

and didn't want to do it in the house. So she got in the pickup truck with her laptop, and it worked great. It worked great. We were able to ask questions and get answers. It worked just like a regular hearing. I was appreciative that the Rules Committee allowed us to do that.

By the way, the technology is, in a sense, off-the-shelf technology because it is their technology. They have it. We didn't have to recreate the wheel. It worked last week. We used it. I think it can be a template for other hearings.

By the way, I am pleased to say that today, I participated in two more remote hearings. Even though we are here in session, we are having remote hearings because it is not wise for us to all gather together with the staff and with the Capitol Police and others. It is safer for us to do this remotely. By the way, both of these hearings went well. One was in the Finance Committee, and the other was in the Homeland Security and Government Affairs Committee.

By the way, our hearing last week was online. You can check it out at psi.gov. The two hearings today were both online, live-streamed today. This does not mean that you cut out the public. In fact, I would say it is just the opposite.

During these last 6 weeks, we could have had hearings every week and kept the public informed as to what we were thinking and gotten more input from the public in an official way and in a way that was so transparent that everybody could have been engaged in it, if they wanted to, just like C-SPAN, except it is online. This is something we can now do, and I hope we will continue to do it.

I hope we will be sure that, as we do this, we also take serious this idea of not just having hearings and not just having the ability to interact as Republicans and Democrats but actually have the ability to vote remotely when we shouldn't be here. Again, it needs to be safe, and I think we can do that.

I am convinced that if we put our minds to it, the technology is not the problem; the problem is tradition. I am not against tradition. A lot of them make sense. But do you know what? Tradition around here has changed a lot over the years. There didn't used to be a filibuster, as an example, which is how we live right now, to get 60 votes for everything. That is OK. I am not saying it is a bad tradition to have changed, but the point is that we change tradition here a lot, and it is time for us to look at this.

It is time for us essentially to catch up. Most of the people I represent are doing this. To one extent or another, they are teleworking. Most people in America today are realizing that you can actually get a lot done online, remotely.

Today, I talked to some healthcare professionals who were telling me about one of the rare silver linings in this dark cloud that has descended

upon our country. It is the fact that telemedicine has been proved over the past couple of months to be pretty darn effective. In many cases, it has been used because people are concerned or afraid about coming to a hospital or going to their doctor, but they can get the advice through telemedicine.

I talked to some educators today. In fact, I also talked to the Ohio Farm Bureau today. I talked to a mom who is at home with her kids during the day now because her kids are home from school because schools have been closed. We talked about how much she has been able to learn about telelearning and how there is an opportunity here to do more outside of the classroom. It is not that we shouldn't get back to classrooms—I think we should. I think that is an opportunity for kids to interact, which is important. But we are beginning to acknowledge that we can also do more after school in terms of telelearning. So this is just another example of it.

This is a change that I think must be made to prepare us for the realities of this 21st century, where these contingencies come up. It is a pandemic today. It may be something else tomorrow.

By the way, the way our legislation works for voting is that it is temporary. So I don't think this should be the norm. I think it should be only in emergencies and only when the majority leader and the Democratic leader—so in a bipartisan way—decide it is the appropriate thing to do, and then, under our legislation, every 30 days, Congress would have to vote—presumably remotely—to reaffirm it. Otherwise, it ends.

So it would be temporary, it would be in emergencies only, and it would be up to Republicans and Democrats alike at the leadership level to decide it is time to try remote voting and to be sure that we, as the Members of the people's House across the way and the Members of the world's greatest deliberative body here in the Senate, as we are called, have the chance to represent the millions of people we are charged with representing by being their voice here on the Senate floor.

I hope we can, along with the times, change here and begin to be more effective in representing those constituents.

CORONAVIRUS

Mr. PORTMAN. Mr. President, I am also here to talk today about the work that is being done to help my home State of Ohio to get through this coronavirus. It is a crisis in so many ways. It is a healthcare crisis, but it has also become an economic crisis and a family crisis. It is affecting everybody in ways that are truly heart-breaking for me to see in so many instances.

I have talked to people who have been unemployed for the first time in their lives and have never had access to the unemployment insurance office.

They have been fortunate. And now they have to.

I have talked to people who started a small business and took a big risk to do that. They have five or six employees—it is a family-owned business—and they have been through the thick and thin over the years, but this one has really knocked them out. They have no income coming because they are in one of these businesses that by government order were shut down and cannot continue to serve the customers.

I have talked to hospitals in a rural area of our State that cannot continue to operate. They have about a week left of cash reserves. Luckily, they are going to get some of this funding that Congress just provided with regard to the phase 3.5, as we are calling it, legislation of the CARES Act. But they are really hurting. They have had to lay off more than half of their hospital staff. They can't do elective surgery. They can't have the normal work they are used to because people aren't coming in to see the doctor. They aren't coming into the emergency room.

The good news is, in Ohio and other States around the country, we are starting to open up and doing so safely. We are doing more testing and that is all good. It has been a tough time.

Like so many Americans, I have been on the phone a lot. I have been on the phone pretty much all day, every day, into the night. A lot of what I have been doing is talking to constituents and talking to stakeholders across the State and hearing their concerns and trying to explain what we are doing here in Washington, how it would affect them and their families, and getting their input as to what we should do, but also I have been working with the White House, and HHS, FEMA, the FDA, Treasury, SBA, the Bureau of Prisons, the U.S. Trade Representative, State of Ohio, and others on corona-related matters to be able to help Ohio companies and help Ohio individuals. We have had some success in that. I am proud of that. In terms of constituents, we held seven tele-townhall meetings in the last 6 weeks where we hear directly from people, thousands of Ohioans. Again, there are a lot of heart-breaking stories and also a lot of really inspiring stories about people who stepped up and helped.

One guy lost his job and decided to go volunteer at a food pantry. He wears the PPE, the mask and the gloves, and he delivers food to people who have never had to worry about food security before because they always had a job. Now, they don't have a job and are waiting to get their unemployment insurance, and they can't put food on the table. Some of them feel funny about going to a food pantry because they have never done that before. He makes them feel more at home, he said, and understanding and more welcomed.

I talked to people who are delivering groceries to their neighbors who are seniors and who are more vulnerable. God bless them. I talked to people who

are making homemade masks at home. I brought some with me on my trip to Washington. They are doing it as volunteers, not asking for anything other than, if you take this mask, you have to agree you are also going to be helping your neighbor.

The frontline workers, the hospital workers, are putting their healthcare on the line for us. They are risking their own healthcare and the possibility of getting this virus to help all of us and to help our grandparents and our parents. God bless them.

I love when the healthcare workers are being held up by everybody. I think today is official Nurses Day. We should all be thanking our healthcare professionals and, specifically today, our nurses for what they do every day in every time period, but particularly during this crisis, where they have been working really long hours and doing everything they can to try to protect us. I appreciate the people who are doing everything else on the frontlines right now, whether working in a grocery store stacking shelves or whether you are driving a truck. I drove my pickup truck from Ohio to Washington on Sunday to be here for this week, and every time I went by a truck, I said thank you just for being out there and delivering the food and delivering the products. We thank those folks for what they are doing, all of them.

One thing I tried to do is to help in terms of explaining what is going on in getting input. We talked to more than a dozen groups out there. I talked to the Farm Bureau today in Ohio, but I also talked to the hospitals, small business owners, food banks, the non-profits, and many others to hear how we can support them during this tough time.

This afternoon, we had a telephone call with some of the largest businesses in Ohio, a group called the Ohio Business Roundtable. They talked about some of the things they are doing to keep their employees safe because some of them are essential businesses. I encouraged them, as I always do, to get your best practices out to all your others business associates. Let them know how we can reopen safely. We are starting to open in Ohio. We want to know it is safe. The best advice will not be from a piece of paper—as important as that guidance is from the White House or the State of Ohio—it is going to be from other businesses who found out things you can do, like stagger the lunch break. That helps to spread people out.

These things might not be obvious, such as do the temperature testing as people come in. Be sure that you are doing everything you can do to explain to people what they can do if they feel like they are getting sick, who they can go to and how they can be sure that they are not infecting others. I think there is an opportunity here to reopen and do it safely.

One reason we are able to reopen in Ohio safely is we have a lot more test-

ing now. Like many States, we didn't have enough testing until recently. Now, we are getting it. We had 3,700 tests per day, 2 weeks ago. Within 2 or 3 weeks from today, we will have 20,000 tests per day, a 600 percent increase. We had to work at it because we were having trouble getting some of the components for testing, particularly the reagent. The State of Ohio, to its credit, with Governor DeWine, reached an agreement with Thermo Fisher, a private sector company taking the lead in providing us a guaranteed supply chain of this reagent under their tests, which enables us to dramatically respond to increasing our testing.

We are getting to a point where you can have a lot more drive-through testing at Kroger and Walmart and some of our drug stores. We are starting to get the testing much easier for people because you can drive through. You don't have to get out of your car, and you feel safer.

The saliva test, as opposed to a test where they take a swab deep into your nasal cavities, is a lot less intrusive, and that is starting to be used more. We are beginning to have enough testing where we can more safely say: Look, we are going to reopen, but we are going to test people a lot. If we find a problem, we are going to do the contact tracing to figure out who that person has been with and quarantine those people. That is less hard than quarantining everybody else.

For all of us, really, testing is where there is a problem. We will get to a point where we can test people who are asymptomatic. Even if you don't have symptoms, you could be a carrier. I think dramatically increasing the testing is the key thing. This is a diagnostic test. There are also the immunity tests coming up, which is also helpful, but nothing replaces the diagnostic test which says whether you have it or don't.

We also have seen good news in Ohio and around the country on these antiviral medications. That is the reason we can reopen safely, too. If someone does get coronavirus, they have a chance to take something like Tamiflu, which you take for the common flu. Remdesivir is the most recent one the FDA has approved, which has a record of being very helpful. People want to know, if they get the virus, that they can take something for it. That is helpful.

Finally, we are getting our hands around the PPE issue, the personal protective equipment, the masks and gloves and the gowns. This evening, after this talk, I am going to be working with an Ohio company that is interested in dramatically expanding the gown production. That would be great. We are working with the White House and others to try to ensure that can happen.

We have a lot of great world-class businesses in Ohio. What I am talking about tonight is an example of that. There are others, too, in healthcare

systems that have contributed to this coronavirus crisis all over the country. I have been working the last 6 weeks with them, making sure they have the opportunity to do that.

One of those key contributions from Ohio has been from a company called Battelle. Battelle is a global research institution and happens to be headquartered in Columbus, OH. They do awesome work all over the world. They run some of our national labs for the Energy Department. We worked with the Trump administration and with Ohio Governor Mike DeWine to help them get approval for a really innovative technology where they can take an N95 mask—one like this, except even better because it is N95—and they can recycle that mask. They decontaminate it.

These masks can be recycled up to 20 times. Think about that, 20 times. It is groundbreaking because they have enough machines to spread out around the country. They have 60 machines that they can recycle and decontaminate between 4 and 5 million masks a day. I worked with FEMA, HHS, and the White House to help Battelle secure a contract with the Federal Government to be able to take their technology and machines and spread them initially to hot spots around the country like New York, Boston, Chicago, Detroit, and now other places.

I would tell people who might be listening that, if you are connected with a healthcare entity, a hospital, a nursing home, EMS, if you are a firefighter and you use these N95 masks, don't throw them away. When you are done with them, put them aside in a separate bin for recycling and get them picked up. We worked on a contract with the Federal Government to help with the pick-up and delivery, which is also available now. You can get them picked up and take them to Battelle. Hopefully, they have a cleaning station near you, and for free, you get a recycled mask back. The process takes about 8 hours. If you are close to one, you can get it overnight.

We are not at full capacity on these machines. We should be. It is a great idea. Why spend the money to get some overpriced mask from China—because they are all overpriced now—when you can actually recycle what you have? It is a lot less medical waste, too. If you are interested in that, go to Battelle.org and learn more about it, or go to our website Portman.senate.gov, to find out more about it. Find out if there is a machine near you. Even if there is not, we can send them, and we can help you connect with companies, including Cardinal Health in Ohio, providing some of the logistics to get the masks back and forth.

That is an example of some of the things we have been working on the past 6 weeks to help with this effort. I want to, again, as I have done before, commend the folks at Battelle for devoting their time and energy to this

project. As soon as this coronavirus came up, they said to the engineers: Forget what you are doing, go work on this. They have also done a lot of testing with Ohio State, putting their folks against that, and now, they are working on other interesting technology that could be very helpful in detecting coronavirus. It is an example.

We had another company, Cardinal Health, that I mentioned, that are helping in terms of the logistics. They did something else early on. They came to me and said: We have 2.3 million protective gowns in storage. We are not using them. They are the kind of gowns that can be used as isolation gowns. They are very effective. They are not qualified as surgical gowns, but they can be used as isolation gowns. They were willing to donate them to the National Stockpile. We worked with, again, FDA, HHS, and the White House to get through some of the red tape because it is tough to get things approved at times with the Federal Government. There are reasons for that. We want to be safe. We got approval for those gowns, and bingo, like that, they started to go out. They went to New York, they went to Detroit, they went to places where there are hot spots. They are in the National Stockpile. They donated 2.3 million gowns.

One company that has been very helpful to so many Americans is GoJo. It is a company that makes Purell. I see some up here on the desk. Purell is made in Ohio, outside of Akron. We are very proud of Purell. They have been going 24/7, producing all they can. It is tough to find it in the grocery store because, as soon as the shipment comes in, they take it and use it. It is particularly helpful now that they have Purell beginning to reopen.

Reopening means doing things differently. It means wearing a mask when you are in proximity with somebody else. It means using Purell and washing your hands more often. It means being sure you are following the rules to be able to stay safe. Purell will continue to be needed.

They had a problem because the Federal Government was assessing a 25-percent tariff on two critical items they had to have for the dispensers. At least one item had a patent in China. China had the patent on it. Things were coming in from China with a 25-percent tariff. We were able to go to a U.S. Trade Representative. I commend Bob Lighthizer, who is the Trade Rep, for working with us on this.

For this period of time, they took that 25 percent off. They were having a tough time getting the supply and because it was increasing the costs by 25 percent. We were able to do that. Now. They are able to produce more of this Purell and more dispensers and do it less expensively.

By the way, this leads me to a comment on China. We need to pull back some of what we make in China and make it here. It is a pretty simple concept. It is harder to implement because

our supply chains are global and they are complex. Who would have thought that, on a GoJo dispenser for Purell, there would be a Chinese patented product, but there is. Whether it is gowns,—most of which are made in China—or masks or other products like something essential that is in a hand sanitizer dispenser, we have to pull those products back.

I think the way to do it isn't to beat up on China, but rather to provide the incentive—the carrot—to American companies and other companies and say, Make it here, make it in America. I think we can do that as a group, Republicans and Democrats alike.

I think there is consensus now that we should do more to reshore, and in some cases, shore for the first time, products that have been moved overseas and particularly to China. We wouldn't have had to get that special permission on the 25-percent tariff if it was made here.

We also worked with the FDA to get approval for a company called Second Breath in Cleveland, OH. It is another great example. There are so many in Ohio, but this is a company that didn't make ventilators at all. It is a consortium of several manufacturing companies that work together. But again, early on in this crisis, they said: We need ventilators. We can do that. We are manufacturers. We are Ohioans. We are inventors.

They went out and made these ventilators on their own that were then tested at three different Ohio hospitals. The medical community loved them. They are relatively inexpensive, relatively simple, and very effective.

Again, the FDA had to go through its process. My job is not to say to the FDA, You need to approve this. My job was to ask them to please expedite this process so, if it can be approved, we can get this out to people who are literally dying and need the ventilators. To the FDA's credit, Dr. Jeffrey Shuren, in particular, worked with us and got that product approved.

They already made a bunch of them. They weren't going to send them out if they didn't get approval. They didn't care because they were willing to take a loss, with the opportunity to save people. Now, those ventilators have gone out to stockpiles and hospitals, including New York, when they needed them all over the country.

It is an example of the kinds of things over the last 6 weeks we have been able to do in Ohio. The result is companies in Ohio are now making swabs, making masks, making face shields, making hand sanitizer.

Proctor and Gamble converted some of their perfume-making factory to making hand sanitizer. It probably smells pretty good. I don't know if it actually has a particular odor to it. If it comes from a perfume factory, it might not just be effective, but smell pretty good, too. Thanks to Proctor and Gamble and all these companies that are willing to step up and do these

things they have never done before and respond to these crisis—that is what Americans do. We get knocked down; we figure it out. We get back on our feet.

Ultimately, I am optimistic. Think about what has happened in the last couple of weeks. There is substantially new testing. In my own State of Ohio, again, a 600-percent increase of tests from 2 weeks to 3 weeks from now. Increasingly, new antiviral medication has been approved. It is something people can rely on—more testing and antiviral medication is critical. There are more PPEs. Finally, we are figuring it out, like the recycling which we can do right here in America. We can recycle our own masks. There are the gowns we are trying to get produced more here in America right now. We are starting to catch up on things that, frankly, we were pretty far behind in.

On the testing, I will tell you that, for the first few weeks of this crisis, you couldn't get a test in most parts of Ohio unless you were so severely ill that you had to be hospitalized. That was wrong. We just weren't prepared as a country.

By the way, the last administration wouldn't have been any more prepared, nor would the previous administration, which I served, have been any more prepared. We were not expecting a pandemic like this. We should have been, of course. There were some warnings. The country now will be prepared.

One thing we are doing is we are adding to that stockpile with the PPE, with the ventilators, and obviously with the antiviral medications for this virus and the vaccine for this virus. My hope is that vaccine, which the administration calls their process warp speed—and I appreciate that they are working around the clock. There are some scientists who have devoted their lives to this now. That is all they are doing.

And God bless them, and there are a bunch of them. And, by the way, some of these vaccines will not work. People will have spent hundreds of millions of dollars—even billions of dollars—on stuff that is not going to work. But kind of like those ventilators were made even though they didn't know if they were going to get approval or not, we want to have that virus vaccine ready.

If it does work and it gets approval, we want to have lots of doses of it already made. So there is going to be some money spent, including by the Federal taxpayer, but that is OK to ensure that we end up with something that really can be effective.

On the testing, I will tell you that in my own hometown of Cincinnati, OH, those first few weeks we really couldn't get tested unless you were to be hospitalized. And we had an interesting issue there, again, showing how Washington sometimes can make things a little slower. The University of Cincinnati, which is our primary academic

medical center in southern Ohio, had ordered a testing machine back in February. They ordered it because they knew this was coming, and they wanted to get the best of the best. So it was a high-quality machine, with high accuracy, and it could do 1,000 tests a day. By the way, at the time, they were doing about 80 to 100 tests a day in their own little lab, but they needed this equipment, and they had a contract for it back in February.

Well, come March they kept hearing next week, next week, next week, and they called me and I got involved. I got to the company and got to the University of Cincinnati and said: What is the real problem here? And they said: Well, we are being told by the Federal Government that we can't deliver it to Cincinnati. It needs to go somewhere else. I said: Well, they contracted for this back in February, and we are desperate for testing. We may not be a hotspot right now, but we are going to be unless we get some testing.

So, again, we broke through the red-tape and broke through what was some miscommunication. It turned out, with the help of the White House, that we got the approval to get the diagnostic tests there that had already been contracted for. It is called a cobas 6800 machine. It can process more than 1,000 diagnostic tests per day, and it is working. It is every day giving more people the sense of security that they know whether they have this or not, and they know whether the person that works in the store has it or not, and they know that we have more access to testing.

Now, I am not saying we are getting there, but that would be key to getting us back to business but also reopening in a way that we don't have to stop if there is an outbreak because we will have the testing to be able to really throw at it and then the contact tracing and be able to ensure that we can stop the spread of the virus.

So those are some of the things that we have worked on. We have worked with FEMA to unlock additional resources for Ohio, and that has happened around the country.

USDA has now allowed the Ohio Department of Job and Family Services to operate the Disaster Household Distribution Program. We appreciate them. We worked with them on that so that we can officially get meals to food banks and families in Ohio.

We worked with the Department of Veterans Affairs to ensure that veterans could get an extension on their filing of claims and appeals during this time period for veterans' compensation benefits and other benefits during a time when the VA offices have been closed.

We helped stop the Federal Bureau of Prisons from sending more prisoners to one of our hotspots. It is a really sad case, the Eltkon Federal prison in Ohio. We also helped them bring more healthcare to the Eltkon prison. Frankly, I am discouraged that they

aren't doing more testing there. I talk to them constantly, and they are providing more testing, but not enough—not enough. I think it is inexcusable.

I think, in a situation like a nursing home or a prison, we should be focused on getting the testing in there. These are what they call congregant living situations. In this case it is a low-security prison. So it is more like dormitory-type style living, and, unfortunately, if they were to test as much as they should, I believe they would find out, as we found out in other State prisons in Ohio, that more than half the prisoners there are carrying the virus, and you have got to separate those people out from those who don't have it and do much more treating and tracing. But we have made progress there, and we will continue to.

The phase 3.5 rescue package we passed a few weeks ago does have funding for the PPP program, which is for small businesses, to be able to keep their employees and keep their doors open. It also has funding for healthcare. But the piece that hasn't gotten much attention and may be the most important aspect of the bill of all is \$25 billion in the bill for more testing.

Again, I am a broken record here on testing, but that money is so important, and we are using it in Ohio right now. About \$43 million has come to Ohio recently, I am told, and that funding will be helpful not just to ensure that we have testing, but do we have enough testing so that we will get a sense of what is going on in terms of the healthcare crisis, and then, when there is a hotspot, address it again immediately and be able to stop the spread of the virus? It is so important to us reopening and getting people back to work, back to their churches and other places of worship, and back to school.

We need to get back to a normal life, and we can, and we will. We will figure this out, but we do need the help of having the necessary testing capacity, diagnostic testing, and then it is also helpful to have the antibody test so you know whether you have developed an immunity or not. But those are both needed. You can't do it just with the antibody test. You have to also know through the diagnostic test whether someone has the disease or not to be able to pull that person out of a situation where he or she is with others and to find out whom they have been in touch with and do the contact tracing, and, again, quarantining those people, not quarantining everybody else. That is the effective way to do it.

Congress has now passed four of these legislative measures in an overwhelming, bipartisan fashion. It is a lot of money. About \$3 trillion have gone out the door from Federal taxpayers. I hope we can continue to be bipartisan. I hope we can work together to figure out how to move forward.

In my view, moving forward means looking at what we have done care-

fully. Let's not start to legislate again and spend more money until we know how what we have already sent works. The money is just being distributed now. In fact, most of our money in Ohio that goes to the State and local governments has not been distributed yet. Let's get that money out.

By the way, they need it. They need it badly. They need it to pay police and fire and EMS. Our cities in Ohio are really hurting because they depend so much on income taxes, on earnings taxes. Other cities in America don't because they can't, but about four of the top five cities in America that were most affected by the reduction in revenue from the coronavirus are in Ohio—Columbus, Cleveland, Cincinnati, and Toledo.

So they have a real problem on their hands. I strongly urge the Department of Treasury to loosen up their requirements to allow that State and local funding to be used more flexibly, specifically for payroll, for public safety.

Based on Monday's guidance that we just got a couple of days ago here, they can now do that. That is just guidance. It is not legislation. I would love in whatever we do going forward to get that in legislation, to say: Let's provide flexibility to the States but also to these municipalities.

I will tell you that in my home State of Ohio, again, at the municipal level, we are really hurting. Budgets are being slashed because the revenue is not coming in because it is based on the economy. Most cities rely heavily on property tax. We don't. Property tax has not been affected in the way that income tax has or sales tax.

So we do need to pay attention to this, and people say: Well, we shouldn't send in more money to municipalities. Let's start with flexibility. Let them use the money they have more effectively for what they actually need.

I don't want a situation where you have a 30-percent or 40-percent cut in police, which is what is happening in some of our municipalities, to affect the public safety of our communities at a time like this. Police officers need to be on the street doing their jobs. God bless them. They are out there. We need them.

As for EMS personnel, if your grandmother needs to be rushed to the hospital, you want the EMS to come. You don't want to have a 40-percent cut in their services. So we do have to deal with this issue and be sure to provide flexibility is the first step.

And let's codify that by statute and make sure it is clear, not just guidance that doesn't seem to be consistent with the underlying law, because the underlying law says it has to be directly related to the COVID-19, and some of this is not. You need police officers on the street whether you had COVID-19 or not. So let's be sure we codify that and then let's see what is needed.

But I also think that in this next legislation we also have to be sure that we are not just looking at what has already passed but looking ahead. And

looking ahead means the ability to reopen, and that means stimulating the economy and creating—whether it is tax relief or whether it is smart investment in infrastructure. Let's say the projects that are already on the books in my State and yours, projects that are already shovel-ready because they are ready to go, they have gone through the merit-based process in our States, but many of those projects will not be able to be funded this year by our States. Why? Because their revenues have collapsed, particularly their gas taxes have collapsed. So the State match, which is based on the amount of gas you buy, has gone down because people aren't driving nearly as much.

What if we picked up some of that at the Federal level? These are good projects because they aren't bridges to nowhere. They have been through the merit-based process, and they are ready to go. That is an idea. Why? It is good jobs, one, which are needed right now, and good benefits, but also it is economic benefit. Those dollars will come back in terms of improved roads and bridges and ports and airports.

Rural broadband would really help right now. As people are telelearning and teleworking more and more, they are finding out: Oh, my gosh, there are big parts of our country that don't have broadband access, can't get Wi-Fi, and if you can, it is way too slow.

Again, talking to the Farm Bureau today, you would think they would be talking about the price of corn and soybeans, and they were, and the huge issues we have right now in the beef industry and the pork industry and poultry, but they were also talking about: I got my kids at home and we can't do the homework because we can't get broadband in a lot of parts of Ohio—probably in about a third of our State. Ohio is not viewed as a State that has huge, sparsely populated rural areas, but we have enough, and we have a real lack of access to broadband to be able even to do schoolwork, much less to start a small business.

So this is another area where we can provide some help for that here, and it would come back in terms of increased dollars from having more economic development in some of these rural areas. So I think there are some things we need to do there as well.

There has been a lot of discussion about this issue of liability protection. Let me tell you my perspective on this. It is very simple. This should not be a partisan issue. I mean, we should not want these hospitals and these schools and these small businesses and anybody to be able to be sued for something that was totally out of their control. This is not something anybody should be blamed for, certainly in this country. We know where it started, in Hubei Province, in Wuhan, China. But as for the fact that this has come over here and people are affected by it, let's not have a trial lawyer bonanza here because that will result in people not getting back to work. It will result in more costs for our universities.

I understand some of them are being sued right now because they have students who are telelearning. Well, yes, it is not their fault. You can't bring students together right now in the dormitories. It is not safe.

I know there is, again, kind of a partisan nature to this. It shouldn't be partisan at all. We should all want people to go back to work, to be able to go back to school, to be able to access the healthcare system.

I also think that for my colleagues on my side of the aisle who might want to make this broader than the coronavirus, let's keep it to the coronavirus, and I think that is what people intend. Let's keep it to COVID-19, and let's provide the kind of protections—sensible protections—that are necessary to be able to allow people to get back to a normal life.

People say: Well, things are going to be so different now in America. They will be different. We will be more cautious. You know, we will probably, therefore, have a less drastic flu season too because we will be more careful.

With this pandemic, you know, we don't know if it is going to come back again like it did a couple of months ago. Will it come back again in the fall or the winter like that, but we have to be prepared for that. So life will not be exactly the same. There is no question about it. There will be some things that will be different, too. There will be more teleworking because it is has worked well. It is cost effective, and it is efficient. There will be more telemedicine because it has worked well.

I have talked to a number of doctors who were actually very pleased with some of the things they have been able to do remotely. I hope we will have a Congress that works more remotely so when we are on our recesses, as we do every August, and as we do periodically, that we could have remote hearings on a more regular basis because it is great information.

But, ultimately, I think our country will get back on track. Again, we, as Americans, when we get knocked down, we get back up on our feet, and that is what we will do. And we will have again not just the greatest economy on the face of the Earth, but we again will be that beacon of hope and opportunities for the rest of the world. People will again look at America and say: I want to be like that. And we will be able to show that and how we get back on our feet and how we get back to a more normal life, and, once again, the greatest country on the face of this Earth will be able to once again be able to show the world an ideal for everyone to aspire to.

ADDITIONAL STATEMENTS

50TH ANNIVERSARY OF FIRSTLINK

• Mr. CRAMER. Mr. President, I want to recognize the 50th anniversary this month of FirstLink, a vital North Da-

kota organization which provides free and confidential mental health, suicide prevention, and other services 24 hours a day, 7 days a week.

FirstLink offers listening and support, resource referrals and crisis intervention. Across the entire State of North Dakota and parts of Minnesota, FirstLink answers calls for 17 agencies, notably the 211 helpline and the National Suicide Prevention Lifeline. Those reaching out for help now have the ability to also communicate by text messaging at 898-211.

Last year, FirstLink answered 60,148 calls. Of those, 13,446 were related to suicide. Its Caring Contacts service receives referrals from hospitals and clinics across North Dakota in addition to the phone calls that come in. Caring Contacts offers informal resources and coping strategies, encourages mental health treatment, and provides nonjudgmental listening and support. These calls are offered around the schedules of the individuals in need. Additional training is also offered to staff and volunteers from other State organizations working with people of all ages.

FirstLink began as a grassroots volunteer organization in the Fargo area, first taking calls 6 hours a day. It has grown in hours and scope, thanks to private and public support, a staff of 20, a 12-member board, and many volunteers.

The profound impact of the work FirstLink has done over these past 50 years can never be adequately measured. On behalf of all North Dakotans, I congratulate and sincerely thank executive director Cindy Miller and all staff and volunteers for the difference their commitment has made to the quality of life in our State. May your next 50 years be just as meaningful.●

TRIBUTE TO THE SALEM HIGH SCHOOL CHEERLEADING TEAM

• Ms. HASSAN. Mr. President, I am proud to recognize Salem High School's cheerleading team as April's Granite Staters of the Month for coming together, even while social distancing, to help raise the spirits of residents at a local nursing home.

Due to the COVID-19 pandemic, Salem's cheerleading team was unable to compete at their New England conference meet, a moment that the athletes had worked hard for all season. In an effort to cheer up her teammates, as well as bring joy to residents at their local nursing home, Gabrielle Driggers, a sophomore on the team, suggested throwing a parade for the residents, which included Gabrielle's grandmother.

Gabrielle, who has led previous efforts to support her local community by organizing donation drives and fundraisers with the help of her teammates, texted the team's group chat to see if anyone would be willing to participate in a parade for residents at