

Committee, a committee I served on from 2011 until the beginning of this Congress. While this committee sometimes flies under the radar for many Americans, the oversight it conducts and the issues it considers under its substantial jurisdiction are of great consequence to America and to the American people.

The owners and employees of banking institutions have experienced success when their communities experience success. What I am saying is, how we lend money matters to every kind of person every day. So what we have experienced across Kansas, in many instances, is difficulty and really hard times.

I want to talk about community. Community financial institutions are of great importance to the folks I represent in Kansas. What I want to do, in part, with my opportunity to serve on the Banking Committee is to make sure those financial institutions have a regulatory environment in which they can benefit their communities and benefit the citizens who live there.

Communities in Kansas are losing their hometown banks to consolidation and sales, and some of these banks that are moving in that direction have been family owned for generations. In order to better understand why these lenders are consolidating or selling, I have sought out the nature of this decline by speaking with financial leaders from across the country. The overwhelming response I received is that the costs associated with complying with new Federal regulations are simply too much to absorb in their business model.

In the aftermath of our country's significant financial downturn, a new regulatory framework was put in place to rein in those bad actors and punish bad behavior that led us down that path in 2007 and 2008. We have had more than 7 years to determine what the effects are of this new regulatory environment—Dodd-Frank—and what it has meant to our community banks and our community financial institutions. The most glaring aspect of these new regulations is the disproportionate burden placed upon those smaller institutions seeking to comply with their new responsibilities.

Rather than extending credit to best fit the needs of their customers, banks are exiting entire lines of business because the penalties for making a mistake far outweigh the economic benefits derived from extending a loan. I experienced this damaging news and reality during the Senate Banking Committee's consideration of legislation to reform the secondary mortgage markets in 2014. I was attempting to solicit feedback from Kansas lenders of the financial impact some of these proposed changes would have on their communities, and what I learned, unfortunately, was this: "Jerry, we don't make home loans anymore." When pressed for a reason, they responded it just didn't make business sense for them to

do that any longer due to the increased Federal regulators' crackdown on mortgage lending.

As a member of the Senate who cares deeply about rural America and the special way of life we enjoy in Kansas, this is a very damaging occurrence. If a community banker determines they can no longer extend credit to what would have otherwise been a credit-worthy borrower because of the fear of making a mistake and the repercussions that follow, then they decide not to make the loan at all and not even to be in the business. What community would expect their financial institutions in their community to refuse to make a home loan? It is the American dream.

While community banks had been consolidating for a number of years due to shifting demographics and market conditions, we cannot nor should we attempt to discount the role the post-Dodd-Frank regulatory environment has played in the acceleration of the harming of our community banking structure.

I am not opposed to regulations, and neither are the community bankers working to serve their communities, but there has to be prioritization on the part of Congress to create an environment where local lenders can succeed because the success of these institutions means the success of their communities and the people who live there.

During the fall of 2015, I worked alongside a number of committee colleagues—both Republicans and Democrats—to see if we could bridge the divide and bring relief to our community lenders across the country. While these efforts did not then produce a result, these discussions demonstrated that the issues facing the financial service world need not be partisan, and they sowed the seeds for what has now resulted in legislation moving its way through the legislative process today.

I am happy to support S. 2155, the Economic Growth, Regulatory Relief, and Consumer Protection Act recently reported out of the Banking Committee on a bipartisan vote. Many of the provisions in this bill originated in legislation I have promoted since I came to the Senate, first as the Communities First Act, and most recently as the CLEAR Relief Act. While this legislation will not solve every issue that needs to be solved, it is meaningful progress that will make a difference.

It is Congress's responsibility to ensure that economic growth is not needlessly impeded, and it is our duty to ensure that economic opportunities flourish and that Americans have access to the tools necessary to pursue the American dream.

The Banking Committee can and will play an important role in providing these tools, and I feel fortunate to have the opportunity to lend the voice of Kansans to that effort. I look forward to working with the chairman, MIKE CRAPO, the Senator from Idaho, and the ranking member, SHERROD BROWN from

Ohio, as we work together to make sure good things happen in Kansas and across the country.

Again, I look forward to working with my colleagues on the Banking Committee and on the Senate floor to see that all Americans have the opportunity to have access to credit so we can continue to pursue growing economic opportunities for all Americans to keep the American dream alive and well.

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

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

OPIOID EPIDEMIC

Mr. BLUNT. Mr. President, I am here today with my colleague Senator CAPITO to talk about something that is getting a lot of attention but needs even more attention from this Congress, which is the opioid epidemic—the epidemic the President has rightly called a crisis, and he then turned to Congress and said: Find the money to solve the problem. We have been doing a substantial amount of that, but I think we see a clear desire here and in all of our States to find a better solution.

This is an issue that has hit every town in America, small and large, I believe. According to the Centers for Disease Control and Prevention, over 40,000 people died from an opioid overdose. This is a fraction of the people who had an opioid overdose. These are the people who died from an opioid overdose in 2016, 40,000 people; over 90 Americans every single day. It was a 28-percent increase over 2015 and a dramatic increase over where we were just 10 years before.

Opioid overdoses now surpass car accidents as the No. 1 accidental cause of death in the country. Both of our States and our surrounding States, I think almost every one of them, have had more overdose deaths in 2016—and an increased number, I think, in 2017—than car accident deaths. The Centers for Disease Control estimates the economic burden of this epidemic is almost \$80 billion a year.

We have just gone through a tax discussion, an economic growth discussion. When we were talking about billions of dollars, seldom were we talking about \$80 billion to do something with or to stop doing something with, but the economic cost of all of this—lost productivity, addiction, the crime related to that addiction—the CDC says \$78.5 billion a year is now the cost.

We are both appropriators. The members of the Appropriations Committee have looked at this carefully. Our colleagues have had a chance to confront this issue in our committee head-on. We brought bills to the floor that have passed and made a big difference in a

short period of time. Over the past 2 years, not counting what we hope to do this year, the committee has increased opioid funding by over \$900 million, nearly a 200-percent increase for the Department of Health and Human Services—more money for justice, more money for the Department of Veterans Affairs.

This funding is focused on developing alternatives for pain management, giving our State, Federal, and local law enforcement partners the tools they need to combat opioid trafficking, ensuring first responders we are working to see that there are better ways to respond with opioid reversal.

One of the things we have seen recently is that opioids of all kinds are now laced with new drugs like fentanyl, and you don't even know what you are taking. Narcan, the former way to deal with this and still the most effective way to deal with this—you think you have dealt with a problem, and the dose is so strong, the same person in just a few minutes lapses back into another seizure, attack, that has often been fatal. Even though people are there and the traditional way to respond is there, it isn't enough for what is going on now.

One thing you would have to tell anybody doing this is, it is unlikely you have any real idea what you are putting into your system. What you think was a narcotic high the day before could easily kill you the next day. We have been looking for better ways to monitor programs so prescriptions in West Virginia and Missouri—they are both States where, in some counties, the number of prescriptions people have been walking into the pharmacist with are just ridiculous.

The committee that funds the Department of Health and Human Services—that is the committee we are both on—in the last 2 years, we have increased funding by 1,300 percent, \$745 million—13 times more than we were spending just 2 years ago. We have given grants to States, in ways we haven't before, to look at specific State needs and ideas they have to deal with this and then share. We have looked at increasing Federal surveillance on how prescriptions are being written, how drug stores are becoming the conduit, and how many substances are coming through the mail to find new ways to determine whether this is reasonable in the area these drugs are going into. We have looked at ways to increase the tools necessary to communities and first responders. We are talking right now to the National Institutes of Health about what they can do on a number of fronts. One is to work with the pharmaceutical companies themselves to develop alternatives to the kind of pain management we have had.

Also, let me say on that front, we have gone through a period where doctors and hospitals were too often graded on whether people had any pain or not as opposed to whether they had

pain they didn't understand, pain that was unacceptable. More and more people ought to be saying, as opposed to taking this potentially addictive drug, give me a dose that is not as addictive, and maybe I am still more achy than I would be otherwise, more pain than I would have otherwise, but I understand it and am aware of it, and I am not in some cloud of no pain but not much of anything else in terms of real quality of life.

We are looking at how we can work with these companies for pain management. I have talked to the pharmaceutical companies. I think it is time for them to step up, maybe in partnership with NIH, so there is some Federal money to encourage more private sector money to find alternatives that are less addictive and better understood, to find more effective and affordable ways to respond. Just the amount of money in the first responders' kits around the country, and local governments paying for the Narcan, the more expensive injectable treatment—we need to look for ways where that can be more available and in a way that local governments have a better way to deal with this.

This needs to be dealt with locally. The first responder is going to be a local person. If you are a fire department that also has first responders, your department is three times more likely to go on an overdose call than they are to go to a fire. That is where we are in this situation today.

In trying to figure out what the impact really is at home—as we all are trying to do—I had a meeting not too long ago with medical professionals, with State officials, with emergency responders, in Springfield, MO, to talk about how we deal with prevention, treatment, and recovery. We talked about the critical partnership between local, State, and Federal law enforcement and the dangers the first responders themselves face. Sometimes what people are putting into their system is so powerful and so addictive that walking into the room or touching the clothing becomes a potentially great danger for the person who is there to help you. I talked to doctors and hospitals about the challenges they face in prescribing less habit-forming pain medications and how patients are still not fully aware of the danger of dealing with pain if you overdo it as you are dealing with pain.

I talked to one person who talked about his daughter who had just gone to the dentist and got pain medicine and had no sense that the pain medicine could be addictive and she should stop taking it when it had done its job, whether or not it was when the last pill was gone.

Then, of course, there is a new issue of underprescribing. Nobody likes to go back to the pharmacy twice to get the same prescription they just got a few days ago, but giving people more pills than they need to take themselves or have them sit in the medicine cabinet doesn't make any sense.

In our State, there are large urban areas, but it also has a lot of small and remote communities and, frankly, rural communities have been hit particularly hard by this crisis. Certainly, West Virginia is a State that understands this. There has been no more vigorous advocate for funding and new ways to solve this problem than Senator CAPITO. I am glad to be here with her today as we talk about this issue.

I can assure the people we work for that this is a top priority. It has been a top priority for over 3 years now. The first 2 years showed dramatic increases in the willingness we had to deal with this and the breadth of how we deal with it, and that is one reason we need to move on and get this funding bill, which should have been done by October 1, done right now. As we get a new number to deal with, one of our priorities will be the opioid epidemic, and one of the leaders in that discussion will be the Senator from West Virginia, Mrs. CAPITO.

The PRESIDING OFFICER. The Senator from West Virginia.

Mrs. CAPITO. Mr. President, I wish to thank Senator BLUNT from the great State of Missouri for his leadership on this issue. He chairs the subcommittee that is very pivotal—the Appropriations Subcommittee on Labor, Health and Human Services—and has moved forward so aggressively to up the funding in this area. We have the pedal to the metal now.

As he said, when we are moving and coming to a final spending bill, this has to be a top priority for us. It is absolutely critical. I am really pleased to be on the subcommittee, but I want to thank him for—I know he works diligently with NIH, which holds big promise. We are always looking for solutions. Can we treat ourselves out of this? Can we law enforce ourselves out of this? Can we prevent ourselves out of this? I think we can do all of those. We have to have a component of research that looks at the alternatives to pain medications and pain management.

The current bill we have looked at is \$816 million for programs to combat opioid abuse issues, and that is a 440-percent increase from the previous year.

I am going to go through this. It might sound a little mundane and detail-oriented, but people say: That is great to “up” the amount of money that you are spending, but where are you really spending this money?

The Senator from Missouri, Mr. BLUNT, mentioned that it has to be done locally, and there is a lot of emphasis on where these dollars are going.

Some of them are going, of course, to the CDC, the Centers for Disease Control and Prevention, for prevention issues, which is critical, while \$50 million is going to our community health centers. In States such as Alaska, West Virginia, and Missouri, community health centers are seeing hundreds of

thousands—millions—of people every day and many more who are dealing with mental health and substance abuse. SAMHSA oversees the mental health grants that go to our States, and there is \$15 million for a new SAMHSA program for opioid prevention. We have our drug-free communities program, which works well in my State. It is a total grassroots-up, bottom-up, when you get everybody from your local county or public health and others in the room to try to solve this issue. Then again, there are some block grant programs to our community health centers along with the funding to NIH. This is a broad-based look at where the funding is going.

We have an opportunity here in the next several weeks to “up” that funding, to make sure that the national priority that we feel, as Senators from States that are highly affected, is reflected in our funding. I believe that with Senator BLUNT’s leadership on the subcommittee and with other members on the subcommittee, that is something we are going to be doing.

I happen to chair the Financial Services and General Government Appropriations Subcommittee, which appropriates the money for the high-intensity drug task forces. Our State has over 22 counties that are in that. Is that a branding that you really want—that you are a high-intensity drug trafficking area? Not really. What that does is coordinate Federal, State, and local resources to help meet the challenge and face what a difficult problem you have. I work with funding on that, with the drug-free communities, and also with the President’s Office of National Drug Control Policy. We have done a lot, and we have pushed for resources.

The Senator mentioned resources for our first responders. He mentioned how dangerous it is. There have been local stories about our first responders who have just touched fentanyl—just touched it—and have gone into overdose situations. We were at the White House yesterday and were talking, and the President mentioned drug-sniffing dogs that have had reactions to fentanyl. So this is a very lethal substance. Actually, I saw in the statistics for West Virginia that more of the recent overdose deaths are attributable to fentanyl than to heroin itself, and that is rising. We need the money for enforcement, prevention, treatment and recovery, and more resources for research, and I have mentioned how critical that research will be.

Nationwide, we had over 63,000 drug overdose deaths in 2016, and a number of these were attributed to heroin and fentanyl. In my State of West Virginia, we had the highest deaths per 100,000 for overdoses. I would like to say it is happening somewhere in which maybe we would have predicted that it would happen, but it is happening everywhere. It is happening to the children of friends of mine.

Ryan Brown, a young man in West Virginia, lost his life. He had a loving

home, loving parents, and had been through treatment. He just couldn’t fight it. He went back and injected himself with a lethal dose. He died in a very public place too. It was very tragic. To his credit, his parents have taken up the mantle for Ryan to try to get more treatment centers in the State of West Virginia. I thank them for that.

We were just at the White House—Republicans and Democrats—for the President to sign the INTERDICT Act. I sponsored that bill with Senator RUBIO, Senator MARKEY, and Senator BROWN. What it does is help give our Customs and Border Patrol folks the ability to detect fentanyl when it is coming in. We know it is coming in from across our borders, principally from China, maybe China through Mexico. We need to equip our Border Patrol agents to be able to stop that—interdict the flow of that lethal substance.

Just this week, The Hill newspaper published an op-ed about the Martinsburg Initiative. Martinsburg is in West Virginia, in the Eastern Panhandle. Everybody needs to visit Martinsburg. They have an innovative police-school-community partnership that is spearheaded by the Martinsburg Police Department, the Berkeley County Schools, and Shepherd University, along with the Washington/Baltimore HIDTA. This is a comprehensive strategy of intervention and treatment for families to help prevent the beginning of the addiction to opioids.

In December, I attended the kickoff of the Bridge of Hope Fund, and I want to highlight what some of the local communities are doing in my State to try to get a comprehensive spectrum of solutions. This is a new scholarship program that was developed by Fruth Pharmacy, which is a locally-owned, family-owned pharmacy, that will allow people who have completed addiction recovery programs to get a jump-start on their college educations and career training.

The founders of the program started it because they wanted to encourage people who have reclaimed their lives and been successful to be able to get back into the mainstream. We know one of the roadblocks to recovery is getting back into the work environment—to be able to get a job. Many of these young folks who are in this position have already burned through their education grants and their availability of Pell grants. So this Bridge of Hope scholarship is an organic, from-the-ground-up scholarship program for those who have been through treatment.

We had a young man who talked about his road to recovery and how important getting his education and getting back on his feet was. We need more everywhere. I think that is essential to all of us. We have to prioritize our Federal funding for States like mine that have been the hardest hit by the opioid epidemic.

I see my colleague from New Hampshire here. Both of us have joined to-

gether on the Targeted Opioid Formula Act so that those of us who have high statistics and greater need are able to have those funds more squarely targeted toward us for prevention and treatment.

There are a lot of good ideas out there. There are a lot of things going on, but there is a lot of tragedy around all of us. I would say to the folks in the gallery and certainly to everybody on the floor that you probably know a family or you probably know somebody who has been hard hit by this. It is absolutely crushingly sad, heartbreaking, because it is preventable. It is something on which we can have an impact. If we don’t, we are going to lose another generation.

I have great fears that we are going to look back on this moment in time and think we didn’t do enough. So I think, with Senator BLUNT’s help and the help of others, particularly with Senator BLUNT’s chairing the Appropriations Committee, this is the direction in which we need to go. We need to have more targeted funding so those local resources can be creative in order to stop the scourge, to handle the scourge, and to educate the next generation as to how devastating this could be if one were to ever begin to go down this road.

Thank you, Mr. President.

The PRESIDING OFFICER. The Senator from New Hampshire.

Mrs. SHAHEEN. Mr. President, I ask unanimous consent to speak for up to 10 minutes.

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

Mrs. SHAHEEN. Mr. President, let me applaud my colleague from West Virginia, Senator CAPITO, for her work in addressing the opioid epidemic. It is something that I know, in a bipartisan way, we care about in this Chamber, and it is one place in which I think we could come to some agreement about increasing resources as we come to an agreement on the budget for the upcoming year. So I thank the Senator for her comments.

SPECIAL COUNSEL MUELLER, DEPARTMENT OF JUSTICE, AND FBI

Mr. President, I come to the floor this morning because I believe the United States is a nation of laws. The bedrock of our democracy is the rule of law. We are blessed with a judicial system and Federal law enforcement agencies that are respected worldwide for their integrity, impartiality, and professional excellence.

As the lead Democrat on the Appropriations Subcommittee on Commerce, Justice, Science, and Related Agencies, I have a responsibility, along with my chairman, Senator SHELBY, and our colleagues, to ensure that the Department of Justice, including Federal law enforcement agencies and Federal prosecutors, have the resources they need to do their jobs. I also have a responsibility to ensure that they are independent and shielded from political interference.