

Richard Burr, Roy Blunt, Steve Daines, Mike Crapo, Mike Rounds, John Boozman, Joni Ernst, Deb Fischer.

Mr. MCCONNELL. I ask unanimous consent that the mandatory quorum calls for the cloture motions be waived.

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

MORNING BUSINESS

Mr. MCCONNELL. Mr. President, I ask unanimous consent that the Senate be in a period of morning business, with Senators permitted to speak therein for up to 10 minutes each.

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

The Senator from Ohio.

OPIOID EPIDEMIC

Mr. PORTMAN. Mr. President, we talked a little about the growing economy, and we talked about the fact that one of the weaknesses we have is, in spite of a growing economy and lower unemployment—all this good news coming with the tax cuts and tax reforms and investments—we have a problem, which is that many people are outside the workforce altogether.

Historically high levels of labor force participation are not being part of the workforce, but instead people are being sidelined. How do you get those people back to work? There are 8.5 million men between 25 and 55, as an example, who are not working. They are not showing up on the unemployment numbers because they are not looking for work.

There are a number of reasons for that. The one I think that is most significant today, that puts us at this high level of people outside the workforce, is the opioid epidemic. I am talking about the fact that we have data on this from the Federal Reserve. We have data on this from the Brookings Institute and data from the Department of Labor and the Trump administration showing this is a huge problem.

About half the people, for instance, outside the workforce altogether are taking pain medication on a regular basis. This opioid crisis is affecting us in every way. What is Congress doing about it?

We have made progress. In the last couple of years, we have made unprecedented progress to combat addiction with legislation like the Comprehensive Addiction and Recovery Act, a bipartisan bill I coauthored with my colleague Senator WHITEHOUSE. We have the 20th Century Cures Act, which has been very important in getting funding out to the States to deal with this crisis. We just passed legislation that provides more funding for the kind of treatment and prevention in longer term recovery programs that are proven to work, that have evidence-based results behind them.

That is all very important. We need to continue to push back against this addiction by helping people get the

care they need and the treatment they need to overcome their dependency.

By the way, I have been with three community roundtables in the last few weeks talking specifically about how this funding is being used. It is exciting because it is being used on innovative new ideas that will make a big difference going forward, in terms of getting people who are addicted and overdosing. We are getting them the Narcan they need to save their lives and then not allowing that gap to occur where they go back to that same environment but getting them into treatment. There are quick response teams—a combination of law enforcement, social workers, and treatment providers getting in immediately saying: OK. You overdosed. Your life was saved by this Narcan—this miracle drug that reverses the effect of the overdose. Now, instead of going back to your old community where, unfortunately, many of those people are overdosing again and again, let's get you into treatment.

One of these organizations that is funded by the Comprehensive Addiction and Recovery Act is telling me they are getting an 80-percent success rate getting people into treatment. That is huge. It is still too low, but that is so much higher, unfortunately, than what is typical out there.

So we are beginning to make progress—closing some of the gaps, getting people into the treatment they need, and sending a stronger prevention message out there, keeping people out of the funnel of addiction in the first place. But, in the meantime, we have a huge problem, and it is not getting better in my home State. It is actually getting worse.

In most areas of the State, you will now see higher rates of addiction and more overdoses, and the increase is almost all due to one thing, and that is fentanyl. This is this synthetic form of opioid that is now coming in and kind of taking over, pushing out heroin, prescription drugs, and other drugs.

Fentanyl is incredibly powerful—50 times more powerful than heroin. It is incredibly inexpensive. We are told by the experts that most of it is coming from China—not over land from Mexico but from China—through our U.S. mail system. It is unbelievable. It is a shock, but it is true. It is so potent that a few flakes of it can be deadly. It is totally unacceptable that in some laboratory in China, some evil scientist is making this poison and being allowed to ship it into our country.

It is now the No. 1 cause of death in my home State. Two-thirds of our overdose deaths last year, we believe, are going to be as a result of fentanyl, not heroin or prescription drugs. It is tragic and eye-opening that, when you look at what has happened, the Ohio Alliance for Innovation in Population Health has estimated that opioid overdoses were responsible for more than 500,000 years of life expectancy lost in Ohio between 2010 and 2016. It is

an interesting way to look at it. It is tragic. More than 500,000 years of life expectancy were lost in Ohio between 2010 and the end of 2016.

Overdoses are now the top cause of deaths for all Americans over the age of 50. It is the top cause of death in my home State for everybody.

Increasingly, these drug overdoses are from fentanyl. In Ohio, two-thirds of overdose deaths last year were from fentanyl. That is up from about 58 percent in 2016. It is the deadliest, most difficult drug for us to deal with right now.

Two weeks ago, the police in Dayton, OH, seized about 20 pounds of fentanyl during a drug arrest. Last Friday, Federal agents in Columbus arrested 4 people and seized 22 pounds of fentanyl. Taken together, these two busts—20 pounds and 22 pounds of fentanyl—is enough fentanyl to kill 9.5 million people. Think about that. By the way, that is about 80 percent of the population in my State of Ohio, from just these two busts alone.

On Monday we had a tele-townhall here. We do these on a monthly basis. We asked a number of questions. One question I have started to ask in the last several years is this: Do you know anybody who has been directly affected by the opioid epidemic?

We had the highest percentage of response ever at our townhall meeting here on Monday. The tele-townhall response was that 67 percent of the people on the call said yes. Over two-thirds of the people on this call said that yes, they knew someone who has been directly affected by the opioid epidemic. That is the highest level we have had.

One woman I spoke to on the call, Pauline from Zanesville, OH, told me a tragic story that is, unfortunately, similar to other ones I hear as I travel across the State. It was about her brother. Her brother had died of an overdose. Her brother, according to her, did not use opioids, and yet he died of an opioid overdose. She said he did smoke marijuana, but she said somehow there was something put into the marijuana that he was smoking that caused him to overdose and die.

I hear this story a lot back home. I talked about the three roundtable discussions we had recently in Ohio. In two of those three roundtables, a police chief and a sheriff, respectively, told me about a young man who overdosed, who was saved by Narcan, and then woke up and said: I was just smoking dope. Well, they checked, and guess what it was? It was fentanyl that had been sprinkled into the marijuana.

I am sure it is the same situation with Pauline's brother. The fentanyl that she talked about was what killed him.

What is the lesson here? It is that every street drug—whether it is cocaine, whether it is heroin, whether it is crystal meth—all of them are now subject to having fentanyl included within them, including description

pills, because sometimes they are reformulated to make it look like prescription pills.

That fentanyl is the killer. It is not that those other drugs can't cause you to overdose and die also, but with regard to fentanyl, that is the deadliest and riskiest of all. Any of these street drugs can be deadly. We need to combat this drug influx of fentanyl, and Congress has had a breakthrough recently in a way to do that.

I mentioned that it primarily comes from China, and it primarily comes through our U.S. postal system. The STOP Act, which is bipartisan legislation that I authored with my colleague AMY KLOBUCHAR from Minnesota—I see her colleague is on the floor now—will combat fentanyl at the source by closing a loophole that is currently in place in the Federal law.

After 9/11, we insisted that all of the private carriers—FedEx, UPS, DHL—had to give law enforcement information about every package that comes into America. This was after 9/11, remember. We asked the post office to study it, and we asked the Postmaster General to get together with the Homeland Security people and to come up with an answer. That was 16 years ago, and it hasn't happened.

Even though you send something by one of these private carriers, like FedEx, you have to provide this information up front: What is in the package? Where is it from? Where is it going?

Electronically, law enforcement takes that big data and decides what packages should be taken offline. They have been able to stop a lot of bad stuff, including fentanyl, from coming through. The post office doesn't require that because we haven't required it here in the Congress. It is time for us to do that.

I am pleased to tell you that after a few years of work, last week the House of Representatives passed the STOP Act by a vote of 353 to 52. The appropriate committee here in the Senate that has jurisdiction, the Finance Committee, also agreed to discharge the STOP Act recently. So now we can vote on it in the full Senate and get it to the President's desk to be signed into law.

As we developed the STOP Act, we conducted an 18-month investigation into this in the Permanent Subcommittee on Investigations, which I chair. We revealed just how easy it was to purchase fentanyl online and have it shipped to the United States.

Based on our undercover investigation, these drugs could be found through a simple Google search. Overseas sellers accessed through an undercover investigator, essentially guaranteed delivery if fentanyl was sent through the U.S. Postal Service, not if it was sent through one of the private carriers.

Traffickers prefer the Postal Service because it doesn't have the screening that you have through the private car-

riers. So we need to be sure that the requirement is met with the advanced electronic data that is on all of the packages coming in. It tells law enforcement that they need to be able to use big data to identify suspicious packages and to keep this poison from coming into our communities.

That law is something we can do right now. The post office would say: Well, we are beginning to provide that information. Unfortunately, based on their testimony before my subcommittee, even with the pressure from us over the last couple of years, only 36 percent of packages are getting screened, and 20 percent of those aren't presented to law enforcement, based on their testimony. Also, some of the information is not helpful because it is not legible.

We need better data. We need to get 100 percent of the packages subject to this data. We need to be sure we can do a better job of, one, stopping the poison from coming into our country, into our communities, into our homes, but also, at the very least, increasing the cost of this. By reducing the supply, we can increase the cost.

One of the reasons fentanyl is growing so much is because it is so incredibly powerful, but, also, it is so incredibly inexpensive.

Let's have a vote on the STOP Act in the Senate as soon as possible. I think we can do it next month. Let's get it to the President. Let's get it signed into law. There is an urgency here.

As I mentioned, in just 7 years, in my home State, Ohioans have lost an estimated half million years of life expectancy as a result of opioid overdoses.

The impact is far greater than that, though. There are families who are broken apart. Prisons are flooded. Businesses are deplete of workers because of this addiction. We talked about this earlier. There is a lack of workforce because of this addiction.

The STOP Act will allow our country to push back against this international influx of fentanyl and will help our economy continue this positive momentum we have been experiencing since tax reform became law. We can do so by combating this newest and deadliest scourge of the opioid epidemic.

Thank you, Mr. President.

I yield back my time.

The PRESIDING OFFICER. The Senator from Minnesota.

WOMEN'S HEALTHCARE

Ms. SMITH. Mr. President, I am proud to join my colleagues today in recognizing the anniversary of a landmark Supreme Court decision, *Whole Woman's Health v. Hellerstedt*.

Before I talk about that decision, I want to talk today about Justice Anthony Kennedy's retirement. This is a pivotal moment in our country. With Justice Kennedy's retirement announcement today, the stakes have never been higher for making sure we

choose a Supreme Court Justice committed to the Constitution and to protecting the most fundamental rights of Americans—the right to vote, the ability to organize, and a woman's right to choose.

Whomever replaces Justice Kennedy will, no doubt, have a say on issues that affect the lives of every American—issues such as the healthcare system, our elections, and the health of our environment.

In February of 2016, some 9 months before the 2016 election, Majority Leader MITCH MCCONNELL issued a statement saying: "The American people should have a voice in the selection of our next Supreme Court Justice." He kept his word. He didn't hold a hearing or a vote on President Obama's nominee, Merrick Garland, during that election year.

I believe Republicans should be held to the same standard they set themselves. The Senate has a constitutional duty to provide advice and consent. We are a little more than 4 months away from an election that will decide the balance of the Senate. So let us let the American people decide who provides that advice and consent, especially given the close balance of the Senate as it stands today.

Back to the *Whole Woman's Health* decision, 2 years ago today, the Court reaffirmed that women have a constitutional right to make their own decisions about their reproductive health and family planning. The Court found that this fundamental right could not be unduly burdened with regulatory restrictions and requirements by the State or Federal Government. This was just one in a long line of Supreme Court decisions that affirm a woman's right to make personal, private decisions about her healthcare and family planning.

Whole Woman's Health recognized that in order to protect women's constitutional rights, it is not enough that abortion services are theoretically available. They must also be practically accessible.

It is especially important to recognize the anniversary of this important decision today because just yesterday the Supreme Court issued another decision, one that, unfortunately, threatens to make it harder for women to receive reliable and accurate information about the full range of their reproductive healthcare options.

As a U.S. Senator but also as a woman who served as a volunteer for Planned Parenthood and then as an executive for Planned Parenthood in North Dakota and South Dakota, I know that the right to access safe and reliable reproductive healthcare has a profound impact on women's lives.

Women cannot have economic security if they do not have the freedom to decide when and how to raise a family. This deeply personal decision influences women's choices about whether to go to school, buy a home, or start a new business. I trust women to make