

usually bringing in a classic “Pouncey Family” homemade cake or pie.

I asked some of her current and former colleagues for one word that describes Errical, and I think these hit home: dedicated, steady, diligent, passionate, ethical, motivated, funny, sunny, meticulous, loyal, accommodating, conscientious, and tenacious.

Mr. Speaker, Errical has been “the face” of Alabama’s First Congressional District for much of the last fifteen years, and her service will be missed. As she moves on to begin a new role, I want to wish her and her husband, Thurston, all the best.

So, on behalf of Alabama’s First Congressional District, I want to thank Errical for her years of hard work, commitment, and service to Southwest Alabama.

THE IMPACT OF THE REPEAL OF THE ACA

HON. ROBIN L. KELLY

OF ILLINOIS

IN THE HOUSE OF REPRESENTATIVES

Wednesday, February 1, 2017

Ms. KELLY of Illinois. Mr. Speaker, I include in the RECORD this article concerning the repeal of ACA.

[From the Washington Post]

REPEALING THE AFFORDABLE CARE ACT WILL KILL MORE THAN 43,000 PEOPLE ANNUALLY

(By David Himmelstein and Steffie Woolhandler)

Now that President Trump is in the Oval Office, thousands of American lives that were previously protected by provisions of the Affordable Care Act are in danger. For more than 30 years, we have studied how death rates are affected by changes in health-care coverage, and we’re convinced that an ACA repeal could cause tens of thousands of deaths annually.

The story is in the data: The biggest and most definitive study of what happens to death rates when Medicaid coverage is expanded, published in the New England Journal of Medicine, found that for every 455 people who gained coverage across several states, one life was saved per year. Applying that figure to even a conservative estimate of 20 million losing coverage in the event of an ACA repeal yields an estimate of 43,956 deaths annually.

With Republicans’ efforts to destroy the ACA now underway, several commentators have expressed something akin to cautious optimism about the effect of a potential repeal. The Washington Post’s Glenn Kessler awarded Sen. Bernie Sanders (I-Vt.) four Pinocchios for claiming that 36,000 people a year will die if the ACA is repealed; Brookings Institution fellow Henry Aaron, meanwhile, predicted that Republicans probably will salvage much of the ACA’s gains, and conservative writer Grover Norquist argued that the tax cuts associated with repeal would be a massive boon for the middle class. But such optimism is overblown.

The first problem is that Republicans don’t have a clear replacement plan. Kessler, for instance, chides Sanders for assuming that repeal would leave many millions uninsured, because Kessler presumes that the Republicans would replace the ACA with reforms that preserve coverage. But while repeal seems highly likely (indeed, it’s already underway using a legislative vehicle that requires only 50 Senate votes), replacement (which would require 60 votes) is much less certain.

Moreover, even if a Republican replacement plan comes together, it’s likely to take a big backward step from the gains made by the ACA, covering fewer people with much skimpier plans.

Although Aaron has a rosy view of a likely Republican plan, much of what they—notably House Speaker Paul D. Ryan (R-Wis.) and Rep. Tom Price (R-Ga.), who is Trump’s nominee to head the Department of Health and Human Services, which will be in charge of dismantling the ACA—have advocated in place of the ACA would hollow out the coverage of many who were unaffected by the law, harming them and probably raising their death rates. Abolishing minimum coverage standards for insurance policies would leave insurers and employers free to cut coverage for preventive and reproduction-related care. Allowing interstate insurance sales probably would cause a race to the bottom, with skimpy plans that emanate from lightly regulated states becoming the norm. Block granting Medicaid would leave poor patients at the mercy of state officials, many of whom have shown little concern for the health of the poor. A Medicare voucher program (with the value of the voucher tied to overall inflation rather than more rapid medical inflation) would worsen the coverage of millions of seniors, a problem that would be exacerbated by the proposed ban on full coverage under Medicare supplement policies. In other words, even if Republicans replace the ACA, the plans they’ve put on the table would have devastating consequences.

The frightening fact is that Sanders’s estimate that about 36,000 people will die if the ACA is repealed is consistent with well-respected studies. The Urban Institute’s estimate, for instance, predicts that 29.8 million (not just 20 million) will lose coverage if Republicans repeal the law using the budget reconciliation process. And that’s exactly what they’ve already begun to do, with no replacement plan in sight.

No one knows with any certainty what the Republicans will do, or how many will die as a result. But Sanders’s suggestion that 36,000 would die is certainly well within the ballpark of scientific consensus on the likely impact of repeal of the ACA, and the notion of certain replacement—and the hope that a GOP replacement would be a serviceable remedy—are each far from certain, and looking worse every day.

AFAQ SELECTED TO REPRESENT TEXAS AT THE CONGRESS OF FUTURE SCIENCE AND TECHNOLOGY LEADERS

HON. PETE OLSON

OF TEXAS

IN THE HOUSE OF REPRESENTATIVES

Wednesday, February 1, 2017

Mr. OLSON. Mr. Speaker, I rise today to congratulate Shaikh Afaq of Sugar Land, TX, for being chosen to represent Texas as a Delegate at the Congress of Future Science and Technology Leaders by the National Academy of Future Physicians and Medical Scientists.

Shaikh was nominated to this position because of her excellent academic record and desire to enter the Science, Technology, Engineering and Math (STEM) field. Through this program she will be able to meet some of the most important leaders in the STEM industry, including Nobel Prize winners and top scientific university deans. The Congress of Future Science and Technology Leaders is

hosted to help motivate the top students in the country to pursue their desired careers in the STEM fields.

On behalf of the Twenty-Second Congressional District of Texas, congratulations again to Shaikh Afaq for being selected as a Delegate at the Congress of Future Science and Technology Leaders. We are extremely proud and expect great things from her in the future.

RECOGNIZING FAMILIES IMPACTED BY THE NATIONAL OPIOID EPIDEMIC

HON. ANN M. KUSTER

OF NEW HAMPSHIRE

IN THE HOUSE OF REPRESENTATIVES

Wednesday, February 1, 2017

Ms. KUSTER of New Hampshire. Mr. Speaker, I rise today to include in the RECORD the personal stories of families from across the country that have been impacted by the opioid and heroin epidemic. In the U.S. we lose 129 lives per day to opioid and heroin overdose. In my home state of New Hampshire I have learned so many heartbreaking stories of great people and families who have suffered from the effects of substance use disorder.

Earlier this year, my colleagues and I were joined by many of these courageous families who came to Washington to share their stories with Members of Congress and push for action that will prevent overdoses and save lives. Since then, we passed both the Comprehensive Addiction and Recovery Act and the 21st Century Cures Act to provide much needed funding and critical policy changes to fight this epidemic.

The advocacy of these families truly is so important to leading change in Washington and I am proud to preserve their stories.

**CARLTON FREDRICK MESSINGER II—
HOLDERNESS, NEW HAMPSHIRE**

On Sunday, September 28, 2014, Carlton’s (Carl) family found out that he had been using heroin on and off for about a year. They were as shocked and bewildered as any parents could possibly be. They asked themselves: ‘How does a young adult who is a college graduate and taking advanced classes in chemistry and biology, getting A’s & B’s in the classes so he can apply to dental school use heroin?’ His mother immediately thought that’s not my child, there has to be a mistake. How did we miss this? How does a functioning member of society who six months ago started a thriving eBay business selling vintage transformer toys use heroin? There were many questions swirling around in her head after being told about Carl’s heroin use. She felt, and still does feel, at times, that she is in a movie and this has not really happened to her family. She feels that Carl is out of town and will be coming back home someday. But then reality hits and she realizes Carl is never coming home.

Within minutes of being told about Carl using heroin, his family confronted him. After a lengthy, calm, and rational discussion, he confessed to using and that he was weaning himself off of it with Suboxone. Carl told his parents he wanted their help. The result of that meeting was an agreement: Carl would immediately enter a detox program, then enter a treatment facility.

After six phone calls and much frustration, his mother finally found a detox center that would take Carl. The reason for her frustration was not that there wasn’t a bed available or that they didn’t take their insurance;

the real frustration was his mother was told over and over again that if they didn't take our insurance, they could not accept him as a cash-only client. These specific detox centers had an agreement with insurance companies that they would accept approved insurance clients only.

Carl's mother finally found The Farnum Center in Manchester, NH, where Carl could enter as cash paying inpatient client if their insurance denied the request for coverage. As expected, their insurance denied the request to cover detox treatment for drug addiction. His mother was told that if Carl had an alcohol addiction it would be covered. She was also told that the insurance companies did not think you could die from drug detox.

Carl entered The Farnum Center detox program on Wednesday morning, October 1, 2014. At the end of the six-day inpatient program, everyone in the facility was convinced that Carl was going to make it. They made his family feel wonderful about their son; Carl had stopped using heroin on his own two months prior and was now detoxing off of suboxone. They also mentioned how Carl had helped other patients realize they could be treated for heroin addiction and have a better life. Before departing, the discharging doctor mentioned that if Carl was not ready to go right into rehab, he may be able to stay clean on his own since he had already stopped using heroin on his own and had previously used suboxone.

In another lengthy, calm, and rational discussion Carl made a case for not going to a treatment facility. Based on Carl's request, and the information his family received from the detox doctors, they ultimately agreed. After he successfully completed the detox program Carl moved home, and his parents felt they could monitor his progress adequately. They all agreed that he would have to stay clean and sober during this two-week trial period. At the end of the two weeks, Carl would be drug tested. If he tested positive he would enter treatment immediately. If at any time after the two week period Carl tested positive for drugs he would immediately go to treatment, no discussion. At the end of the two weeks, Carl took the drug test and passed with flying colors. His family congratulated him, and hugged him. They truly felt they had their son back and on the road to recovery.

On Tuesday, October 21, 2014, Carl came down with a bad upper respiratory infection and was taken to the doctor the next day. Carl's parents found out later that he never saw his regular doctor for this visit. He saw a doctor who was not familiar with Carl's medical history, and had no idea that he had just come out of detox for heroin addiction. They also discovered later that Carl's primary care doctor never wrote in his chart about his heroin addiction, and having just completed detox. Even though his primary care doctor was part of the process of getting Carl help.

Carl's parents found out after his death that the doctor never asked him if he had any alcohol or drug abuse issues before prescribing a codeine cough syrup for the infection. They learned that, five years before, the medical center had removed a template that would cue doctors to ask patients about substance use disorders prior to prescribing a narcotic. Carl's mother had a conversation with the CFO of this medical center, only to be told that, "Yeah, we don't do such a good job with this issue. Our clinicians need to be mindful of these issues."

When Carl's mother picked up the prescription for Carl, she was not aware that Cheratussin AC Syrup is a codeine cough syrup. There were no labels on the bottle stating that this cough medicine does in fact have codeine, and it can stimulate drug-

seeking behavior. However, buried on the second page of the patient prescription information sheet it lists the following: "Though very—unlikely abnormal, drug-seeking behavior is possible with this medication."

The codeine in the cough syrup triggered the need for Carl to use again. His mother found him dead in his bathroom, with the syringe still in his hand. The memory of finding him cold, dead and blue will be something she lives with every day. "This is an experience no parent should have to go through," writes Carl's mother.

"Carl died from fentanyl intoxication. There was no heroin in Carl's system, only fentanyl and codeine from the cough medicine. As my husband has said: this was the perfect storm. Unfortunately it took our son's life. Carl never had a chance to embrace sobriety. I feel some of the people we put our trust in failed Carl."

"Carl was an educated, smart, and vital young man who came from a family who loved him very much. He had his whole life ahead of him and is sorely missed by his parents, brother, family, friends and everyone that knew him. We know Carl is in a better place. Carl will always be in our hearts."

TYLER REED—POTEAU, OKLAHOMA

Tyler came into this world on January 27, 1992. Tyler was a natural fighter, independent and won the hearts of everyone he met. He excelled in all sports but was most passionate about baseball until ninth grade when he suddenly lost interest and quit playing. It was later learned that he had started experimenting with marijuana and alcohol and as a result, he started getting into trouble at school. As a single mother, Tyler's mom found herself at odds with a strong-willed boy who told her he just wanted "to have fun and not be tied down by responsibilities, those will come soon enough." By the time Tyler graduated high school in 2010, he was using marijuana and alcohol almost daily and experimented with K2, bath salts and Xanax.

Tyler had dreams of becoming a Texas Ranger, but he had gone too far into his head and couldn't see a way out. He had gotten in trouble with the law for underage drinking and possession of marijuana on several occasions. He finally got his head clear for a while and started working on the road to pay off his fines. Everything seemed to be falling into place, but his love for fun and adventure kept him searching for the next good time.

On many occasions Tyler woke up still wasted, wondering where his money went. In May 2015 he came to me once again and said he was tired of the life he was living. He asked his mother for help. Tyler longed to have a straight mind and clean life but he just couldn't seem to shake the addiction. Despite his desire to clean up, he refused to go to an inpatient facility. As a nurse his mother set an alternative plan of care in motion and he stayed clean and sober for 29 days, until one day he left and she didn't hear from him for weeks. When his mother put out a missing person alert he surfaced just to let her know he was OK; she knew he was using again.

They talked off and on for a month while he was staying with a woman known in town to be a meth user. When she was arrested in August 2015 Tyler came asking for a place to stay. His mother let him stay under the conditions that he would get a job and stay drug-free. He did for a while but quickly reverted back to his partying lifestyle. She struggled with him and the choices he was making. His mother didn't know how to handle it.

One of Tyler's friends was found dead in a field from an overdose of meth, and Tyler was questioned in his death. Tyler's inno-

cence was later proven, but that didn't curb the harassment he took from people that still believed he was guilty. That event shook Tyler and his mother thought he was on his way to being clean and sober. He seemed ready to conquer the world.

On February 6, 2016, Tyler went out with some people he thought he could trust. They drank and smoked pot and when Tyler passed out one of them shot him in the spine with a lethal dose of methamphetamines. Tyler was rushed into the hospital at 3:00 AM on February 7, 2016, with a core temperature of 108 degrees. The doctors didn't expect him to make it past the hour, but Tyler lived for 24 days in critical condition with severe multi-system organ failure. He was never able to speak a word again but he communicated with eye and hand movement. Drugs took his life away and his mother believes he realized that on March 2, 2016, when he tried to climb out of the hospital bed—it was as if he was saying, "I am out of here momma, I'm going home."

"Tyler lived a short 24 years," writes his mother. "He had so much more life to live. As I said before, Tyler was a fighter and very independent, he wasn't going to be taken care of for the rest of his life. He thought he had control over his addiction and that he wasn't hurting anyone but himself. But there are so many of us hurting because his life ended on March 3, 2016, when he stopped fighting and was set free from the pain. I hope and pray that sharing his story will help someone else who is struggling. I have to believe that his life was not cut short for nothing, that good things will rise out of this tragedy. Rest, my sweet Tyler, and save a place for me. I'll be home soon. Until then I will share your story with whoever will listen!"

ADAM SCHULTZ—SANDY, UTAH

Adam Schultz was an incredible person, who lost his life to an accidental heroin overdose on November 24, 2012, after 150 days of being clean. He struggled every day with a substance use disorder. Adam worked hard on his recovery through treatment, recovery support, and medication.

Adam was born December 19, 1989, and his family were lucky enough to bring him home on Christmas Eve. He was their 9 lb. 4 oz. big, baby boy. Adam was always smiling and happy. He learned to walk at a very young age and his motor was always running. His family often referred to him as the "Adam Bomb." At five years old he was diagnosed with ADHD and put on medication for hyperactivity and impulsivity.

Adam was gifted with his hands. He loved woodworking and became the handyman around the house. He was computer-literate and had received his A+ certification as a computer technician as well. He was regularly called by many with PC emergencies and were in need of troubleshooting or computer repairs. Adam never hesitated to help when asked. However, his true passion was working on cars. At age 13, he bought a 1966 mustang and decided to restore it himself and worked on it all through high school. He also loved his Mitsubishi Eclipse and always kept it in tip-top shape.

As a teen, Adam struggled with depression and it was difficult to find the right treatment. The doctors put him on multiple medications, which ended up causing seizures. He was then diagnosed with epilepsy and once the medication was adjusted the seizures stopped.

Despite all the diagnoses and medications, the one that had the biggest impact on Adam's life came in 2007, when he was 17 years old. Adam was diagnosed with degenerative disk disease and given a prescription for OxyContin. This dangerously addictive

RON SLINGER

HON. ED PERLMUTTER

OF COLORADO

IN THE HOUSE OF REPRESENTATIVES

Wednesday, February 1, 2017

Mr. PERLMUTTER. Mr. Speaker, I rise today to recognize Ron Slinger for being honored by the Arvada Chamber of Commerce with the Chairman's Choice Award.

The Chairman's Choice is selected annually by the Chairman of the Arvada Chamber of Commerce Board of Directors to recognize a member of the community who has shown leadership and outstanding support to the Arvada Chamber.

Ron's extensive involvement, leadership and contributions in Arvada have resulted in a significant and long lasting impact in the community. His sense of humor and kindness bring positive energy and perspective to any opportunity he undertakes. Ron is a true advocate for the Arvada Chamber and has fully dedicated himself to the betterment of the community.

I extend my deepest congratulations to Ron Slinger for this well-deserved honor from the Arvada Chamber of Commerce.

SUPREME COURT NOMINEE NEIL GORSUCH**HON. TERRI A. SEWELL**

OF ALABAMA

IN THE HOUSE OF REPRESENTATIVES

Wednesday, February 1, 2017

Ms. SEWELL of Alabama. Mr. Speaker, I rise today in response to President Trump's recent nomination of Judge Neil Gorsuch to the Supreme Court. I now call on my Senate colleagues to rigorously vet his nomination and ensure that his values and constitutional philosophies align with those of mainstream America. At this critical juncture in our nation's history, it is important that this nominee be a fair and impartial adjudicator of the laws that protect the rights of all Americans.

In the coming days and weeks, I look forward to learning more about the judicial opinions and constitutional philosophy of Judge Gorsuch. Unfortunately, Republicans did not extend this same courtesy to President Obama's nominee Merrick Garland. For 300 days, Senate Republicans defied the Constitution, ignoring President Obama's nominee, and refusing to even give him a hearing. However, I along with my Democratic colleagues value the Constitution over partisan politics.

Therefore, I hope for a fair and vigorous vetting process of Judge Gorsuch and his judicial record. The Supreme Court will likely make many critical decisions in the upcoming decades, affecting issues from voting rights to privacy rights to consumer protections. America needs a justice whose interpretation of the Constitution aligns with American values and the rule of law.

medication quickly became a problem, and Adam was soon physically dependent, not just for pain but also to function in his daily life. This was where his addiction began.

In January 2008, at 18 years old, Adam checked himself into the hospital for being suicidal. He was then diagnosed with bipolar disorder and an addiction to opiates. He received counseling, started on bipolar meds, and was put on high doses of Suboxone to help with his addiction and also relieve his back pain. But six months later, after another night in the psych ward, he gave up on that medication and started using heroin.

"It is absolutely paralyzing to learn that your son has a substance use disorder," writes Adam's mother. "The stigma of having a child struggling with addiction caused us to withdraw rather than seek help. We learned how to live life with the truth hidden in the back of our hearts. We knew Adam was more than his addiction, and we desperately wanted our boy back."

Adam suffered and struggled for many years; finally, he found a medication that seemed to work for him. Adam received injections of Vivitrol for opioid addiction, and his life started getting back on track. After not using for 13 months, he relapsed and this time he started injecting heroin. After a six-month relapse, he set up an appointment to start receiving his Vivitrol shots again. In early November of that year, Adam was due for another injection. When he went in for his appointment, he managed to convince his doctor that he was ready to "try" one month without the shot. His entire life, Adam hated being on medication; whenever he started doing better, he insisted he didn't need it any more. So he stopped taking Vivitrol and scheduled an appointment for December to be re-evaluated.

Weeks later, Adam totaled his car on his way home from work. This was just too much and, after 150 days of not using heroin, Adam relapsed and lost his battle with addiction. Over 300 people attended his funeral. A woman Adam worked with told his family that just a few days before, Adam would have stopped to help someone fix a flat tire; this just goes to show you that people are more than their addictions.

ANDREW BENJAMIN SMITH—LAS VEGAS, NEVADA

Margie Borth's world was forever changed on October 5, 2014, when her husband uttered those words: "I just received an email—Andrew is addicted to heroin." The news hit like a baseball bat between the eyes. Suddenly, all of the questions she'd been struggling with regarding her son were answered: Why so many car accidents? Why is he so distant? Why does he get mad and refuse to talk? Why doesn't he have any money?

Still I tried—I tried everything I could possibly think to do in such a desperate situation. I begged, sobbed, hugged, listened, scolded, yelled, pleaded—I mothered. I bargained with Andrew and with God.

But he was just visiting for the weekend and soon he had to get back to his job. Within two weeks, he was in the hospital with his first DUI and another wrecked car. He had overdosed on the streets of Las Vegas while driving. Thank god no one was hurt. He died just 21 days later, after spending a short stint in rehab.

When remembering Andrew, the first thing people talk about is his intellect. He was extremely bright; he thrived in accelerated programs and graduated from college in three short years. Many of his friends have said, "He was the smartest guy I've ever met." Then we remember his razor-sharp, witty, often self-effacing sense of humor. Andrew was also inquisitive, a good listener and a loyal friend. He was polite and people took to liking him immediately.

He was driven and it seemed as though he had the world at his fingertips. Andrew was confident about his opinions, view of the world and goals in life. He inspired many people during his short life. He was well loved by co-workers and a role-model for new employees at his new position in Las Vegas. His employer said they had so many plans for Andrew's future. She told me he always volunteered for extra projects, never complained and would have given the shirt off his back to someone in need.

Andrew began experimenting with drugs in high school, but his addiction to Oxycontin developed in 2009 while he was attending college in Florida during the Pill Mills—Oxy was cheap and readily available. Andrew often expressed his frustration with trying to find people on his intellectual level; Oxy made him feel more like everyone else. Oxy made people, life and college feel tolerable. Throughout the trajectory of his use, he thought he was in control. Even when he was forced to switch to heroin in 2014, he told a friend, "Heroin is not so bad, it's just like Oxy." In August 2014, he took a job promotion in Las Vegas and thought he could leave heroin behind: "Mom, I never planned to do heroin here," he said. "I planned to quit, but I realized I was an addict when I got to Las Vegas and still had to have it." Even at the very end, when his life really began to unravel, he still thought he had the upper hand on this drug. He refused long-term treatment and thought he could return to work after detox. I spend the last 6 days of his life with him, he was clean for 19 days before he overdosed. During that time, he told me what I wanted to hear, "I don't want to do heroin again, Mom." But he struggled; he was deeply sad and ashamed of what his life had become. On the surface, he was a successful corporate executive who appeared to have everything in check. He had great credit and a 401k. But in reality, he was a struggling addict who lived for Oxycontin and ultimately heroin—he was desperate to keep it a secret.

On a Monday afternoon, on November 10, 2014, Andrew handed me two red roses and said he wanted to go to an AA meeting. I was so excited that he was finally making progress and dropped him off at a meeting soon after. An hour later when he didn't respond to my texts or phone calls, I knew in my heart what had happened. The hospital called 45 minutes later. He was found in the bathroom of a Petsmart just down the street. It was too late to save him. He died alone.

I simply miss my son—he was my only boy and my youngest. Even though we lived in different cities, he was always present in my life except for the few times that he distanced himself due to his drug use. Even then, I knew I'd eventually get a phone call and a visit. I had hopes of grandchildren because he talked about becoming a father someday. He wanted to meet someone educated, maybe a doctor.

What I miss most is what could have been. He talked about wanting to move to the Pacific Northwest eventually, close to Portland, OR, where I live. I always thought he would join us. I miss his open-mindedness and intellect. His willingness to try new foods, adventures, places, his sense of humor. I miss our playful banter. I miss every phone call that ended in, "I Love You". Now there is just an enormous void in my life where he used to be. Sadness and tears are now a part of my everyday.