseverance. It is essential students at all levels strive to make the most of their edu-

cation and develop a work ethic which will guide them for the rest of their lives.

I extend my deepest congratulations to Zach McCollum for winning the Arvada Wheat Ridge Service Ambassadors for Youth award. I have no doubt he will exhibit the same dedication and character in all of his future accomplishments.

RECOGNIZING THE NEED FOR SAFE DISPOSAL OF PRESCRIPTION MEDICINES

HON. EARL BLUMENAUER

OF OREGON

IN THE HOUSE OF REPRESENTATIVES

Wednesday, May 11, 2016

Mr. BLUMENAUER. Mr. Speaker, our nation is faced with unprecedented levels of prescription drug abuse. In 2012, nearly 260 million prescriptions were written for prescription painkillers—roughly one prescription for every adult in the country. While we see prescriptions for pain management on the rise, we don't have an easy or effective way of disposing of leftover, unused medication.

A 2014 study found that over 65 percent of participants kept some or all prescription opioids even if they were no longer taking the medication, while only about 6 percent of patients reported safely disposing of their prescription opioids. Families are left with powerful narcotics after their loved ones have passed away. Parents struggle over what to do with leftover pain medications in their home.

Without better options, when trying to dispose of medications, people often turn to flushing them down the toilet, putting our water at risk. One study by EPA scientists found that half of the 50 large-size wastewater treatment plants nationwide tested positive for at least 25 drugs.

When it becomes more difficult to dispose of a medication than to get it prescribed in the first place, we know something is wrong.

Today I am introducing the Safe Drug Disposal Tax Credit Act. This legislation would offer qualified entities a tax credit for starting or maintaining drug disposal and take back programs.

Existing take back programs are typically run by law enforcement agencies. While the aim of these programs is admirable, they are not easily accessible to most members of the public, or are only available on specially designated dates. Locating safe drug disposal and take back programs at pharmacies and other health care organizations will increase access to safe medication disposal. This tax credit would help offset some of the expenses of establishing and maintaining a sustainable program.

IN RECOGNITION OF TINICUM ELEMENTARY SCHOOL

HON. PATRICK MEEHAN

OF PENNSYLVANIA

IN THE HOUSE OF REPRESENTATIVES

Wednesday, May 11, 2016

Mr. MEEHAN. Mr. Speaker, I rise today to congratulate Tinicum Elementary School on its 50th Anniversary.

Tinicum Elementary School has demonstrated its commitment to educating young students in the community for half a century. It's been a pillar of the Tinicum Township and Interboro School District communities and generations of students have learned and benefitted from it.

I congratulate the Principal Tim Fanning, Assistant Principal Stephanie Farmer, and all the school's hardworking teachers, staff, students and parents for earning this impressive distinction.

HONORING BLAKE SMITH ON BEING ACCEPTED AS A DELEGATE TO THE CONGRESS OF FUTURE SCIENTISTS AND TECHNOLOGY LEADERS BY THE NATIONAL ACADEMY OF FUTURE SCIENTISTS AND TECHNOLOGISTS

HON. BILLY LONG

OF MISSOURI

IN THE HOUSE OF REPRESENTATIVES

Wednesday, May 11, 2016

Mr. LONG. Mr. Speaker, I rise today to honor Branson High School student Blake Smith, of Branson, Missouri, on his being accepted as a delegate to the Congress of Future Scientists and Technology Leaders by the National Academy of Future Scientists and Technologists.

The Congress of Future Science and Technology Leaders is an honors-only program that is designed to motivate and direct the top students in the United States. It is specifically for students who aspire to be scientists, engineers and technologists, and helps to provide a path and mentorship for students to accomplish those dreams. It takes place at the University of Massachusetts over 3 days, and helps to spark meaningful dialogues and exchanges of ideas between future leaders in the fields of science and technology.

To be considered for acceptance as a delegate, applicants must be recommended by either a teacher or member of the Academy based on a proven track record of academic excellence. Students must have a minimum of a 3.5 GPA and represent all 50 states and Puerto Rico. Students like Smith, who qualify for this incredibly selective honor, exemplify top-tier diligence and academic talent.

Mr. Speaker, Blake Smith has demonstrated a passion for science and technology. Just as importantly, Blake has excelled in his studies and impressed both his teachers and his peers with his academics. He will soon be representing the future of the state of Missouri at this conference, and I have the utmost confidence that he will do an excellent job. I would like to extend my personal congratulations for his achievement, and on behalf of the 7th District of Missouri, I would like to thank him for representing our community.

CONGRATULATING MRS. CORA ALICE "CAM" MCCARREY BOHMAN

HON. DON YOUNG

OF ALASKA

IN THE HOUSE OF REPRESENTATIVES

Wednesday, May 11, 2016

Mr. YOUNG of Alaska. Mr. Speaker, I rise today to congratulate Mrs. Cora Alice "Cam"

McCarrey Bohman for her 50th year in music instruction in the state of Alaska.

I would like to recognize Cam for her dedication and contributions to music education throughout her career in Tok and Anchorage. Thousands of Alaskan youths state-wide have benefitted from Cam's work. She has served in both middle school and high school as a choir teacher, community choral director, vocal coach, music adjudicator, and music director. Cam continues to serve as the Music Coordinator for the Alaska School Activities Association.

This year, Cam received the 2016 "Alaska's Mother of Achievement" award from the national organization, American Mothers. This award recognizes "those outstanding women whose positive influence, talents, and community service have made a significant impact in the lives of children and families." Cam's alumni music students nominated her for the award. I would also like to note that in 2014, Cam received the State of Alaska Governor's award for arts advocacy. These are only two examples of Cam's many honors.

Cam inspired countless students to join choir, and each school year her classes reached the all-time high of about 300 total students. Recently, students at South High School in Anchorage made a documentary titled "Unwritten Song" to highlight the importance of elective teachers and featured Cam's influence on generations of Alaskans.

I commend Cam for her 50 years of service and know she will continue to make Alaska a better place through her excellence.

SHEA BLACKMAN

HON. ED PERLMUTTER

OF COLORADO

IN THE HOUSE OF REPRESENTATIVES

Wednesday, May 11, 2016

Mr. PERLMUTTER. Mr. Speaker, I rise today to recognize and applaud Shea Blackman for receiving the Arvada Wheat Ridge Service Ambassadors for Youth award.

Shea Blackman is a 7th grader at Drake Middle School and received this award because her determination and hard work have allowed her to overcome adversities.

The dedication demonstrated by Shea Blackman is exemplary of the type of achievement that can be attained with hard work and perseverance. It is essential students at all levels strive to make the most of their education and develop a work ethic which will guide them for the rest of their lives.

I extend my deepest congratulations to Shea Blackman for winning the Arvada Wheat Ridge Service Ambassadors for Youth award. I have no doubt she will exhibit the same dedication and character in all of her future accomplishments.

PERSONAL EXPLANATION

HON. SAM GRAVES

OF MISSOURI

IN THE HOUSE OF REPRESENTATIVES

Wednesday, May 11, 2016

Mr. GRAVES of Missouri. Mr. Speaker, on April 28 and 29, I missed a series of Roll Call votes. Had I been present, I would have voted

"YEA" on Numbers 173, 174, 175, 176, and 177 and "NAY" on Numbers 178 and 179.

TRIBUTE TO THE CHUCKWAGON RESTAURANT

HON. DAVID YOUNG

OF IOWA

IN THE HOUSE OF REPRESENTATIVES

Wednesday, May 11, 2016

Mr. YOUNG of Iowa. Mr. Speaker, I rise today to recognize The Chuckwagon Restaurant of Adair, Iowa for winning the 2016 Iowa's Best Burger Award from the Iowa Cattlemen's Association (ICA) and the Iowa Beef Industry Council (IBIC).

ICA and IBIC have teamed up for the past seven years to award an Iowa restaurant for showcasing their great beef products. The product of choice for the nominations and selection is an Iowa favorite: the hamburger. This year's winning entrant was a local hometown café, like so many of those in Iowa. The Chuckwagon Restaurant in Adair, Iowa has all the markings of a great burger place—with extra helpings of community pride and tailor-made with private recipe seasonings a hearty slab of beef placed firmly between two homemade buns.

The Chuckwagon's owner, Kim Reha, opened the doors to the restaurant in 2008. Ms. Reha has continually made changes and improvements not only to the facility, but to the burgers as well. Every burger is made-to-order with a toasted bun and homemade house seasonings. Katie Olthoff, Director of Communications for ICA said "They do an outstanding job of showcasing the great beef project with each of their great-tasting burgers on behalf of Iowa's beef farmers."

I commend Kim Reha and the staff at The Chuckwagon Restaurant for creating an outstanding menu featuring Iowa beef. I urge my colleagues in the U.S. House of Representatives to join me in congratulating The Chuckwagon Restaurant for winning Iowa's Best Burger Award. I wish Kim and all of the staff continued success in the future.

IN RECOGNITION OF GEORGE PAGANO II

HON. PATRICK MEEHAN

OF PENNSYLVANIA

IN THE HOUSE OF REPRESENTATIVES

Wednesday, May 11, 2016

Mr. MEEHAN. Mr. Speaker, I rise today to congratulate George Pagano II on completing the Talisker Whiskey Atlantic Challenge.

Media, Pennsylvania native George Pagano II and his partner Caitlin Miller recently completed rowing the Talisker Whiskey Atlantic Challenge, a 2,554 nautical mile race from the Canary Islands to Antigua. They are the youngest Americans and the youngest pair to ever compete.

George and Caitlin faced numerous challenges as they competed in this race—isolation, sleep deprivation, and even a tropical storm. Despite these challenges, the team completed the race in 58 days, 5 hours and 6 minutes.

I congratulate George and his partner Caitlin for their success. Their charity, the ALS Asso-

ciation of Greater Philadelphia, will benefit in its mission to find treatments and a cure for this terrible condition.

TRIBUTE TO THE REVEREND DR. RONALD L. BOBO, SR. FOR HIS 30TH PASTORAL ANNIVERSARY CELEBRATION

HON. WM. LACY CLAY

OF MISSOURI

IN THE HOUSE OF REPRESENTATIVES

Wednesday, May 11, 2016

Mr. CLAY. Mr. Speaker, I rise today to pay tribute to a remarkable Servant of God and long-time inspiring leader in St. Louis, Missouri, Reverend Dr. Ronald L. Bobo, Sr.

He is being honored for his thirty years of service to his congregation on June 12, 2016, at the 30th Pastoral Anniversary Celebration of West Side Missionary Baptist Church, "One Unified Church in Two Locations". He has set, and continues to set, a standard of excellence in spiritual leadership, social justice, and religious leadership that has been equaled by few other people.

Rev. Bobo has provided for three decades, and continues to provide, exceptional outreach services, not only to his congregation and to the citizens of St. Louis, but also to people around the world. He serves with great distinction in many capacities including as Foreign Mission Secretary for the Missionary Baptist State Convention of Missouri and as Executive Director/Founder of Sharing Hope International Ministries.

Rev. Bobo's ministry is par excellence. God's Light continues to shine brightly on this St. Louisian who has emerged to become one of the most effective religious leaders in the nation. He has worked tirelessly to help the disadvantaged and disenfranchised as well as uplift and inspire the souls and hearts of people in twenty-nine countries throughout Africa, Asia, Europe, the Caribbean, Australia, as well as both North and South America.

Rev. Dr. Bobo, Sr. is a person of great integrity, a gentleman and a scholar, and a man with a warm smile and a caring heart whose highest mission is to help others. He is a minister extraordinaire, beloved husband, father, and dedicated public servant.

Mr. Speaker, I urge Members of Congress to join me in honoring Reverend Dr. Ronald Bobo, Sr. on Sunday, June 12, 2016, at West Side Missionary Baptist Church for his 30th Pastoral Anniversary Celebration. I applaud this eloquent, compassionate, and dynamic Pastor for his role in being an agent for transformative change, and for his strong commitment to confront hopelessness, injustice, and inequality wherever he finds it to exist.

RECOGNIZING THE UNIVERSITY OF MOUNT UNION CONCERT CHOIR

HON. TIM RYAN

OF OHIO

IN THE HOUSE OF REPRESENTATIVES

Wednesday, May 11, 2016

Mr. RYAN of Ohio. Mr. Speaker, I rise today to recognize the outstanding collection of talented young women and men that make up the University of Mount Union Concert Choir.

Hailing from Alliance, Ohio the University of Mount Union Concert Choir is one of the oldest collegiate choirs in the United States. It is world renowned, touring the U.S. and abroad. Last year, they traveled to Austria and had an opportunity to perform inside many historically significant churches, cathedrals, and abbeys. These remarkable young musicians are from a variety of academic disciplines such as biology, criminal justice, neuroscience, mathematics, political science, and more.

The Choir is led by Dr. Grant William Cook, III, who is a Kent State University alumni and accomplished musicologist. The Concert Choir recently visited Washington D.C. and performed at the National Cathedral on May 8th—Mother's Day. I am proud to recognize such gifted young Ohioans and welcome you to join me in celebrating their achievements.

A TRIBUTE HONORING WALLACE
COMMUNITY COLLEGE—SELMA

HON. TERRI A. SEWELL

OF ALABAMA

IN THE HOUSE OF REPRESENTATIVES

Wednesday, May 11, 2016

Ms. SEWELL of Alabama. Mr. Speaker, I rise today to pay tribute to a hidden jewel in Alabama's 7th Congressional District—Wallace Community College of Selma, Alabama.

Wallace Community College—Selma is a stellar two-year institution that provides incredible educational opportunities to students of Dallas County and across the Black Belt of Alabama.

Now more than ever, America needs greater innovation in our educational system to meet the increasingly demanding needs of tomorrow. Outstanding higher education institutions in the State of Alabama are producing some of our state's and nation's best and brightest who will lead us into the next era of American cutting-edge technology, research, business leadership, entrepreneurship, science and innovation.

Wallace Community College—Selma (WCCS) is leading that charge in my district through its dual-enrollment program which allows high school students to complete college courses and graduate with a high school diploma as well as an associate degree from this junior college. In 2008, Wallace Community College—Selma graduated 31 students from the Selma Early College High School (ECHS), which was the first of its kind on a college campus in the state of Alabama.

The 2016 graduation class will include 22 dual enrollment students including 20 students that participated in a special partnership with Tuskegee University. The Howard Hughes Medical Institute (HHMI) program with Tuskegee allowed WCCS to increase the participation of underrepresented minority students from Alabama's Black Belt counties in the important fields of science and research. The Howard Hughes Medical Institute dual enrollment program offers high school students an opportunity to take classes at WCCS and Tuskegee and graduate with their high school diploma as well as an associate degree in science.

Mr. Speaker, the dual-enrollment program at Wallace Community College-Selma is accomplishing what it set out to do—giving Dallas County high school students a head start on

college. The benefits of this important opportunity are immeasurable. Cutting the cost and time spent in College while providing high school students significant exposure to the types of classes and fields of interest that will give them an important advantage and jump start on their peers.

Collaborations like these are so critically important to our youth gaining invaluable educational experience while obtaining college credit through dual-enrollment. America must encourage more of these types of efforts as we seek to lead the world in educating our people and attracting a new generation of high-tech and high-paying jobs and careers—understanding that science and technology are critical to our nation's economic growth and sustainability.

As the Member of Congress for the 7th Congressional District, I take great pride in working to offer solutions that will help lay the foundation for creating better-paying jobs, and for our education system to thrive into the future. In order to achieve this, we need innovative approaches to education and create a pipeline with our K–12 school systems, community colleges and universities to provide the resources our students need to become the best trained workforce. Our children deserve our greatest effort and America deserves our best workforce.

I am so proud to acknowledge today the tremendous efforts and outstanding programs offered at Wallace Community College—Selma which exemplify the invaluable role our two-year institutions serve in our communities. This college's leadership and innovation in creating a 21st century learning environment is to be greatly commended. What a jewel to have serving our students in the Black Belt of Alabama. I am proud to represent a district that cares so greatly for the future of the community and the future of this great nation.

Mr. Speaker, I want to commend Dr. James Mitchell for his tremendous leadership as President of WCCS. The faculty, administrators and students of the WCCS are truly outstanding.

This Friday, May 13, 2016 is graduation day at Wallace Community College—Selma. I want to congratulate the entire class of 2016 and especially acknowledge the academic achievement of the 22 dual enrollment students who will receive a special congressional commendation. HHMI Students: Lekeybriana Allen, Connor Blackmon, Ronnie Caver, Brian Crum, Shaquaria Dial, Lauren Ellis, Khamari Gibbs, Kiara Horton, Kalissa Johnson, Kaylin Jordan, Thomas Kendrick, Walter Kendrick, Will Kendrick, Brandon Oliver, LaDaria Shorts, Epiphany Simmons, Khadijah Simmons, Alexis Walker, Marketa Williams, Alanna Young. Dual Enrollment Students: Tyniquea Edwards, and Tori Hatfield.

I would also like to acknowledge the tremendous achievements of the Wallace Students who were Alabama Skills USA Winners: Joniece Collins—First Place in Masonry and was the first woman in the state of Alabama to win this honor. Other winners included Roderick Perkins—Second Place Masonry, Terrence Campbell—Third Place Masonry and Francis Phillips—Second Place Cosmetology in the Men's Hair Design Competition. I want to recognize the outstanding athletic achievements of Ki'Onna Likely who was the 2015–16 Alabama Community College Conference Player of the Year as well as NJCAA Second Team All-American.

Mr. Speaker, I ask my colleagues to join me in honoring all the accomplishments of the outstanding students and graduates of Wallace Community College—Selma and to praise the leadership of Dr. James Mitchell and the hardworking staff and faculty of WCCS.

Congratulation to the Graduating Class of 2016—I wish you the very best in all your future endeavors. We are counting on you to make difference.

JULIANA MEJIA

HON. ED PERLMUTTER

OF COLORADO

IN THE HOUSE OF REPRESENTATIVES

Wednesday, May 11, 2016

Mr. PERLMUTTER. Mr. Speaker, I rise today to recognize and applaud Juliana Mejia for receiving the Arvada Wheat Ridge Service Ambassadors for Youth award.

Juliana Mejia is a 12th grader at Arvada West High School and received this award because her determination and hard work have allowed her to overcome adversities.

The dedication demonstrated by Juliana Mejia is exemplary of the type of achievement that can be attained with hard work and perseverance. It is essential students at all levels strive to make the most of their education and develop a work ethic which will guide them for the rest of their lives.

I extend my deepest congratulations to Juliana Mejia for winning the Arvada Wheat Ridge Service Ambassadors for Youth award. I have no doubt she will exhibit the same dedication and character in all of her future accomplishments.

HONORING OSCAR GARCIA

HON. FILEMON VELA

OF TEXAS

IN THE HOUSE OF REPRESENTATIVES

Wednesday, May 11, 2016

Mr. VELA. Mr. Speaker, I rise today to honor Oscar M. Garcia of Willacy County, Texas. On April 20, 2016, his family gathered at the Garcia Ranch to celebrate his life and legacy, and I want to share the story of this important South Texan with my colleagues.

Oscar Garcia was born on November 4, 1930, west of Sebastian, Texas, on the Las Anacuas Ranch. At a young age, he began working in the fields of South Texas.

His wife, Hortencia Caballero, was born in 1945 near Lyford, Texas, and the couple married on June 15, 1952, in Lyford. Together they raised six children: Alma, Oscar Jr., Rolando, Armando, Reynaldo, and Elizabeth, and they had 16 grandchildren and 14 great-grandchildren.

Mr. Garcia began operating a trucking company in 1948. The business prospered under his management, and, with the profits of the company, he was able to purchase farm land in Willacy and Cameron Counties. Over the years, he amassed thousands of acres of prime land—much of it being the same land that he and his father worked on as sharecroppers or field hands. He grew his business over time, employing many and contributing greatly to the local economy. Mr. Garcia operated his trucking company for more than 50 years and farmed for 40 years.

In 1972, Mr. and Mrs. Garcia purchased their homestead property on Business 77 between Sebastian and Lyford. Although Mr. Garcia built his home for his family to live in and enjoy, the family business had a central role. The most used room in the house was the office he shared with his wife, and the family used the vast acreage of the Garcia Ranch to store equipment, a practice that continues today.

Mr. Garcia passed away on October 25, 2010. He was preceded in death by his son, Rolando. Until the day he died, Mr. Garcia continued to work hard, to provide for his family, and to earn the respect of every person he met.

Since the loss of her husband, Mrs. Garcia has continued to manage and operate the property acquired during her husband's lifetime. Additionally, she remains dedicated to the legacy of hard work, respect, and caring for her community that she and her husband built together. She is an active member of her church and a patron of the local volunteer fire department, and established an annual scholarship for Lyford High School students.

The recent community gathering to honor Mr. Garcia and the entire Garcia family was also a testament to the Willacy County community, which has been challenged greatly in recent years. Despite setbacks, Willacy County remains a community that is united and filled with the most valuable of all resources—people like Oscar Garcia who care about each other and the place they live. Perhaps the greatest legacy of Oscar Garcia's life is the inspiration to future generations to work hard and serve their community.

Mr. Speaker, I join my colleagues in the House of Representatives in standing in honor of Oscar Garcia, his family, and his Willacy County community.

TRIBUTE TO RICHARD M.
PHILLIPS, ESQ.

HON. JARED HUFFMAN

OF CALIFORNIA

IN THE HOUSE OF REPRESENTATIVES

Wednesday, May 11, 2016

Mr. HUFFMAN. Mr. Speaker, I rise today to recognize my constituent Richard M. Phillips of Tiburon, California, upon his retirement from the law firm of K&L Gates LLP after 45 years of private practice. Throughout his lengthy career, Mr. Phillips has been a leader in the areas of securities regulation and enforcement. He spent his professional career in both government service and private practice, with a focus on the development and enforcement of our nation's key laws and regulations relating to the protection of investors and the securities marketplace.

Mr. Phillips' career spans many years of public service, holding various positions within the U.S. Securities and Exchange Commission, including Assistant to the Chairman of the SEC, Assistant General Counsel, and Staff Director of SEC Corporate Disclosure and Investment Company Studies. He was recognized for his contributions to the development of securities law and for his service to the financial and SEC communities over the years when he was awarded the prestigious William O. Douglas Award by the SEC Alumni Association in 2001.

In 1971, Mr. Phillips became a founding partner of the law firm of Hill, Christopher & Phillips of Washington, D.C., which eventually evolved into the current global law firm of K&L Gates LLP. Upon moving to Tiburon, California, with his wife Elda in 2000, Mr. Phillips co-founded the San Francisco office of K&L Gates, where he built his practice in the areas of securities regulation and investment management, representing and guiding clients through the complexities of the securities laws.

In addition to Mr. Phillips' many accomplishments in the area of securities law, he has been a prolific writer and lecturer and has served in leadership roles for various publications and organizations focused on securities regulation, both at the national level and around the globe. Notably, he co-authored, edited, and was a guiding force behind the first Securities Enforcement Manual: Tactics and Strategies which was published in 1997 by the American Bar Association Section of Business Law. The Manual combined the collective practical experience of Mr. Phillips and his law firm colleagues in helping guide experienced and novice lawyers through the thicket of strategic and tactical issues in securities enforcement practice. He co-edited the second edition in 2007. These books continue to be relied upon by practitioners in this area.

Mr. Phillips has been a tremendous mentor and guide to younger lawyers in helping them develop their expertise, and has been a valued member of his law firm whose accomplishments will live on. I ask my colleagues to join me in paying tribute to Mr. Phillips for his record of accomplishment and public service and in extending best wishes to him and to his wife Elda upon the occasion of his retirement.

LONG BEACH LOSES LEGEND,
MARILYN GREEN

HON. ALAN S. LOWENTHAL

OF CALIFORNIA

IN THE HOUSE OF REPRESENTATIVES

Wednesday, May 11, 2016

Mr. LOWENTHAL. Mr. Speaker, it is with considerable sadness and a profound sense of loss that I report that the Long Beach community lost a dear friend and a dedicated public servant on the passing of Marilyn Green on October 29, 2015. Marilyn—with long-time professional partner Dick Cantrell—founded the law firm of Cantrell Green—now Cantrell Green Pekich Cruz & McCort—in 1971.

Marilyn was also the heart and soul of the progressive movement in Long Beach. She was an advocate, mentor, and friend to several generations of progressive leaders in Long Beach. I count myself lucky to have had her friendship and counsel over the years.

A native of Newark, New Jersey, Marilyn eventually made her way to Stanford Law School. While attending as one of only two female students in her class, she met and married journalist Terence Green.

Determined to finish what she started, she sat for the California Bar exam in 1951 and was admitted to practice law in January, 1952, just one month before her first son, Alan, was born. She used to recall how odd it felt walking to take her oath while almost 9 months pregnant.

Terry's job brought them to Playa del Rey and, eventually, to the Long Beach area that

would become their home for well over 50 years.

Like many women of her generation, Marilyn found herself unwelcome in many law firms due to her gender and was limited to family law practice. Knowing it was a matter of time before she found the right job, she settled into family law. She used to joke that, as a young lawyer, she had no idea how to create a safe exit strategy while interviewing a less-than-savory character. During one such interview, she decided "the case was much too complicated" and referred the person to the FBI. She later told us "From then on, I decided to keep the FBI's number in my top drawer, but think I certainly wore out my welcome!"

Marilyn joined the prestigious Levy & Van Bourg firm as an applicant's attorney in Workers' Compensation in the late 1960s early 1970s.

When she and Richard Cantrell first opened Cantrell and Green in 1971, their first office was a public phone booth on the corner of Broadway and Pine Avenue in downtown Long Beach. Later, good friend and union official Tony Rodriguez from the United Rubber Workers Union, would offer them a small office at his Local.

Marilyn and Richard would go on to build Cantrell and Green into one of the most well-known and respected workers' compensation firms in Southern California. Their practice also included social security, labor law, and personal injury claims.

Not only did Marilyn Green talk the talk, she walked the walk. When asked why she would settle in a practice not as lucrative as other areas of practice, Marilyn said "If I wanted to make money, I would never have chosen a workers' compensation practice. However, I love and believe in what I do and that is why I became a lawyer."

Over the years, Marilyn was honored by many organizations, including being named as Long Beach Bar Association Lawyer of the Year. She was a true professional in her work, a good friend to many, and a powerful force for good in our community who will be sorely missed.

RECOGNIZING THE 60TH
ANNIVERSARY OF LISLE, ILLINOIS

HON. PETER J. ROSKAM

OF ILLINOIS

IN THE HOUSE OF REPRESENTATIVES

Wednesday, May 11, 2016

Mr. ROSKAM. Mr. Speaker, I rise today to commemorate the 60th anniversary of the incorporation of Lisle, Illinois.

Lisle is a thriving and vibrant municipal and has built a friendly and welcoming community through its continued dedication to its residents and visitors.

Since its founding in 1832, Lisle has become a center of culture and commerce within the Chicagoland area and has served as a home to families, businesses, professionals, churches and organizations. Its multitude of parks, including the beautiful Morton Arboretum, and youth and family friendly activities make it a superb place to work, live, and raise a family.

On the occasion of this 60th Anniversary, we join together to celebrate Lisle's legacy of growth and prosperity and to look ahead to the opportunities facing this great village.

Mr. Speaker, please join me in recognizing the 60th anniversary of the incorporation of the Village of Lisle, Illinois, and wishing her residents a very successful year ahead.

HONORING E.J. ALMO LORENZI ON HIS 85TH BIRTHDAY

HON. JEFF DENHAM

OF CALIFORNIA

IN THE HOUSE OF REPRESENTATIVES

Wednesday, May 11, 2016

Mr. DENHAM. Mr. Speaker, I rise today along with my colleague, Mr. JIM COSTA, to acknowledge and honor the life of a beloved leader in the Merced Community, E.J. Almo Lorenzi on his 85th birthday. This is a tremendous milestone that deserves to be commemorated.

E.J. was born in the heart of the San Joaquin Valley's fertile lands of California on May 18, 1931. Growing up, he attended Our Lady of Mercy. At the young age of 13, E.J. began his first job working at Purity Stores as a box boy. He graduated from Merced Union High School in 1945 and then began working for Stefani's Clothiers.

In 1954, he was offered a job working for the firm of I.H. Reuter Insurance Agency. He purchased Reuter and Merced Tordini Agency with a partner, John Masasso and together they created the Lorenzi Masasso Agency. They eventually branched out to form Professional Benefits Services. Mr. Lorenzi worked endlessly to advance the status and relationships of the agency and maintains an active role as the Managing Partner of Lorenzi Land and Lifestyle Investments.

Involved in the Merced community, E.J. is a member of several organizations including: the Mercy Hospital Heritage Club, Golden West, Boosters of Merced, Catholic Professional Business Club, and Italo-American Lodgers. He is a lifetime member of the Knights of Columbus, Italian Catholic Federation, and the Commonwealth Club of California. The Merced City Council selected E.J. Lorenzi as the City's Ambassador of Goodwill and in 2011 he was selected as Man of the Year by the Greater City Chamber of Commerce.

E.J. is happily married to his wife, Madeline. They have five children, ten grandchildren, and six great grandchildren. E.J. is known in the community for his perseverance, honesty, and integrity.

Mr. Speaker, please join me and my colleague, Mr. COSTA, in honoring E.J. Lorenzi for his unwavering leadership and recognizing his many accomplishments and invaluable contributions.

CHRISTOPHER CANNIZZARO

HON. ED PERLMUTTER

OF COLORADO

IN THE HOUSE OF REPRESENTATIVES

Wednesday, May 11, 2016

Mr. PERLMUTTER. Mr. Speaker, I rise today to recognize and applaud Christopher Cannizzaro for receiving the Arvada Wheat Ridge Service Ambassadors for Youth award.

Christopher Cannizzaro is a 12th grader at Arvada West High School and received this award because his determination and hard

work have allowed him to overcome adversities.

The dedication demonstrated by Christopher Cannizzaro is exemplary of the type of achievement that can be attained with hard work and perseverance. It is essential students at all levels strive to make the most of their education and develop a work ethic which will guide them for the rest of their lives.

I extend my deepest congratulations to Christopher Cannizzaro for winning the Arvada Wheat Ridge Service Ambassadors for Youth award. I have no doubt he will exhibit the same dedication and character in all of his future accomplishments.

MR. JOSEPH PARISI

HON. LEE M. ZELDIN

OF NEW YORK

IN THE HOUSE OF REPRESENTATIVES

Wednesday, May 11, 2016

Mr. ZELDIN. Mr. Speaker, I rise today to pay a special tribute to the incredible life of Mr. Joseph Parisi.

Joseph was born in 1916 to Francesco Parisi and Rosaria Cacciola. He attended James Monroe High School in Manhattan until he had to leave and help with the family business. Joseph worked tirelessly to ensure that his family came first—a testament to the type of person he is. Joseph returned to his studies and attended Harlem High School for two years, managing to complete his education.

In June of 1943, Mr. Parisi answered the call of duty and joined the war effort to ensure we remained the free nation we are today. After Basic Training, he attended Group School on repair and maintenance of telephones and equipment and was assigned to Headquarters Company, 1159th Combat Engineers Group, as a Technician 4th Grade, or Tec4. Joseph narrowly escaped death in 1945 when he crossed over a bridge east of the Rhine River. The 1159th Combat Engineers Group, led by Lt. Col. Kenneth Fields, took over command of the engineering units at Remagen, Germany and shortly after crossing the bridge, the east end collapsed into the Rhine resulting in the death of 28 and several hundred injuries. Joseph served in the Army until February of 1946, when he was released from active service. During his time in the service, he received numerous decorations including: the American Theater Campaign Medal; European-African-Middle Eastern (EAME) Campaign Medal with two Bronze Stars; Good Conduct Medal; Victory Ribbon; Service Stripe; Overseas Service Bar; and Sharpshooter-carbine.

Joseph will be turning 100 years old on September 30, 2016; but today I would like to thank him for his years of dedication and service to our country and community. What he has managed to accomplish during his lifetime and give back to the country cannot be summarized in a few words; however it is important we honor these individuals as best we can. It is my hope that many will follow in his footsteps and give back to their country as graciously as he did. People like him are a rare breed and they help make not only our country, but our world a much safer and better place.

HONORING SKYLER SMITH ON BEING ACCEPTED AS A DELEGATE TO THE CONGRESS OF FUTURE SCIENTISTS AND TECHNOLOGY LEADERS BY THE NATIONAL ACADEMY OF FUTURE SCIENTISTS AND TECHNOLOGISTS

HON. BILLY LONG

OF MISSOURI

IN THE HOUSE OF REPRESENTATIVES

Wednesday, May 11, 2016

Mr. LONG. Mr. Speaker, I rise today to honor Seneca High School Student Skyler Smith, of Seneca, Missouri, on her being accepted as a delegate to the Congress of Future Scientists and Technology Leaders by the National Academy of Future Scientists and Technologists.

The Congress of Future Science and Technology Leaders is an honors-only program that is designed to motivate and direct the top students in the United States. It is specifically for students who aspire to be scientists, engineers and technologists, and helps to provide a path and mentorship for students to accomplish those dreams.

To be considered for acceptance a delegate, applicants must be recommended by either a teacher or member of the Academy based on a proven track record of academic excellence. Students must have a minimum of a 3.5 GPA and represent all 50 states and Puerto Rico. Students like Skyler, who qualify for this incredibly selective honor, exemplify top-tier diligence and academic talent.

Mr. Speaker, Skyler Smith has shown that she excels in her studies and has demonstrated a passion for a career in science. She will soon be representing the future of the state of Missouri at this conference and I have the utmost confidence that she will do an excellent job. I would like to extend my personal congratulations for her achievement, and on behalf of the 7th District of Missouri, I would like to thank her for representing our community.

CONGRATULATING TREVOR STORY ON BEING NAMED THE NATIONAL LEAGUE PLAYER OF THE WEEK

HON. KENNY MARCHANT

OF TEXAS

IN THE HOUSE OF REPRESENTATIVES

Wednesday, May 11, 2016

Mr. MARCHANT. Mr. Speaker, I rise today to congratulate Trevor Story of Irving, Texas, on being named Major League Baseball's (MLB) National League Player of the Week for the week of April 4th. As the season progresses, this rookie continues to surpass expectations and has excited MLB fans across the country. The Colorado Rockies couldn't be more enthused with their new star in the making.

Trevor quickly entered his name into the record books with an outstanding performance to start the season. Mr. Story was the first player in MLB history to homer in the first four games of his career and hit seven home runs in his first six career games. He is also one of only four rookies to ever win the player of the

week since it was first awarded in 1974. Trevor's outstanding rookie season continues to gain momentum and draw comparisons to some of the league's best.

Trevor was always an impactful athlete, a standout in both baseball and football during his career with the Irving High School Tigers. He made a difficult but prosperous decision to put aside playing quarterback after his sophomore year to focus on baseball. While great at shortstop, Trevor was a hard throwing pitcher who was once clocked at 96 mph, although he never pursued pitching. Scouts would fill the stands when he took the field and teams would pitch around him as his hitting ability scared most opponents.

Off the field, Trevor is an active community servant with many local nonprofit groups including Irving ISD and Irving Cares, where his mother, Teddie Story, heads the nonprofit which serves families and children in need. Trevor will continue to inspire young players and build on his already impressive personal and professional resume as his baseball career continues.

Mr. Speaker, on behalf of the 24th Congressional District of Texas, I ask all my distinguished colleagues to join me in congratulating Trevor Story on his work ethic and athletic achievements.

HONORING CRAIG K. ROBBINS OF PENNSYLVANIA

HON. SCOTT PERRY

OF PENNSYLVANIA

IN THE HOUSE OF REPRESENTATIVES

Wednesday, May 11, 2016

Mr. PERRY. Mr. Speaker, today I honor my constituent, Craig K. Robbins, on his upcoming retirement after 32 years with the East Pennsboro Area School District in Cumberland County, Pennsylvania.

Mr. Robbins has served his students in numerous capacities, to include special education teacher, head track and football coach, assistant principal, and for the last 17 years, principal of East Pennsboro Area High School. Mr. Robbins also helped found and maintain the Family Fund, a charity that has raised more than \$150,000 for local families in crisis.

From the beginning of his career, Mr. Robbins was the epitome of professionalism and tireless devotion to his duty—positively impacting countless students, teachers and families.

On behalf of Pennsylvania's Fourth Congressional District, with great pride I commend and congratulate Craig K. Robbins upon his retirement after 32 years of selfless service to the East Pennsboro Area School District.

IN HONOR OF THE LIFE OF JOYCE GARVER KELLER

HON. PATRICK J. TIBERI

OF OHIO

IN THE HOUSE OF REPRESENTATIVES

Wednesday, May 11, 2016

Mr. TIBERI. Mr. Speaker, I rise today to commemorate and honor the life of Joyce Garver Keller.

Throughout her life, Joyce was a steadfast and passionate advocate for Ohio and its Jewish community. For twenty-five years she

served as the Executive Director of Ohio Jewish Communities.

The fruits of Joyce's labor, and her influence, can be found throughout the great state of Ohio. Although her career was long and full of many accomplishments, among her most noteworthy was the constructing of the Holocaust and Liberators Memorial located on the grounds of the Ohio Statehouse. In addition to this, Joyce was able to secure funds for services to the elderly in assisted living facilities; help refugees from the former Soviet Union access funds around the state for citizenship classes; and expand English as a second language programs. Joyce's actions spoke volumes about her mission to make a difference in her community and will continue to resonate for many years to come.

Joyce's tremendous efforts touched many people, and the power and zeal of her conviction inspired those around her. She was a loyal friend and was always willing to reach out to new people or lend a helping hand. Her unconquerable spirit is but one reason Joyce was successful in her professional career and so loved by those who knew her. The recent passing of Joyce Garver Keller is truly an immense loss for Ohio. This remarkable woman will be greatly missed by her family and many friends.

TRIBUTE IN HONOR OF THE LIFE OF WILLIAM V. CAMPBELL

HON. ANNA G. ESHOO

OF CALIFORNIA

IN THE HOUSE OF REPRESENTATIVES

Wednesday, May 11, 2016

Ms. ESHOO. Mr. Speaker, I rise today to honor the extraordinary life of William V. Campbell, who was born August 31, 1940, in Homestead, Pennsylvania, and passed away on April 18, 2016, in Palo Alto, California, at the age of 75.

Bill Campbell is survived by his wife Eileen Bocci Campbell, his children Jim and Maggie, and his three step-children, Kevin, Matthew and Kate Bocci.

Bill Campbell attended Columbia University where he played football and was named to the All-Ivy team. He graduated in 1962 and in 1964 he earned a Master's Degree in Education, also from Columbia. After serving as an Assistant Coach at Boston College, he became Coach of Columbia's football team, a position he held from 1974 to 1979. He entered the business world when he joined J. Walter Thompson, went on to work at Kodak, and became Apple's VP of Marketing and headed its Claris software division. Bill Campbell was CEO of GO Corporation, a company he sold to AT&T in 1993, and was CEO of Intuit from 1994 to 1998. He retired as Board Chair of Intuit in 2016.

The chorus of praise for Bill Campbell is intense and varied, and comes from a broad spectrum of people across Silicon Valley who benefited from his extraordinary generosity of his time and considerable talents. He was a generous benefactor to his home town, to Columbia University, to Boston College and to many other schools and charitable organizations. He has been called "the most important executive you've never heard of", energetic and vibrant, a great sports and executive coach, a proponent of creative talent, a geek

and a nerd whisperer. He was a devout Catholic and a staunch advocate for the rights of women and the LGBT community. He was humble and profane, adored children, and made everyone who knew him feel like he was their best friend.

Mr. Speaker, I ask the entire House of Representatives to join me in extending our most sincere condolences to Bill Campbell's wife and family. A giant has been taken from our midst but we are a better and stronger nation because he walked among us.

AMALIA OGANESEAN

HON. ED PERLMUTTER

OF COLORADO

IN THE HOUSE OF REPRESENTATIVES

Wednesday, May 11, 2016

Mr. PERLMUTTER. Mr. Speaker, I rise today to recognize and applaud Amalia Oganesean for receiving the Arvada Wheat Ridge Service Ambassadors for Youth award.

Amalia Oganesean is an 8th grader at Drake Middle School and received this award because her determination and hard work have allowed her to overcome adversities.

The dedication demonstrated by Amalia Oganesean is exemplary of the type of achievement that can be attained with hard work and perseverance. It is essential students at all levels strive to make the most of their education and develop a work ethic which will guide them for the rest of their lives.

I extend my deepest congratulations to Amalia Oganesean for winning the Arvada Wheat Ridge Service Ambassadors for Youth award. I have no doubt she will exhibit the same dedication and character in all of her future accomplishments.

COMMEMORATING THE 95TH ANNIVERSARY OF THE SARAH D. CULBERTSON MEMORIAL HOSPITAL

HON. DARIN LAHOOD

OF ILLINOIS

IN THE HOUSE OF REPRESENTATIVES

Wednesday, May 11, 2016

Mr. LAHOOD. Mr. Speaker, today, I would like to honor a remarkable organization, the Sarah D. Culbertson Memorial Hospital, in Rushville, IL. This year marks their 95th anniversary of improving the lives of the community with a tradition of quality health care.

Dr. Frederick Culbertson opened the doors to his newly established hospital on February 15, 1921 with the support and determination of his wife, Sarah D. Culbertson. During the Great Depression, there was no guarantee that a hospital would succeed, but with Sarah's steadfast attitude and administrative role, the hospital ensured care for its patients throughout the 1930's, while achieving financial stability.

Before Dr. Culbertson died in 1949, he willed the hospital to the people of Schuyler County. In loving memory, he stated that the very existence of the hospital was because of his wife. As a result, the hospital now bears her name as a symbol of her devotion to the people of Schuyler County.

Today, under the leadership of Chairman David Hester, the hospital provides extensive

inpatient and outpatient services and has expanded to two other locations in Illinois. The hospital retains the Culbertsons' vision through its mission: "To provide quality, compassionate care to the communities we serve."

I applaud the efforts of the Sarah D. Culbertson Memorial Hospital and staff. They continue to provide their patients with a family-centered community facility committed to improving local healthcare. Congratulations to the Sarah D. Culbertson Memorial Hospital and their team on a prosperous ninety-five years providing quality healthcare services to the residents of Central Illinois.

RECOGNIZING TIM DORAN

HON. STEVE STIVERS

OF OHIO

IN THE HOUSE OF REPRESENTATIVES

Wednesday, May 11, 2016

Mr. STIVERS. Mr. Speaker, I rise today to recognize Tim Doran for his retirement from the Ohio Automobile Dealers Association (OADA) after nearly 40 years with the association.

Tim graduated from Ohio University in 1972 with a Bachelor of Science degree in Business. Soon after graduation in 1976, Tim joined OADA as the Director of Services. He quickly rose through the ranks at OADA and eventually took the role of President.

The OADA works to support and increase the values of the Ohio automobile dealerships to make them the strongest in the nation. In his role as President, he has overseen all OADA Services and business activities, including implementing dealer programs, delegating staff projects, and monitoring all administrative and operations functions.

Beyond managing the OADA, Tim is instrumental in his role as a liaison between the Ohio legislature and the over 800 OADA members. He ensures all of the automobile dealerships, large or small, receive effective representation and support.

Tim Doran has shown incredible dedication to serving the automobile businesses in Ohio. I would like to thank him for his great service to these companies over the years and wish him all the best in his well-deserved retirement.

PERSONAL EXPLANATION

HON. TERRI A. SEWELL

OF ALABAMA

IN THE HOUSE OF REPRESENTATIVES

Wednesday, May 11, 2016

Ms. SEWELL of Alabama. Mr. Speaker, I was unavoidably detained. Had I been present, I would have voted Yea on Roll Call Number 184.

COMMENDING THE POLYNESIAN VOYAGING SOCIETY FOR THE MALAMA HONUA WORLDWIDE VOYAGE

HON. MARK TAKAI

OF HAWAII

IN THE HOUSE OF REPRESENTATIVES

Wednesday, May 11, 2016

Mr. TAKAI. Mr. Speaker, I rise today to honor the Polynesian Voyaging Society and to

commend its sailors' current journey across the world's oceans, as part of the Malama Honua Worldwide Voyage, on the two Polynesian voyaging canoes, Hokulea and Hikianalia.

Formed in 1973 to revive Polynesian navigation practices many thought were lost to history, the Polynesian Voyaging Society built a voyaging canoe based on ancient sketches and in 1976 sailed from Hawaii to Tahiti only by using observations of the stars, sun, ocean swells, and other natural patterns. Now, the Polynesian Voyaging Society is bringing their awesome feat to the rest of the world through its worldwide voyage, called Malama Honua, which means "to care for our Earth."

As Hokulea circumnavigates the globe, the voyagers hope to teach and learn from others how to harness our world's traditions to protect our cultural and environmental resources for future generations. In a time when world powers and leading scientists struggle to mitigate climate change through modern technology and politics, this triumph of ancient Polynesian navigation shows us the power of nature and importance of sustainability and stewardship for Island Earth.

So, on behalf of Congress, I honor the Polynesian Voyaging Society for its decades of accomplishments and celebrate the Malama Honua Worldwide Voyage. I hope to speak of their mission and values for years to come.

CONGRATULATING ANNA HOLZER ON HER RETIREMENT FROM THE CITY OF HURST, TEXAS

HON. KENNY MARCHANT

OF TEXAS

IN THE HOUSE OF REPRESENTATIVES

Wednesday, May 11, 2016

Mr. MARCHANT. Mr. Speaker, I rise today to congratulate Councilmember Anna Holzer for her 43 years of dedicated service to the City of Hurst, Texas.

Anna and her family first arrived in Hurst in 1968 and, since then, for over forty years, she has stood as a pillar of the community, serving Hurst and the surrounding areas with honor and distinction. Anna possesses a dedication to community that is unrivaled by many in public service. She has devoted her life to improving not only the safety and security of our communities, but to improving our public education system as well.

Driven by her passion for education, Anna served as the Director of Library Services at the Northwest Campus of Tarrant County College where she focused her efforts on assisting students achieve their educational goals. Anna served in this capacity for 30 years before retiring from Tarrant County College in 2008.

Since first being elected to the city council in May, 1992, Anna has served on the Hurst Crime District Control Board, Hurst Citizens Fire Academy Alumni Association, Hurst Planning and Zoning Commission, Hurst Library Board, is a city council liaison to the HEB Teen Court Advisory Board, and is Chair of the United Way—Northeast Steering Committee. Additionally, in 2012, Anna was selected by her peers on the city council to serve as Mayor Pro Tempore.

Anna's exemplary commitment to her community will leave a lasting mark upon the City of Hurst for many years to come. Her tenure

with the Hurst City Council will be forever remembered by the countless lives her service has touched.

Mr. Speaker, it is a pleasure to recognize the contributions Anna has made to the City of Hurst. I ask all of my distinguished colleagues to join me in thanking Anna Holzer for her many years of service.

AUTHORIZATION FOR USE OF MILITARY FORCE

HON. BARBARA LEE

OF CALIFORNIA

IN THE HOUSE OF REPRESENTATIVES

Wednesday, May 11, 2016

Ms. LEE. Mr. Speaker, I rise today to challenge this House to live up to our Constitutional duty to debate the ongoing war in the Middle East.

For nearly two years, our brave servicemen and women have been fighting yet another war.

As they face snipers and mortar rounds—incidentally some claim that they are not in combat.

How can we claim this is not combat?

And worse, how can we ask them to go to war when Congress cannot even muster the courage to debate it?

The last four Presidents have bombed the Middle East with little or no Congressional oversight; will we allow a fifth President to continue these wars unchecked?

As the NDAA comes to the Floor next week, I submitted an amendment to force a debate on this war and repeal the 2001 blank check for endless war that got us into this mess.

The Rules Committee should allow this important debate to come to the House Floor.

Mr. Speaker, let us debate this war, its costs and consequences and a real strategy to end ISIL's reign of terror.

HONORING JUNWON PARK ON BEING ACCEPTED AS A DELEGATE TO THE CONGRESS OF FUTURE SCIENTISTS AND TECHNOLOGY LEADERS BY THE NATIONAL ACADEMY OF FUTURE SCIENTISTS AND TECHNOLOGISTS

HON. BILLY LONG

OF MISSOURI

IN THE HOUSE OF REPRESENTATIVES

Wednesday, May 11, 2016

Mr. LONG. Mr. Speaker, I rise today to honor Greenwood Laboratory School student Junwon Park, of Springfield, Missouri, on his being accepted as a delegate to the Congress of Future Scientists and Technology Leaders by the National Academy of Future Scientists and Technologists.

The Congress of Future Science and Technology Leaders is an honors-only program that is designed to motivate and direct the top students in the United States. It is specifically for students who aspire to be scientists, engineers and technologists, and helps to provide a path and mentorship for students to accomplish those dreams. It takes place in the University of Massachusetts over 3 days, and helps to spark meaningful dialogues and exchanges of ideas between future leaders in the fields of science and technology.

To be considered for acceptance a delegate, applicants must be recommended by either a teacher or member of the Academy based on a proven track record of academic excellence. Students must have a minimum of a 3.5 GPA and represent all 50 states and Puerto Rico. Students like Park, who qualify for this incredibly selective honor, exemplify top-tier diligence and academic talent.

Mr. Speaker, Junwon Park has proven that he is not only an excellent student, but also passionate about science and technology. Junwon will soon be representing the future of the state of Missouri at this conference, and I have the utmost confidence that he will do an excellent job. I would like to extend my personal congratulations for his achievement, and on behalf of the 7th District of Missouri, I would like to thank him for representing our community.

RECOGNIZING THE VETERANS OF FOREIGN WARS POST 10354

HON. BETO O'ROURKE

OF TEXAS

IN THE HOUSE OF REPRESENTATIVES

Wednesday, May 11, 2016

Mr. O'ROURKE. Mr. Speaker, it is with great pleasure that I rise today to recognize the Veterans of Foreign Wars Post 10354, locally known as the Madrid-McLaughlin-Navarrete Post, located in the Mission Valley of El Paso, Texas. I am pleased to recognize them as a distinguished Veteran Service Organization.

The Veterans of Foreign Wars Post 10354 was founded on April 15, 1952 and named after three outstanding El Pasoans: Daniel Madrid, an Airborne Trooper with the 506th Parachute Infantry Regiment who died while serving in Europe during World War II; Francis J. McLaughlin, a service member with the U.S. Army who died while serving in the South Pacific theater during World War II; and Manny Navarrete, a U.S. Army retiree who returned to El Paso after transitioning out of the military and continued his service to our country through his active participation and advocacy with Post 10354.

Since its inception, Post 10354 has dedicated itself to serving veterans, current service members and their families, and community members throughout the El Paso community. Today, the Post is made up of 143 members. Collectively, these members contribute 3,000 volunteer hours a year as a Veterans Service Organization, mainly focused on assisting veterans file their benefits claims, appeals, and other medical requests with the Department of Veterans Affairs. Other examples of Post 10354's service to the El Paso community includes their biannual picnics with food, music, and youth activities; food drives during the holiday season; and partnerships with El Paso schools, including the Ysleta Independent School District, where they encourage and work with students to identify opportunities to give back to the El Paso community.

I thank the VFW and the Madrid-McLaughlin-Navarrete Post 10354 for their commitment to honoring our veterans and helping to strengthen the El Paso community's dedication to public service. I am glad that Veteran Services Organizations like these exist in my district, and I thank them for their selfless service.

OUR UNCONSCIONABLE NATIONAL DEBT

HON. MIKE COFFMAN

OF COLORADO

IN THE HOUSE OF REPRESENTATIVES

Wednesday, May 11, 2016

Mr. COFFMAN. Mr. Speaker, on January 20, 2009, the day President Obama took office, the national debt was \$10,626,877,048,913.08.

Today, it is \$19,197,497,243,132.16. We've added \$8,570,620,194,219.08 to our debt in 6 years. This is over \$7.5 trillion in debt our nation, our economy, and our children could have avoided with a balanced budget amendment.

PERSONAL EXPLANATION

HON. ED PERLMUTTER

OF COLORADO

IN THE HOUSE OF REPRESENTATIVES

Wednesday, May 11, 2016

Mr. PERLMUTTER. Mr. Speaker, on May 10, 2016 I was not present to vote on H.R. 4957. I wish to reflect my intentions had I been present to vote.

Had I been present for roll call No. 180, I would have voted "YEA."

CONGRATULATING ANGIE LEE ON BEING NAMED ONE OF THE PRUDENTIAL SPIRIT OF COMMUNITY AWARD WINNERS

HON. PETER J. ROSKAM

OF ILLINOIS

IN THE HOUSE OF REPRESENTATIVES

Wednesday, May 11, 2016

Mr. ROSKAM. Mr. Speaker, I am pleased today to recognize Jungin "Angie" Lee, an exceptional and accomplished young woman from Naperville, Illinois. Angie was recently named one of the top ten youth volunteers in the nation by the Prudential Spirit of Community Awards.

When Angie was just 15 months old, her family learned she had an autosomal recessive disease called spinal muscular atrophy (SMA). This genetic disorder causes debilitating and often fatal muscle weakness. Yet this disease did not stop Angie from helping people. Nine years ago, at the ripe age of 8, Angie and her friend, Kyra Scadden, started a nonprofit called "Angie's Hope" to raise money for SMA research.

Since its inception, Angie's Hope has gone from raising \$200, literally one penny at a time through a penny collection drive, to raising \$40,000 in 2015. Through it all, Angie has never lost sight of the fact that individual efforts can change lives. Angie has helped raise over 200,000 dollars for SMA research with no plans to stop anytime soon. She is planning "something big" for the charity's 10th anniversary and would eventually like to expand the nonprofit to multiple states. Angie truly is an inspiration for all of us.

Mr. Speaker, please join me in congratulating Angie Lee on receiving her award and thanking her for the dedication and commitment she has displayed in her work.

SENATE COMMITTEE MEETINGS

Title IV of Senate Resolution 4, agreed to by the Senate of February 4, 1977, calls for establishment of a system for a computerized schedule of all meetings and hearings of Senate committees, subcommittees, joint committees, and committees of conference. This title requires all such committees to notify the Office of the Senate Daily Digest—designated by the Rules Committee—of the time, place and purpose of the meetings, when scheduled and any cancellations or changes in the meetings as they occur.

As an additional procedure along with the computerization of this information, the Office of the Senate Daily Digest will prepare this information for printing in the Extensions of Remarks section of the CONGRESSIONAL RECORD on Monday and Wednesday of each week.

Meetings scheduled for Thursday, May 12, 2016 may be found in the Daily Digest of today's RECORD.

MEETINGS SCHEDULED

MAY 13

9:30 a.m.

Committee on Armed Services

Closed business meeting to continue to markup the proposed National Defense Authorization Act for fiscal year 2017.

SR-222

MAY 17

10 a.m.

Committee on Energy and Natural Resources

To hold hearings to examine the status of advanced nuclear technologies.

SD-366

Committee on Environment and Public Works

Subcommittee on Fisheries, Water, and Wildlife

To hold hearings to examine marine debris and wildlife, focusing on impacts, sources, and solutions.

SD-406

Committee on Finance

To hold hearings to examine integrating the corporate and individual tax systems, focusing on the dividends paid deduction considered.

SD-215

Committee on the Judiciary

To hold hearings to examine National Foster Care Month, focusing on supporting youth in the foster care and juvenile justice systems.

SD-226

11 a.m.

Committee on Foreign Relations

To hold hearings to examine the War in Syria, focusing on next steps to mitigate the crisis.

SD-419

2 p.m.

Committee on Energy and Natural Resources

Subcommittee on Water and Power

To hold hearings to examine S. 2524, to insure adequate use and access to the existing Bolts Ditch headgate and ditch segment within the Holy Cross Wilderness in Eagle County, Colorado, S. 2533, to provide short-term water supplies to drought-stricken California and provide for long-term investments in drought resiliency throughout the Western United States, S. 2616, to modify certain cost-sharing and revenue

provisions relating to the Arkansas Valley Conduit, Colorado, S. 2902, to provide for long-term water supplies, optimal use of existing water supply infrastructure, and protection of existing water rights, and S. 2907, to amend the Energy and Water Development and Related Agencies Appropriations Act, 2015, to strike the termination date for pilot projects to increase Colorado River System water in Lake Mead.

SD-366

2:30 p.m.

Committee on Homeland Security and Governmental Affairs

To hold hearings to examine America's insatiable demand for drugs, focusing on assessing the Federal response.

SD-342

4 p.m.

Committee on Appropriations

Subcommittee on Agriculture, Rural Development, Food and Drug Administration, and Related Agencies

Business meeting to markup an original bill entitled, "Agriculture, Rural Development, Food and Drug Administration and Related Agencies Appropriations Act, 2017".

SD-124

MAY 18

10 a.m.

Committee on Health, Education, Labor, and Pensions

To hold hearings to examine Every Student Succeeds Act implementation, focusing on perspectives from education stakeholders.

SD-430

Committee on Homeland Security and Governmental Affairs

To hold hearings to examine assessing the security of critical infrastructure, focusing on threat, vulnerabilities, and solutions.

SD-342

Committee on the Judiciary

To hold hearings to examine the nominations of Donald Karl Schott, of Wisconsin, to be United States Circuit Judge for the Seventh Circuit, Paul Lewis Abrams, to be United States District Judge for the Central District of California, Stephanie A. Finley, to be United States District Judge for the Western District of Louisiana, Claude J. Kelly III, to be United States District Judge for the Eastern District of Louisiana, and Winfield D. Ong, to be United States District Judge for the Southern District of Indiana.

SD-226

10:30 a.m.

Committee on Appropriations

Subcommittee on Military Construction and Veterans Affairs, and Related Agencies

To hold hearings to examine a review of the Department of Veterans Affairs' electronic health record (Vista), progress toward interoperability with the Department of Defense's electronic health record, and plans for the future.

SD-124

2 p.m.

Committee on Small Business and Entrepreneurship

To hold hearings to examine small business and the Affordable Care Act.

SR-428A

2:15 p.m.

Committee on Indian Affairs

To hold hearings to examine S. 2785, to protect Native children and promote public safety in Indian country, S. 2916, to provide that the pueblo of Santa Clara may lease for 99 years certain restricted land, and S. 2920, to amend the Tribal Law and Order Act of 2010 and the Indian Law Enforcement Reform Act to provide for advancements in public safety services to Indian communities.

SD-628

3 p.m.

Committee on the Judiciary

Subcommittee on Crime and Terrorism

To hold hearings to examine ransomware, focusing on understanding the threat and exploring solutions.

SD-226

MAY 19

10 a.m.

Committee on Banking, Housing, and Urban Affairs

Subcommittee on Securities, Insurance, and Investment

To hold hearings to examine improving communities and businesses access to capital and economic development.

SD-538

2:30 p.m.

Committee on Energy and Natural Resources

To hold hearings to examine the Bureau of Ocean Energy Management's 2017-2022 OCS Oil and Gas Leasing Program.

SD-366

MAY 24

10 a.m.

Committee on Banking, Housing, and Urban Affairs

To hold hearings to examine understanding the role of sanctions under the Iran Deal.

SD-538

MAY 25

2:30 p.m.

Committee on Banking, Housing, and Urban Affairs

To hold hearings to examine understanding the role of sanctions under the Iran Deal, focusing on Administration perspectives.

SD-538

Daily Digest

Senate

Chamber Action

Routine Proceedings, pages S2675–S2714

Measures Introduced: Four bills were introduced, as follows: S. 2919–2922. **Pages S2708–09**

Measures Considered:

Energy and Water Development and Related Agencies Appropriations Act—Agreement: Senate continued consideration of H.R. 2028, making appropriations for energy and water development and related agencies for the fiscal year ending September 30, 2016, taking action on the following amendments proposed thereto: **Pages S2677–99**

Rejected:

By 39 yeas to 60 nays (Vote No. 69), Alexander (for Cardin) Amendment No. 3871 (to Amendment No. 3801), to use Federal and State expertise to mitigate fish and wildlife impacts at Corps of Engineers projects. (A unanimous-consent agreement was reached providing that the amendment, having failed to achieve 60 affirmative votes, was not agreed to.) **Pages S2680–81, S2699**

By 52 yeas to 47 nays (Vote No. 70), Alexander (for Fischer) Amendment No. 3888 (to Amendment No. 3801), to provide for the operation of reservoir projects by the Bureau of Reclamation. (A unanimous-consent agreement was reached providing that the amendment, having failed to achieve 60 affirmative votes, was not agreed to.) **Pages S2680–81, S2699**

Withdrawn:

McConnell (for Cotton) Amendment No. 3878 (to Amendment No. 3801), of a perfecting nature. **Pages S2677, S2680**

Pending:

Alexander/Feinstein Amendment No. 3801, in the nature of a substitute. **Page S2677**

Alexander (for Flake/McCain) Amendment No. 3876 (to Amendment No. 3801), to require that certain funds are used for the review and revision of certain operational documents. **Pages S2680–81**

During consideration of this measure today, Senate also took the following action:

By 57 yeas to 42 nays (Vote No. 67), three-fifths of those Senators duly chosen and sworn, not having voted in the affirmative, Senate rejected the motion to close further debate on McConnell (for Cotton)

Amendment No. 3878 (to Amendment No. 3801), of a perfecting nature. **Pages S2677–78**

By 97 yeas to 2 nays (Vote No. 68), three-fifths of those Senators duly chosen and sworn, having voted in the affirmative, Senate agreed to the motion to close further debate on Alexander/Feinstein Amendment No. 3801, in the nature of a substitute. **Page S2680**

A unanimous-consent agreement was reached providing for further consideration of the bill at approximately 10:30 a.m., on Thursday, May 12, 2016; and that all time during the adjournment and morning business count post-cloture on Alexander/Feinstein Amendment No. 3801 (listed above). **Page S2711**

Xinis Nomination—Agreement: A unanimous-consent-time agreement was reached providing that at a time to be determined by the Majority Leader in consultation with the Democratic Leader, Senate begin consideration of the nomination of Paula Xinis, of Maryland, to be United States District Judge for the District of Maryland; that there be 60 minutes for debate only on confirmation of the nomination, equally divided in the usual form; that upon the use or yielding back of time, Senate vote on confirmation of the nomination, without intervening action or debate. **Page S2699**

Nominations Received: Senate received the following nominations:

Robert M. Tobias, of the District of Columbia, to be a Member of the Internal Revenue Service Oversight Board for a term expiring September 14, 2020.

Blair Anderson, of California, to be Under Secretary of Transportation for Policy.

Carol Z. Perez, of Virginia, to be Ambassador to the Republic of Chile.

J. Patricia Wilson Smoot, of Maryland, to be a Commissioner of the United States Parole Commission for a term of six years.

1 Air Force nomination in the rank of general.

1 Army nomination in the rank of general.

4 Navy nominations in the rank of admiral.

Routine lists in the Air Force, Army, and Navy. **Pages S2711–14**

Nomination Withdrawn: Senate received notification of withdrawal of the following nomination:

Seth B. Carpenter, of the District of Columbia, to be an Assistant Secretary of the Treasury, which was sent to the Senate on February 12, 2015. **Page S2714**

Messages from the House: **Page S2705**

Measures Referred: **Page S2705**

Executive Communications: **Pages S2706–08**

Petitions and Memorials: **Page S2708**

Additional Cosponsors: **Pages S2709–10**

Statements on Introduced Bills/Resolutions:
Page S2710

Additional Statements: **Pages S2704–05**

Authorities for Committees to Meet: **Page S2710**

Privileges of the Floor: **Page S2710–11**

Record Votes: Four record votes were taken today. (Total—70) **Pages S2678, S2680, S2699**

Adjournment: Senate convened at 9:30 a.m. and adjourned at 5:49 p.m., until 9:30 a.m. on Thursday, May 12, 2016. (For Senate's program, see the remarks of the Acting Majority Leader in today's Record on page S2711.)

Committee Meetings

(Committees not listed did not meet)

BUSINESS MEETING

Committee on Armed Services: Committee began consideration of the proposed National Defense Authorization Act for fiscal year 2017, but did not complete action thereon, and will meet again on Thursday, May 12, 2016.

U.S. SCIENCE AND TECHNOLOGY ENTERPRISE

Committee on Commerce, Science, and Transportation: Committee concluded a hearing to examine leveraging the United States science and technology enterprise, after receiving testimony from Kelvin Droegemeier, University of Oklahoma, Norman; Jeannette Wing, Microsoft Corporation, Redmond, Washington; Robert D. Atkinson, Information Technology and Innovation Foundation, Washington, D.C.; and David C. Munson, Jr., University of Michigan College of Engineering, Ann Arbor.

CBP OVERSIGHT

Committee on Finance: Committee concluded an oversight hearing to examine the Customs and Border Protection agency, after receiving testimony from R. Gil Kerlikowske, Commissioner, Customs and Border Protection, Department of Homeland Security.

NOMINATIONS

Committee on Finance: Committee concluded a hearing to examine the nominations of Charles P. Blahous, III, and Robert D. Reischauer, both of Maryland, both to be a Member of the Board of Trustees of the Federal Hospital Insurance Trust Fund, a Member of the Board of Trustees of the Federal Old-Age and Survivors Insurance Trust Fund and the Federal Disability Insurance Trust Fund, and a Member of the Board of Trustees of the Federal Supplementary Medical Insurance Trust Fund, after the nominees testified and answered questions in their own behalf.

BUSINESS MEETING

Committee on Indian Affairs: Committee ordered favorably reported the following business items:

S.1163, to amend the Native American Programs Act of 1974 to provide flexibility and reauthorization to ensure the survival and continuing vitality of Native American languages;

S.2580, to establish the Indian Education Agency to streamline the administration of Indian education, with an amendment in the nature of a substitute; and

S.2739, to provide for equitable compensation to the Spokane Tribe of Indians of the Spokane Reservation for the use of tribal land for the production of hydropower by the Grand Coulee Dam.

INDIAN AFFAIRS LEGISLATION

Committee on Indian Affairs: Committee concluded a hearing to examine S. 2417, to amend the Indian Health Care Improvement Act to allow the Indian Health Service to cover the cost of a copayment of an Indian or Alaska Native veteran receiving medical care or services from the Department of Veterans Affairs, and S. 2842, to amend and reform the Johnson-O'Malley Act to award contracts to certain tribal organizations, Indian corporations, school districts, States, and consortia of tribal organizations, after receiving testimony from Michael Black, Director, Bureau of Indian Affairs, Department of the Interior; Roger Trudell, Santee Sioux Nation, Niobrara, Nebraska, on behalf of the Great Plains Tribal Chairman's Health Board; and Carla Mann, National Johnson O'Malley Association, Fort Washakie, Wyoming.

FCC PRIVACY RULES

Committee on the Judiciary: Subcommittee on Privacy, Technology and the Law concluded a hearing to examine the proposed Federal Communications Commission privacy rules, after receiving testimony from Tom Wheeler, Chairman, and Ajit Pai, Commissioner, both of the Federal Communications Commission; and Edith Ramirez, Chairwoman, and

Maureen Ohlhausen, Commissioner, both of the Federal Trade Commission.

THE ADMINISTRATION'S OVERTIME RULE

Committee on Small Business and Entrepreneurship: Committee concluded a hearing to examine the Administration's overtime rule and the rising costs of doing business, including S. 2707, to require the Secretary of Labor to nullify the proposed rule regarding defining and delimiting the exemptions for executive, administrative, professional, outside sales, and computer employees, to require the Secretary of Labor to conduct a full and complete economic analysis with improved economic data on small businesses, non-profit employers, Medicare or Medicaid dependent health care providers, and small governmental jurisdictions, and all other employers, and minimize the impact on such employers, before promulgating any substantially similar rule, and to provide a rule of construction regarding the salary threshold exemption under the Fair Labor Standards Act of 1938, after receiving testimony from Tammy D. McCutchen, Littler Mendelson, Sarita Gupta, Jobs With Justice, and Ross Eisenbrey, Economic Policy Institute, all of Washington, D.C.; Octavio Mantilla, Besh Restaurant Group, New Orleans, Louisiana, on behalf of the National Restaurant Association; and Nancy Duncan, Operation Smile, Virginia Beach, Virginia.

BUSINESS MEETING

Committee on Small Business and Entrepreneurship: Committee ordered favorably reported the following business items:

S. 2812, to amend the Small Business Act to reauthorize and improve the Small Business Innovation Research Program and the Small Business Technology Transfer Program, with an amendment in the nature of a substitute;

S. 2831, to amend the Small Business Investment Act of 1958 to provide priority for applicants for a license to operate as a small business investment company that are located in a disaster area, with an amendment in the nature of a substitute;

S. 2838, to improve the HUBZone program, S. 2846, to amend the Small Business Act to expand intellectual property education and training for small businesses, with amendments;

S. 2846, to amend the Small Business Act to expand intellectual property education and training for small businesses;

S. 2850, to amend the Small Business Act to provide for expanded participation in the microloan program; and

S. 2847, to require greater transparency for Federal regulatory decisions that impact small businesses.

House of Representatives

Chamber Action

Public Bills and Resolutions Introduced: 15 public bills, H.R. 5188–5202; and 2 resolutions, H. Res. 723–724, were introduced. **Pages H2280–81**

Additional Cosponsors: **Pages H2282–83**

Reports Filed: Reports were filed today as follows:

H.R. 1621, to modify the boundary of Petersburg National Battlefield in the Commonwealth of Virginia, and for other purposes, with an amendment (H. Rept. 114–562, Part 1); and

H.R. 3211, to provide for the addition of certain real property to the reservation of the Siletz Tribe in the State of Oregon (H. Rept. 114–563). **Page H2280**

Speaker: Read a letter from the Speaker wherein he appointed Representative Fortenberry to act as Speaker pro tempore for today. **Page H2217**

Recess: The House recessed at 11 a.m. and reconvened at 12 noon. **Page H2224**

Board of Visitors to the United States Military Academy—Appointment: The Chair announced the Speaker's appointment of the following Member on the part of the House to the Board of Visitors to the United States Military Academy: Representative Sean Patrick Maloney (NY). **Page H2227**

Providing for the establishment of an inter-agency task force to review, modify, and update best practices for pain management and prescribing pain medication: The House passed H.R. 4641, to provide for the establishment of an inter-agency task force to review, modify, and update best practices for pain management and prescribing pain medication, by a ye-a-and-nay vote of 412 yeas to 4 nays, Roll No. 184. **Pages H2234–47, H2253**

Pursuant to the Rule, the amendment in the nature of a substitute recommended by the Committee on Energy and Commerce now printed in the bill

shall be considered as an original bill for the purpose of amendment under the five-minute rule.

Page H2238

Agreed to:

Brownley (CA) amendment (No. 1 printed in part A of H. Rept. 114–551) that adds the Office of Women’s Health;

Pages H2238–39

Brooks (IN) amendment (No. 2 printed in part A of H. Rept. 114–551) that requires that any physician, dentists, non-physician prescriber or pharmacist who becomes a member of the Pain Management Best Practices Inter-Agency Task Force shall currently be licensed and practicing in their appropriate State;

Page H2239

Grayson amendment (No. 3 printed in part A of H. Rept. 114–551) that ensures that “first responders” are included for membership on the Pain Management Best Practices Inter-Agency Task Force;

Pages H2239–40

Clark (MA) amendment (No. 4 printed in part A of H. Rept. 114–551) that adds to the Task Force an expert in adolescent and young adult addiction, and a person in recovery from addiction to medication for chronic pain whose addiction began in adolescence or adulthood, and directs the Task Force to consider the distinct needs of adolescents and young adults in its development of best practices;

Page H2240

Pallone amendment (No. 5 printed in part A of H. Rept. 114–551) that adds representatives of Veteran Service Organizations to the Pain Management Best Practices Inter-Agency Task Force;

Pages H2240–41

Nolan amendment (No. 6 printed in part A of H. Rept. 114–551) that inserts a representative on the task force for active duty military, armed forces personnel, and veteran health and prescription opioid addiction;

Page H2241

Watson Coleman amendment (No. 7 printed in part A of H. Rept. 114–551) that inserts a minority health expert as a representative to the Pain Management Best Practices Inter-Agency Task Force established by this bill;

Pages H2241–42

Kuster amendment (No. 8 printed in part A of H. Rept. 114–551) that requires that the task force research addiction trends in communities with high rates of prescription drug abuse;

Page H2242

Schiff amendment (No. 9 printed in part A of H. Rept. 114–551) that requires the Inter-Agency Task Force, as part of its duties to review and update best practices for pain management strategies, to also take into consideration the coordination of information collected from State prescription drug monitoring programs for the purpose of preventing the diversion of pain medication;

Pages H2242–43

Clark (MA) amendment (No. 10 printed in part A of H. Rept. 114–551) that directs the Task Force to consider work done and any public comments submitted regarding electronic prescribing of opioids and its potential benefits, in the course of developing best practices;

Page H2243

Rothfus amendment (No. 11 printed in part A of H. Rept. 114–551) that requires the inter-agency task force, as part of its review and update of best practices for pain management and prescribing pain medication, to also take into consideration the practice of co-prescribing the overdose reversal drug naloxone;

Page H2243

Clark (MA) amendment (No. 12 printed in part A of H. Rept. 114–551) that directs the Task Force to consider, in the course of developing best practices, Federal agency programs and research relative to substance use and substance use disorders among adolescents and young adults, as well as any gaps identified by Federal government programs or researchers in the prevention of, treatment for, and recovery from substance use by and substance use disorders among adolescents and young adults;

Pages H2244–45

Esty amendment (No. 13 printed in part A of H. Rept. 114–551) that requires the inter-agency task force to review, modify, and update best practices for pain management and prescribing pain medication, specifically as it pertains to physician education and consumer education;

Pages H2245–46

Welch amendment (No. 14 printed in part A of H. Rept. 114–551) that expands the task force report to include information and recommendations on developing new non-opioid forms of pain relief; and

Pages H2246–47

Sessions amendment (No. 15 printed in part A of H. Rept. 114–551) that ensures the task force takes into consideration existing private sector, State, and local government efforts related to pain management and prescribing pain medication.

Page H2247

H. Res. 720, the rule providing for consideration of the bills (H.R. 4641) and (H.R. 5046) was agreed to by a recorded vote of 255 ayes to 163 noes, Roll No. 183, after the previous question was ordered by a yea-and-nay vote of 215 yeas to 173 nays, Roll No. 182.

Pages H2227–34

Women Airforce Service Pilot Arlington Internment Restoration Act: The House agreed to take from the Speaker’s table and concur in the Senate amendments to H.R. 4336, to amend title 38, United States Code, to provide for the burial of the cremated remains of persons who served as Women’s Air Forces Service Pilots in Arlington National Cemetery.

Page H2254

Agreed to amend the title so as to read: “To amend title 38, United States Code, to provide for

the internment in Arlington National Cemetery of the cremated remains of certain persons whose service has been determined to be active service.”

Page H2254

Suspensions: The House agreed to suspend the rules and pass the following measures:

Improving Safe Care for the Prevention of Infant Abuse and Neglect Act: H.R. 4843, amended, to amend the Child Abuse Prevention and Treatment Act to require certain monitoring and oversight, by a $\frac{2}{3}$ yeas-and-nays vote of 421 yeas with none voting “nay”, Roll No. 185;

Pages H2248–53, H2253–54

Opioid Review Modernization Act of 2016: H.R. 4976, to require the Commissioner of Food and Drugs to seek recommendations from an advisory committee of the Food and Drug Administration before approval of certain new drugs that are opioids without abuse-deterrent properties;

Pages H2254–56

Co-Prescribing To Reduce Overdoses Act: H.R. 3680, amended, to provide for the Secretary of Health and Human Services to carry out a grant program for co-prescribing opioid overdose reversal drugs;

Pages H2256–59

Nurturing and Supporting Healthy Babies Act: H.R. 4978, amended, to require the Government Accountability Office to submit to Congress a report on neonatal abstinence syndrome (NAS) in the United States and its treatment under Medicaid;

Pages H2259–63

Agreed to amend the title so as to read: “To require the Government Accountability Office to submit to Congress a report on neonatal abstinence syndrome (NAS) in the United States and its treatment under Medicaid, and for other purposes.”

Page H2263

Improving Treatment for Pregnant and Postpartum Women Act: H.R. 3691, amended, to amend the Public Health Service Act to reauthorize the residential treatment programs for pregnant and postpartum women and to establish a pilot program to provide grants to State substance abuse agencies to promote innovative service delivery models for such women;

Pages H2263–66

John Thomas Decker Act of 2016: H.R. 4969, amended, to amend the Public Health Service Act to direct the Centers for Disease Control and Prevention to provide for informational materials to educate and prevent addiction in teenagers and adolescents who are injured playing youth sports and subsequently prescribed an opioid;

Pages H2268–70

Reducing Unused Medications Act of 2016: H.R. 4599, amended, to amend the Controlled Substances Act to permit certain partial fillings of prescriptions;

Pages H2273–75

Examining Opioid Treatment Infrastructure Act of 2016: H.R. 4982, amended, to direct the Comptroller General of the United States to evaluate and report on the in-patient and outpatient treatment capacity, availability, and needs of the United States; and

Pages H2275–76

Opioid Use Disorder Treatment Expansion and Modernization Act: H.R. 4981, amended, to amend the Controlled Substances Act to improve access to opioid use disorder treatment.

Pages H2276–80

Suspensions—Proceedings Postponed: The House debated the following measures under suspension of the rules. Further proceedings were postponed.

Veteran Emergency Medical Technician Support Act: H.R. 1818, amended, to amend the Public Health Service Act to provide grants to States to streamline State requirements and procedures for veterans with military emergency medical training to become civilian emergency medical technicians; and

Pages H2266–68

Lali’s Law: H.R. 4586, amended, to amend the Public Health Service Act to authorize grants to States for developing standing orders and educating health care professionals regarding the dispensing of opioid overdose reversal medication without person-specific prescriptions.

Pages H2270–73

Senate Message: Message received from the Senate by the Clerk and subsequently presented to the House today appears on page H2227.

Senate Referral: S. 1352 was referred to the Committee on Education and the Workforce, the Committee on the Budget, and the Committee on the Judiciary. S. 1252 was referred to the Committee on Foreign Affairs.

Page H2280

Quorum Calls—Votes: Three yeas-and-nays votes and one recorded vote developed during the proceedings of today and appear on pages H2233, H2233–34, H2253, and H2253–54. There were no quorum calls.

Adjournment: The House met at 10 a.m. and adjourned at 6:52 p.m.

Committee Meetings

MISCELLANEOUS MEASURE

Committee on Appropriations: Subcommittee on Defense held a markup on the Defense Appropriations Bill,

FY 2017. This markup was closed. The Defense Appropriations Bill, FY 2017, was forwarded to the full committee, without amendment.

U.S. INDUSTRY PERSPECTIVES ON THE DEPARTMENT OF DEFENSE'S POLICIES, ROLES AND RESPONSIBILITIES FOR FOREIGN MILITARY SALES

Committee on Armed Services: Subcommittee on Oversight and Investigations held a hearing entitled "U.S. Industry Perspectives on the Department of Defense's Policies, Roles and Responsibilities for Foreign Military Sales". Testimony was heard from public witnesses.

HEALTH CARE SOLUTIONS: INCREASING PATIENT CHOICE AND PLAN INNOVATION

Committee on Energy and Commerce: Subcommittee on Health held a hearing entitled "Health Care Solutions: Increasing Patient Choice and Plan Innovation". Testimony was heard from public witnesses.

DAILY FANTASY SPORTS: ISSUES AND PERSPECTIVES

Committee on Energy and Commerce: Subcommittee on Commerce, Manufacturing, and Trade held a hearing entitled "Daily Fantasy Sports: Issues and Perspectives". Testimony was heard from public witnesses.

MISCELLANEOUS MEASURES

Committee on Energy and Commerce: Subcommittee on Energy and Power began a markup on H.R. 4775, the "Ozone Standards Implementation Act of 2016"; and H.R. 4979, the "Advanced Nuclear Technology Development Act of 2016".

FY 2017 BUDGET PRIORITIES FOR SOUTH ASIA: RECOVERY, DEVELOPMENT, AND ENGAGEMENT

Committee on Foreign Affairs: Subcommittee on Asia and the Pacific held a hearing entitled "FY 2017 Budget Priorities for South Asia: Recovery, Development, and Engagement". Testimony was heard from Nisha Desai Biswal, Assistant Secretary, Bureau of South and Central Asian Affairs, Department of State; and Jonathan Stivers, Assistant Administrator, Bureau for Asia, U.S. Agency for International Development.

THE U.S. ROLE IN HELPING NIGERIA CONFRONT BOKO HARAM AND OTHER THREATS IN NORTHERN NIGERIA

Committee on Foreign Affairs: Subcommittee on Africa, Global Health, Global Human Rights, and International Organizations held a hearing entitled "The U.S. Role in Helping Nigeria Confront Boko Haram and Other Threats in Northern Nigeria". Testimony was heard from public witnesses.

MISCELLANEOUS MEASURE

Committee on the Judiciary: Full Committee held a markup on H.R. 5063, the "Stop Settlement Slush Funds Act of 2016". H.R. 5063 was ordered reported, as amended.

REFORMING THE POSTAL SERVICE: FINDING A VIABLE SOLUTION

Committee on Oversight and Government Reform: Full Committee held a hearing entitled "Reforming the Postal Service: Finding a Viable Solution". Testimony was heard from Megan Brennan, Postmaster General, U.S. Postal Service; Robert G. Taub, Acting Chairman, U.S. Postal Regulatory Commission; Lori Rectanus, Director, Physical Infrastructure Issues, Government Accountability Office; and public witnesses.

DEPARTMENT OF ENERGY OVERSIGHT: OFFICE OF FOSSIL ENERGY

Committee on Science, Space, and Technology: Subcommittee on Energy held a hearing entitled "Department of Energy Oversight: Office of Fossil Energy". Testimony was heard from Chris Smith, Assistant Secretary for Fossil Energy, Department of Energy.

INSPIRING ENTREPRENEURS: LEARNING FROM THE EXPERTS

Committee on Small Business: Full Committee held a hearing entitled "Inspiring Entrepreneurs: Learning from the Experts". Testimony was heard from public witnesses.

MISCELLANEOUS MEASURES

Committee on Veterans' Affairs: Subcommittee on Economic Opportunity held a markup on H.R. 3286, the "HIRE Vets Act"; H.R. 4138, to authorize the Secretary of Veterans Affairs to recoup relocation expenses paid to or on behalf of employees of the Department of Veterans Affairs; H.R. 5174, the "Veterans Education Enhancement Act of 2016"; H.R. 5178, the "Veterans Success on Campus Act of 2016"; and H.R. 5175, the "GI Bill Oversight Act of 2016". The following bills were forwarded to the full committee, as amended: H.R. 3286 and H.R. 5174. The following bills were forwarded to the full committee, without amendment: H.R. 4138, H.R. 5175, and H.R. 5178.

MISCELLANEOUS MEASURES

Committee on Veterans' Affairs: Subcommittee on Disability Assistance and Memorial Affairs held a markup on H.R. 4892, to amend title 38, United States Code, to pay special compensation to certain veterans with the loss or loss of use of creative organs; H.R. 3715, the "Final Farewell Act of 2015"; H.R. 4758,

to amend title 38, United States Code, to authorize the award of the Presidential Memorial Certificate to certain deceased members of the reserve components of the Armed Forces and certain deceased members of the Reserve Officers' Training Corps; H.R. 4087, the "Fair Treatment for Families of Veterans Act"; H.R. 4759, to amend title 38, United States Code, to authorize the Secretary of Veterans Affairs to pay costs relating to the transportation of certain deceased veterans to veterans' cemeteries owned by a State or tribal organization; H.R. 4782, the "Veterans' Compensation Cost-of-Living Adjustment Act of 2016"; H.R. 4757, to amend title 38, United States Code, to expand the eligibility for headstones, markers, and medallions furnished by the Secretary of Veterans Affairs for deceased individuals who were awarded the Medal of Honor and are buried in private cemeteries; and H.R. 3936, the "VET Act". The following bills were forwarded to the full committee, as amended: H.R. 4757, H.R. 4758, H.R. 4759, H.R. 4892, H.R. 4087, and H.R. 3715. The following bills were forwarded to the full committee, without amendment: H.R. 3936 and H.R. 4782.

MISCELLANEOUS MEASURES

Committee on Ways and Means: Full Committee held a markup on H.R. 5170, the "Social Impact Partnerships to Pay for Results Act"; H.R. 2990, the "Accelerating Individuals into the Workforce Act"; H.R. 2959, the "TANF Accountability and Integrity Improvement Act"; and H.R. 2966, the "Reducing Poverty through Employment Act". The following bills were ordered reported, as amended: H.R. 5170, H.R. 2990, H.R. 2959, and H.R. 2966.

IMPLEMENTATION OF THE MEDICARE ACCESS AND CHIP REAUTHORIZATION ACT OF 2015

Committee on Ways and Means: Subcommittee on Health held a hearing entitled "Implementation of the Medicare Access and CHIP Reauthorization Act of 2015 (MACRA)". Testimony was heard from Andrew Slavitt, Acting Administrator, Centers for Medicare and Medicaid Services.

Joint Meetings

No joint committee meetings were held.

COMMITTEE MEETINGS FOR THURSDAY, MAY 12, 2016

(Committee meetings are open unless otherwise indicated)

Senate

Committee on Armed Services: closed business meeting to continue to markup the proposed National Defense Authorization Act for fiscal year 2017, 9:30 a.m., SR-222.

Committee on Energy and Natural Resources: to hold hearings to examine the nomination of Susan Faye Beard, of Maryland, to be Inspector General of the Department of Energy, 10 a.m., SD-366.

Committee on Foreign Relations: to hold hearings to examine America's role in the world, 10 a.m., SD-419.

Committee on Homeland Security and Governmental Affairs: Subcommittee on Regulatory Affairs and Federal Management, to hold hearings to examine due process in administrative hearings, 9 a.m., SD-342.

Committee on the Judiciary: business meeting to consider S. 247, to amend section 349 of the Immigration and Nationality Act to deem specified activities in support of terrorism as renunciation of United States nationality, S. 2348, to implement the use of Rapid DNA instruments to inform decisions about pretrial release or detention and their conditions, to solve and prevent violent crimes and other crimes, to exonerate the innocent, to prevent DNA analysis backlogs, S. 2577, to protect crime victims' rights, to eliminate the substantial backlog of DNA and other forensic evidence samples to improve and expand the forensic science testing capacity of Federal, State, and local crime laboratories, to increase research and development of new testing technologies, to develop new training programs regarding the collection and use of forensic evidence, to provide post-conviction testing of DNA evidence to exonerate the innocent, to support accreditation efforts of forensic science laboratories and medical examiner offices, to address training and equipment needs, to improve the performance of counsel in State capital cases, S. 2840, to amend the Omnibus Crime Control and Safe Streets Act of 1968 to authorize COPS grantees to use grant funds for active shooter training, and the nominations of Ronald G. Russell, to be United States District Judge for the District of Utah, Inga S. Bernstein, to be United States District Judge for the District of Massachusetts, Stephanie A. Gallagher, to be United States District Judge for the District of Maryland, and Suzanne Mitchell, and Scott L. Palk, both to be a United States District Judge for the Western District of Oklahoma, 10 a.m., SD-226.

Select Committee on Intelligence: to hold closed hearings to examine certain intelligence matters, 2 p.m., SH-219.

House

Committee on Agriculture, Full Committee, hearing entitled "The Past, Present, and Future of SNAP: The Retailer Perspective", 10 a.m., 1300 Longworth.

Committee on Energy and Commerce, Subcommittee on Energy and Power, markup on H.R. 4775, the "Ozone Standards Implementation Act of 2016"; and H.R. 4979,

the “Advanced Nuclear Technology Development Act of 2016” (continued), 10 a.m., 2123 Rayburn.

Committee on Financial Services, Subcommittee on Housing and Insurance, hearing entitled “The Future of Housing in America: A Comparison of the United Kingdom and United States Models for Affordable Housing”, 10 a.m., 2128 Rayburn.

Committee on Foreign Affairs, Full Committee, hearing entitled “Terrorism, Missiles and Corruption: The Risks of Economic Engagement with Iran”, 10 a.m., 2172 Rayburn.

Committee on Homeland Security, Subcommittee on Counterterrorism and Intelligence, hearing entitled “Following the Money: Examining Current Terrorist Financing Trends and the Threat to the Homeland”, 10 a.m., 311 Cannon.

Committee on the Judiciary, Task Force on Executive Overreach, hearing entitled “Executive Overreach in Foreign Affairs”, 10 a.m., 2141 Rayburn.

Committee on Natural Resources, Subcommittee on Federal Lands, hearing on H.R. 3565, the “California Coastal National Monument Expansion Act”; H.R. 3839, the “Black Hills National Cemetery Boundary Expansion Act”; H.R. 4233, to eliminate an unused lighthouse reservation, provide management consistency by incorporating the rocks and small islands along the coast of Orange County, California, into the California Coastal National Monument managed by the Bureau of Land Management, and meet the original Congressional intent of preserving Orange County’s rocks and small islands, and for other purposes; and H.R. 5132, to adjust the eastern boundary of the Whychus-Deschutes Wilderness Study Area in the State of Oregon to facilitate fire prevention and response activities to protect adjacent private property, and for other purposes, 10 a.m., 1324 Longworth.

Subcommittee on Oversight and Investigations, hearing entitled “Local and State Perspectives on BLM’s Draft Planning 2.0 Rule”, 2 p.m., 1324 Longworth.

Committee on Oversight and Government Reform, Full Committee, hearing entitled “Examining Management Practices and Misconduct at TSA: Part II”, 9 a.m., 2154 Rayburn.

Subcommittee on Government Operations, hearing entitled “D.C. Home Rule: Examining the Intent of Congress in the District of Columbia Home Rule Act of 1973”, 2 p.m., 2154 Rayburn.

Committee on Rules, Full Committee, hearing on S. 524, the “Comprehensive Addiction and Recovery Act of 2016”, 3 p.m., H-313 Capitol.

Committee on Science, Space, and Technology, Subcommittee on Oversight, hearing entitled “FDIC Data Breaches: Can Americans Trust that Their Private Banking Information Is Secure?”, 10 a.m., 2318 Rayburn.

Committee on Small Business, Full Committee, hearing entitled “The New Faces of American Manufacturing”, 11 a.m., 2360 Rayburn.

Committee on Transportation and Infrastructure, Subcommittee on Economic Development, Public Buildings, and Emergency Management, hearing entitled “Controlling the Rising Cost of Federal Responses to Disaster”, 10 a.m., 2167 Rayburn.

Committee On Veterans’ Affairs, Full Committee, hearing entitled “Combating the Crisis: Evaluating Efforts to Prevent Veteran Suicide”, 10 a.m., 334 Cannon.

Committee on Ways and Means, Subcommittee on Tax Policy, hearing on Member proposals for improvements to the U.S. tax system, 10 a.m., 1100 Longworth.

Permanent Select Committee on Intelligence, Full Committee, business meeting to consider an access request, 9 a.m., HVC-304. This meeting will be closed.

Next Meeting of the SENATE

9:30 a.m., Thursday, May 12

Next Meeting of the HOUSE OF REPRESENTATIVES

10 a.m., Thursday, May 12

Senate Chamber

Program for Thursday: After the transaction of any morning business (not to extend beyond one hour), Senate will continue consideration of H.R. 2028, Energy and Water Development and Related Agencies Appropriations Act, with all time during the adjournment and morning business counting post-cloture on Alexander/Feinstein Amendment No. 3801.

House Chamber

Program for Thursday: Consideration of H.R. 5046—Comprehensive Opioid Abuse Reduction Act of 2016.

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