into recovery. She gave me this bracelet. It talks about the Rally for Recovery in 2016. We had one in Ohio last weekend that I was able to attend.

At that rally, with the Ohio Citizen Advocates for Addiction Recovery, I got to meet so many people who are in recovery. They came forward to talk to me about their stories and to talk about what they are doing to help others. They talked to me about the need for us to have more treatments and recovery programs. I met someone who has not only beaten the addiction but is a counselor in Dayton, OH, named Gary. Gary Gonnella is helping others to get their lives back on track. He is incredibly persuasive because he has a story to tell.

Gary told me: Senator, there is hope. Don't give up.

He is telling me don't give up. I am telling my colleagues: People expect us not to give up. They are not giving up. This guy, Gary, is a recovering addict. He is not giving up, and he is asking us to ensure we do everything we can to help—to be a better partner with State and local governments and with the nonprofits out there in the trenches every day that are doing this work with folks like Gary who are looking for our help. CARA will give more people more hope.

So on behalf of all of those whom I talked about today, those whose lives were cut short, and their family members, and on behalf of our communities, let's continue this fight. Let's ensure we do, in fact, get CARA implemented quickly. Let's ensure we do continue to push not just to provide funding but new ideas and better ideas.

There is new legislation we just introduced in the last couple of weeks called the STOP Act that stops the synthetic heroin, the fentanyl, the carfentanil, and U-4 from coming into our country from other countries by requiring packages include information about where the package is from, what is in it, and where it is going. That is not required now by the post office, but it is required by private carriers. So these traffickers are using the postal system, including the U.S. postal system, to move these deadly chemicals into our communities. We need to stop that.

So there is more we can and should do. It is our responsibility to do that. As we break for these elections and as the lameduck period in December comes upon us after that, let's continue to work to ensure we are able to turn this tide and bring back more hope.

I yield the floor.

The PRESIDING OFFICER. The Senator from Pennsylvania.

WILLSEYE HOSPITAL

Mr. CASEY. Madam President, I wanted to come to the floor today, as I did last week, to speak once again about WillsEye Hospital in Philadelphia. When I was here last week, I was

talking about the hospital itself and the truly excellent work that is done at that hospital and, unfortunately, to talk as well about the unfair treatment that hospital is receiving from the Centers for Medicare and Medicaid Services. We know it by the acronym CMS.

CMS is using an arbitrary ratio of the number of inpatients and outpatients to make the argument—faulty though it is—that WillsEye is not a hospital and should be an ambulatory surgery center, which could have drastic implications and ultimately force WillsEye Hospital to close down. This hospital is almost 200 years old.

Last week, WillsEye Hospital started an online petition on change.org so people could show their support for the hospital. I wanted to share some of those comments today with Members of the Senate. These online postings, of course, don't just come from Philadelphia or Pennsylvania. They come from States across the Northeast and even beyond

Here are just a couple of examples. Jack Croft from Lansdale, PA, which is not too far from Philadelphia, said:

I owe my life, my right eye, and my sight to Wills Eye Hospital and its brilliant ocular oncology team. Losing federal designation as a hospital would have a devastating effect on the lives of thousands, many of them children, who desperately need the specialized expertise of Wills.

So said Jack Croft.

Ayan Chatterjee from Philadelphia said the following:

Wills Eye Hospital provides care to so many complex patients from all across the world. It is not just a "surgi-center." State regulators got it right but Federal regulators should revisit this.

We continue to hope they will do that—my words, in addition to the comments.

Kathleen O'Brien from Vestal, NY—not from Pennsylvania—said:

I've needed Wills since 2005 to treat and monitor my ocular melanoma. They are the best in the world for my very rare cancer. Medicare is my primary insurance provider. It makes no logical sense to take away this vital institution to the thousands of children and adults they not only treat but save lives.

Erica Roache from Cape May Court House, NJ, said:

This hospital provides specialized care not available anywhere else. Doctors at Wills Eye quickly diagnosed and successfully treated my daughter's rare eye condition that had been misdiagnosed for years by other less specialized doctors. The possibility of closing this world class hospital due to senseless bureaucracy is just unthinkable.

So says Erica.

Here are two more. This is Mike Stanley from Overland Park, KS—half a country away from Pennsylvania:

We live in Overland Park, KS, and for the past 2 years have been flying from Kansas City to Philly for treatment for the retinoblastoma eye cancer you refer to.

He is referring to comments I had made when I was at WillsEye Hospital. I continue on with Mike Stanley's comments:

Thankfully, my daughter is now 4 and in remission and we travel back to Philly next

week and Wills. Please let us know what we can do to support CMS changing how they classify Wills Eye so we and others can continue to get the best care in the world.

Alexis Butler, from Chelsea, MI, said: I'm signing because as a volunteer at Camp Sunshine at Sebago Lake I've met many children who have been saved by Wills Eye Hospital. Their cases aren't handled much by other hospitals as well as they are at Wills. It needs to survive.

So said Alexis from the State of Michigan.

I will do one more. The final comments come from Nancy Cotton from Marlton, NJ.

Please do not be blinded by rubber stamp bureaucracy. Not everything fits neatly into arbitrary slots—visit Wills Eye and look in the faces of those whose vision was restored, saved, as well as the parents whose children's very lives were saved. This institution fills a desperate need for highly specialized service! Save Wills Eye!!

Notice she uses exclamation points—actually two exclamation points at the end. That is how Nancy Cotton from New Jersey ends her comments.

So you can see from these comments that these are real people talking about their real lives or that of a family member—sometimes a child—and commenting from the vantage point of what they had experienced in terms of the benefits that WillsEye Hospital has provided. I hope CMS is listening—and not just to these comments but to the many others that have been sent in.

None of these comments are compulsory. None of these comments are part of some organized political effort. People are just responding in a very authentic and substantial way. This is very rare to have this kind of commentary that is so specific about how WillsEye Hospital has made life better for people across the Commonwealth of Pennsylvania, people across the northeastern part of the United States and well beyond that, as we can document from the comments from Kansas.

So what we are trying to do is to work with WillsEye and CMS to work this out and to remove a bureaucratic barrier or obstacle in the way of keeping WillsEye Hospital open as a hospital so that it can deliver the kind of eye care—the kind of lifesaving eye care—that not only these people experience but that I experienced myself as a father.

My wife and I had a daughter, and, fortunately, she is doing very well now. She is out of college. But she had a moment in time when she was a little girl where she would have lost eyesight in one of her eyes were it not for WillsEye Hospital. That is a fact. That is documented. We know that. So I join in those comments we heard today, and I will continue to make them a part of the RECORD.

We are working to save this hospital. To say it is a world-class institution is a vast understatement. It has affected so many lives, including my own.

So CMS got this wrong. They have an obligation to get it right, to fix it, so that WillsEye Hospital can continue into the future.

We are grateful so many people are taking the time to go to change.org and focus on all the benefits of WillsEye Hospital. I will continue to make this case a high priority for the work I do, the work our office does. Time is running short now for the hospital. CMS has some work to do to make sure we get the result not only that I want but one that I know people across our Commonwealth and our country want.

Madam 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. BROWN. Madam President, I ask unanimous consent that the order for the quorum call be rescinded.

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

TRANS-PACIFIC PARTNERSHIP

Mr. BROWN. Madam President, I just came from a discussion on the Trans-Pacific Partnership and the damage it will do to our country.

We have had 25 years of trade policy that has cost jobs in places like Lorain, OH, Cleveland, OH, and Dayton, OH. We know these trade agreements pull down worker safety standards, environmental rules and protections, and food safety laws and rules. We know they cost us jobs. I know what has happened in my State. I see what has happened in places like Omaha, the Presiding Officer's State, and all over our country. I appreciate Senator McConnell and Speaker RYAN saying they don't plan to bring the Trans-Pacific Partnership up for a vote in the lameduck session of Congress. I believe it would be a bit underhanded to do that when the public is speaking pretty loudly that these trade agreements don't work.

One part that in particular affects my State is something called rules of origin in the auto industry, where in order to qualify for a tariff reduction or tariff elimination to sell products, to sell a car, under NAFTA—NAFTA was a very flawed agreement. I helped lead the opposition. We almost defeated it down the hall in the House of Representatives. To qualify for NAFTA tariff reduction, removal, elimination, the car had to be mostly made-60 percent, more or less-in one of the three countries, the United States, Mexico or Canada. Under the TPP, Trans-Pacific Partnership, there are 12 countries, very disparate countries-Peru, the United States. Mexico. Canada. wealthy countries, Vietnam, poor countries. Under the rules of origin and TPP, a car can be more than half made elsewhere, like China, and then still be sold into the United States or sold into Canada or Mexico.

Fundamentally, what this means is, it has created a loophole you can drive my Jeep Cherokee, made by union workers 150 miles from my home in Toledo, OH—you can drive a Jeep Cher-

okee through this loophole. This will undermine the auto industry, it will undermine the supply chain, it will mean loss of jobs from auto assembly in Youngstown and Toledo and Sharonville, to other kinds—whether it is glass, tires, the steel in the cars. All this will undermine those jobs.

I again thank Senator McConnell and Speaker Ryan as they have promised not to bring up this agreement. I hope they are men of their word. It is a disaster for our country. It is bad for our country. I appreciate that both Presidential candidates—one more knowledgeable than the other, perhaps, about trade policy—have opposed the Trans-Pacific Partnership.

I close with this. I see candidates make all kinds of claims about their position on trade. I see all kinds of candidates in their own private businesses doing certain things, but I know we can make products in the United States of America. The shoes I have were made by workers in Maine and Massachusetts. The suit I wear was made by union workers in a company 11 miles from my home in Cleveland. American workers just want a level playing field. They just want the opportunity to compete. They want the opportunity to make things. We know how to do that in this country. Our trade policy should reflect that.

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

The PRESIDING OFFICER (Mrs. ERNST). Without objection, it is so ordered.

JUSTICE AGAINST SPONSORS OF TERRORISM BILL

Mr. WARNER. Madam President, yesterday I voted to override the President's veto of S. 2040, the Justice Against Sponsors of Terrorism Act, or JASTA. I chose to support the motion to override after hearing from supporters of this bill, including the families of the 9/11 victims, and considering the concerns that have been raised by the administration about the bill's potential unintended consequences on our national security and foreign policy.

Ultimately, I believe that the families who lost loved ones on 9/11 should have their day in court. Although I supported passage of the bill, I have grave concerns about the dangerous precedent of opening foreign sovereign immunity. I believe our national security and foreign policy could be put in jeopardy if reciprocal laws are enacted in other countries, with the potential to open U.S. citizens, officials, and servicemembers to foreign lawsuits in which they could be required to disclose classified or sensitive information as part of court proceedings in other countries.

I have joined 27 of my colleagues in sending a bipartisan letter to the bill's authors, Senators Schumer and Cornyn, laying out our concerns about the legislation and seeking their commitment to work with us to mitigate any potential consequences of enacting this legislation.

RECOGNIZING PLANNED PARENT-HOOD FEDERATION OF AMERICA

Mr. BROWN. Madam President, today I congratulate the Planned Parenthood Federation of America on a century's commitment to protecting women's health and making that health care a right, not a privilege. I have been proud to stand with Planned Parenthood against a tide of relentless political attacks, and I look forward to supporting this organization as it continues to empower all Americans to take control of their health for years to come.

When advocates opened the first birth control health clinic in the United States in 1916, they had a simple but bold goal: to ensure that all women, regardless of where they were born or where they live, have access to the information and resources they need to lead strong and healthy lives. Over the next hundred years, Planned Parenthood worked to cement the idea preventive and reproductive that health care is not a privilege afforded to the few but a key to leading a full. healthy life that should be available to every American.

In Ohio, our 28 Planned Parenthood clinics educate and provide care to tens of thousands of men and women each year, many of whom have nowhere else to turn. The lives and struggles of those patients are what motivate the dedicated staff and volunteers at these health clinics. And they do this critical work in the face of constant threats and attacks from all levels of government. Just this year, the State of Ohio passed an ill-conceived law that, had it not been overturned by a Federal district court, would have jeopardized access to preventive care and ceased operation of a prominent infant mortality prevention program.

I get letters all the time from constituents who rely on Planned Parenthood. One Ohioan wrote to me saying, "I was so amazed by the support for women that Planned Parenthood provided that I volunteered for them for years," while another wrote, "Planned Parenthood not only provided a well-rounded education, in which I had received none previously, but they also provided services that I would not have had access to otherwise." I have even heard that Planned Parenthood "saved the life of my best friend when she found a lump in her breast and she had

no health insurance."

We need to listen to the voices of these women and remember that Planned Parenthood remains a vital health provider for so many. It is a strong advocate for its patients, and