sound, but also the challenges with getting priced out of paradise. Like many "kama aina," "residents," Iam and his family were forced to move to the Mainland because of Hawaii's high cost of living.

I have shared this with many of my colleagues here: Our children like Iam have become our greatest exports. That is not "pono"; that is not "right." We must make Hawaii more affordable so that families like Iam's don't have to leave their home.

Iam's music, his story, and his spirit have inspired millions of Americans across this country. Hawaii is so proud of him. Wherever he goes, I hope he knows Hawaii will always be his home and his "ohana" "family."

# HAPPY BIRTHDAY AND FAREWELL TO SAM WEST

(Mr. KELLY of Pennsylvania asked and was given permission to address the House for 1 minute.)

Mr. KELLY of Pennsylvania. Madam Speaker, today I wish one of the members of my team, Sam West, a very happy birthday but also farewell.

Sam is originally from Indianapolis. He went to school at Indiana University and Purdue University, so he is both a Hoosier and a Boilermaker. He worked as an auto technician before coming to work here in Congress.

In healthcare there are a million acronyms. I don't know of any other place in the world than D.C. that uses more acronyms, and nobody seems to know what they stand for.

It is because of Sam's time working on automobiles that allowed us to see eye-to-eye on so many things. I spent my entire career in the private sector as an auto dealer, and Sam has always been able to translate a lot of Pennsylvania's healthcare priorities into terms that I have been using my whole life, and it just clicked. We really worked well together.

He is moving over to the Senate to be a health policy adviser for Senator BILL CASSIDY. I know he is going to do a great job.

Sam, I tell people all the time, it is not so much the Member that matters, it is the staff. Here is Sam with a couple of his cheerleader friends, Indianapolis Colts cheerleaders. Wherever he goes, he will always be a part of our team, and he is always going to have great fans.

# JOE BURDICK PROMOTES PATRIOTISM

(Mr. MILLER of Ohio asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. MILLER of Ohio. Madam Speaker, I rise today to highlight a hero of Ohio's Seventh District, Navy veteran Joe Burdick. Joe promotes patriotism by hand-carving wooden American flars

Like Americans themselves, each of Joe's flags is unique. They are imperfectly perfect, complete with knots, dings, and rings, yet each is beautiful in its own way.

From the strength and sacrifice of Old Glory red to the pure innocence of the white, the flag represents sacrifice, independence, and hope. Joe captures these qualities in his art.

The flag is an integral symbol of our Nation, and Joe and I agree that desecrating the American flag is not a legitimate act of protest. Doing so tramples on the service and sacrifice of millions who have defended and still defend the values it stands for.

I thank Joe for using his talent for patriotism. I urge all Americans to follow his example by always treating our flag with the solemn reverence it deserves

PROVIDING FOR CONSIDERATION OF H.R. 467, HALT ALL LETHAL ofTRAFFICKING FENTANYL ACT: PROVIDING FOR CONSIDER-ATION OF S.J. RES. 11, PRO-VIDING FOR CONGRESSIONAL DISAPPROVAL OF THE RULE SUBMITTED BY THE ENVIRON-MENTAL PROTECTION AGENCY RELATING TO "CONTROL OF AIR POLLUTION FROM NEW MOTOR VEHICLES: HEAVY-DUTY ENGINE AND VEHICLE STANDARDS"; AND PROVIDING FOR CONSIDERATION OF H.J. RES. 45, PROVIDING FOR CONGRESSIONAL DISAPPROVAL OF THE RULE SUBMITTED BY THE DEPARTMENT OF EDU-CATION RELATING TO "WAIVERS AND MODIFICATIONS OF FED-ERAL STUDENT LOANS"

Mr. BURGESS. Madam Speaker, by direction of the Committee on Rules, I call up House Resolution 429 and ask for its immediate consideration.

The Clerk read the resolution, as follows:

### H. RES. 429

Resolved, That at any time after adoption of this resolution the Speaker may, pursuant to clause 2(b) of rule XVIII, declare the House resolved into the Committee of the Whole House on the state of the Union for consideration of the bill (H.R. 467) to amend the Controlled Substances Act with respect to the scheduling of fentanyl-related substances, and for other purposes. The first reading of the bill shall be dispensed with. All points of order against consideration of the bill are waived. General debate shall be confined to the bill and amendments specified in this section and shall not exceed one hour equally divided and controlled by the chair and ranking minority member of the Committee on Energy and Commerce or their respective designees. After general debate the bill shall be considered for amendment under the five-minute rule. The amendment in the nature of a substitute recommended by the Committee on Energy and Commerce now printed in the bill shall be considered as adopted in the House and in the Committee of the Whole. The bill, as amended, shall be considered as the original bill for the purpose of further amendment under the five-minute rule and shall be considered as read. All points of order against provisions in the bill, as amended, are waived. No further amendment to the bill, as

amended, shall be in order except those printed in the report of the Committee on Rules accompanying this resolution. Each such further amendment may be offered only in the order printed in the report, may be offered only by a Member designated in the report, shall be considered as read, shall be debatable for the time specified in the report equally divided and controlled by the proponent and an opponent, shall not be subject to amendment, and shall not be subject to a demand for division of the question in the House or in the Committee of the Whole. All points of order against such further amendments are waived. At the conclusion of consideration of the bill for amendment the Committee shall rise and report the bill, as amended, to the House with such further amendments as may have been adopted. The previous question shall be considered as ordered on the bill, as amended, and on any further amendment thereto to final passage without intervening motion except one motion to recommit.

SEC. 2. Upon adoption of this resolution it shall be in order to consider in the House the joint resolution (S.J. Res. 11) providing for congressional disapproval under chapter 8 of title 5, United States Code, of the rule submitted by the Environmental Protection Agency relating to "Control of Air Pollution From New Motor Vehicles: Heavy-Duty Engine and Vehicle Standards". All points of order against consideration of the joint resolution are waived. The joint resolution shall be considered as read. All points of order against provisions in the joint resolution are waived. The previous question shall be considered as ordered on the joint resolution and on any amendment thereto to final passage without intervening motion except: (1) one hour of debate equally divided and controlled by the chair and ranking minority member of the Committee on Energy and Commerce or their respective designees; and (2) one motion to commit.

SEC. 3. Upon adoption of this resolution it shall be in order to consider in the House the joint resolution (H.J. Res. 45) providing for congressional disapproval under chapter 8 of title 5, United States Code, of the rule submitted by the Department of Education relating to "Waivers and Modifications of Federal Student Loans". All points of order against consideration of the joint resolution are waived. The joint resolution shall be considered as read. All points of order against provisions in the joint resolution are waived. The previous question shall be considered as ordered on the joint resolution and on any amendment thereto to final passage without intervening motion except: (1) one hour of debate equally divided and controlled by the chair and ranking minority member of the Committee on Education and the Workforce or their respective designees; and (2) one motion to recommit.

The SPEAKER pro tempore (Mrs. Wagner). The gentleman from Texas is recognized for 1 hour.

Mr. BURGESS. Madam Speaker, for the purpose of debate only, I yield the customary 30 minutes to the gentle-woman from New Mexico (Ms. Leger Fernandez), pending which I yield myself such time as I may consume. During consideration of this resolution, all time yielded is for the purpose of debate only.

## GENERAL LEAVE

Mr. BURGESS. Madam Speaker, I ask unanimous consent that all Members may have 5 legislative days in which to revise and extend their remarks.

The SPEAKER pro tempore. Is there objection to the request of the gentleman from Texas?

There was no objection.

Mr. BURGESS. Madam Speaker, I yield myself such time as I may consume.

Madam Speaker, last night the Rules Committee met and reported a rule, House Resolution 429, providing for consideration of three measures: H.J. Res. 45, H.R. 467, and S.J. Res. 11.

The rule provides for consideration of H.R. 467 under a structured rule, with 1 hour of debate equally divided and controlled by the chair and ranking minority member of the Energy and Commerce Committee or their designees and provides one motion to recommit.

The rule further provides for consideration of H.J. Res. 45 and S.J. Res. 11 under closed rules, with 1 hour of debate equally divided and controlled by the chair and ranking minority member of the committee of jurisdiction or to their designees.

Finally, the rule provides one motion to commit for S.J. Res. 11 and one motion to recommit for H.J. Res. 45.

Madam Speaker, I rise today to speak in support of the rule and the underlying legislation. Included within the measure is H.R. 467, the HALT Fentanyl Act. It is important to say that the HALT Fentanyl Act makes great strides in addressing the growing fentanyl crisis in our country. By making permanent the scheduling of fentanyl-related analogs in the schedule I category, in addition to giving researchers the ability to conduct studies on these substances, we can begin to repair the damage that this drug has inflicted on our communities and our Nation.

I spent almost three decades practicing as a physician. I have witnessed and heard so many devastating stories of the consequences of this crisis which we now face. We face it in north Texas; we face it across the country.

Between September and March, nearly a dozen teens spread across three schools in Carrollton, Texas, were injured because of fentanyl poisoning. In fact, three of those poisonings were fatal. One death is too many, and we must equip our communities to address this issue from the source.

The Committee on Energy and Commerce has a long history of producing bipartisan policies to actually address the opioid crisis in this country. The SUPPORT for Patients and Communities Act, known as the SUPPORT Act of 2018, was a product of our committee, and it made reforms to the way we administer programs to control and respond to and better treat individuals who have a problem with opioids.

However, the landscape has drastically changed. It is now a different disease than what it was in 2018, so we have gone from diversion of prescription opioids to the manufacture and importation of illicit fentanyl, products that are created in the People's Republic of China in their base form,

exported to Mexico, imported by cartels, and poisoning our children.

We need to better understand the effects of fentanyl and fentanyl-related substances to better treat patients suffering from exposure. The HALT Fentanyl Act will improve regulations to encourage research so we can better understand the impacts of fentanyl on human health.

Our recent bipartisan mental health package passed in the Energy and Commerce Committee worked on several provisions that would relax regulations to expand access to evidence-based treatment programs and ease restrictions on treatment options for substance use care.

Finally, the HALT Fentanyl Act will ensure that law enforcement officers have the tools to prosecute cases relating to fentanyl and fentanyl-related substances. Due to the crisis at our southern border, illicit fentanyl remains an imminent threat throughout the country. At a time when people are dying at alarming rates from fentanyl poisoning, this legislation is an absolute necessity to counteract this crisis and save our young American lives.

### □ 1230

Madam Speaker, also included in this package is a provision that would repeal a continuation of President Biden's war on affordable energy and consumer choice.

S.J. Res 11 would be instrumental in protecting American families who would suffer from additional costs passed along to them and ensure that they, the American public, are able to select vehicles that best fit their needs rather than functionaries in the administration in a far-removed Washington, D.C.

If not for our Republican majority, Madam Speaker, President Biden could continue to act unilaterally to enact his radical Green New Deal agenda. Thankfully, the American public saw fit to entrust Republicans with the majority in the people's House to prevent President Biden and Democrats from acting upon their worst impulses.

Once again, Democrats have seen fit to attack a vital component of our Nation's economy. Why Democrats would want to make more difficult the lives of those who deliver our food and our goods to our grocery stores and our homes, and the fuel to our gas stations, I do not know.

Madam Speaker, what I do know is that every American owes these hardworking men and women a tremendous debt of gratitude that we will not soon be able to repay.

Madam Speaker, in 2021, trucks moved close to 11 billion tons of freight across America. That is over 70 percent of the cargo shipped in the continental United States.

During the COVID-19 pandemic, some were sitting in the comfort of their homes while dozens of Amazon packages were dropped at their doorsteps. That was only because of these long-

haul drivers who traverse our Nation daily, ensuring our communities are supplied with goods that allow Americans to enjoy a high standard of living and literally preventing American families from starving during the pandemic.

So it is bewildering, Madam Speaker, that Democrats have decided to reward the courage and perseverance of long-haul truckers with onerous and expensive new regulations that will have a devastating effect upon their livelihoods.

Madam Speaker, implementing these new regulations and standards will burden truck drivers with as much as \$8,000 per driver in new costs when it comes time to retire their current vehicles.

Democrats pride themselves on being advocates of the little guy, the downtrodden, but I would ask you, Madam Speaker, how is forcing Americans already suffering from the sky-high inflation brought to us by the Biden administration, saddling them with an additional \$8,000 from their hard-earned dollars, how is that lightening their burden? Madam Speaker, simply, it does not.

Once again, President Biden and members of the Democratic Party are so single-minded in their pursuit of this Green New Deal agenda that they are blind to the obvious collateral damage that their policies are inflicting. Thankfully, our Republican majority will be able to deliver tangible relief by repealing this counterproductive and misguided executive action.

Madam Speaker, today, we are also considering H.J. Res. 45 to formally disapprove of the authority the administration claims it has to unilaterally forgive student loans.

In August 2022, the Biden administration announced a plan to cancel student debt up to \$20,000 for Pell grant recipients and up to \$10,000 for non-Pell grant recipients for those making under \$125,000 a year.

Madam Speaker, on May 11, 2023, 2 weeks ago, a glorious day, the public health emergency came to an end. Americans are back to work. They are back to school. They are returning to normal life.

The Biden administration is attempting to claim authority for this \$315 billion student loan forgiveness through the COVID-19 national emergency status and the Higher Education Relief Opportunities for Students Act, the so-called HEROES Act of 2003. This 2003 law provided temporary relief to military members during their deployment following 9/11. This is a twisted interpretation of a bill that compensated our Nation's servicemen and -women for their heroic efforts after the Nation was attacked on 9/11.

The bottom line is this is quite likely unconstitutional. It is an overreach of executive authority and would not make student debt disappear. It would instead unfairly shift the burden of

student loans to the 87 percent of Americans who did not take out such loans.

Madam Speaker, this is an important rule to consider these important bills.

Madam Speaker, I reserve the balance of my time.

Ms. LEGER FERNANDEZ. Madam Speaker, I thank Mr. Burgess for yielding me the customary 30 minutes, and I yield myself such time as I may consume.

Madam Speaker, today while we stand here debating this rule, the Republicans' default on America's plan is holding Americans hostage.

Across my district and this country, Americans are wondering what will happen to their food security. How about their Medicare? What about veterans' healthcare? Republicans are holding us hostage so they can protect the tax cuts that they gave to the wealthiest corporations and millionaires.

We need to remember that the debt we are looking at today was incurred by Republicans during the Trump administration, \$7 trillion of that.

Do you know what? If they crash the economy, it is not the millionaires who would be hurt. It is working families.

The Republican default on America would impact the very bills we will be talking about today. It would cut funding to fight the fentanyl crisis, treat addiction, reduce pollution, and help Americans pay their bills when a pandemic hits.

The rule we are considering today will make in order three bills.

The first bill is H.R. 467, the HALT Fentanyl Act. We all agree that there is a scourge of fentanyl in our communities, and we all agree it needs to be stopped. There is no district in our country, no family, and no community that hasn't seen and experienced the horrors of fentanyl.

The problem is that this bill isn't going to do what needs to be done to address the fentanyl crisis. To fight the fentanyl crisis, we need more law enforcement funding, and we need to treat addiction.

Right now, as noted, fentanyl-related substances are listed on schedule I. That listing goes to the end of 2024. The main thrust of this bill is to make that listing permanent, but our communities are pleading with us to do more than the status quo.

For decades, we tried to incarcerate our way out of addiction, but addiction is a disease, not a crime.

Madam Speaker, I am speaking from the heart. I know most of my colleagues on this floor have heard that I lost two brothers to addiction, two beautiful souls that were taken from this world far too soon. It was partially because there was no treatment available.

This country has failed to treat addiction as the health crisis that it is, so I know personally the pain that fentanyl brings to our families and our communities because I felt that pain when my brothers passed away.

Treatment for addiction can save precious lives, but we lack the capacity to provide those services. Instead, the default on America plan that their crisis is creating would cut funding for mental health and addiction treatment services.

H.R. 467 would also expand mandatory minimums, which takes away discretion from judges to look at each case on its own, which disproportionately harms Black and Brown communities more than others.

Last night in the Rules Committee, Republicans rejected 37 Democratic amendments that would have added more law enforcement funding to interdict fentanyl at border crossings. They would have provided more evidence-based approaches to fentanyl use. They would have made sure that we had the tools we needed to treat addiction.

Instead of creating and finding solutions, Republicans are creating more problems. The Republicans' default on America act will cut funding for Customs and Border Protection, potentially leading to an increase in the amount of fentanyl hitting our streets.

Is this their way of addressing the fentanyl crisis?

We need to do better. We need to make sure we give real solutions to these very serious problems.

Madam Speaker, I am tired of hearing that Democrats are to blame for the fentanyl crisis. We all recognize the need to do more.

Let me remind my colleagues that in the last 2 years, the Biden administration has seized record amounts of illicit fentanyl at the border.

DHS has seized more than 35,000 pounds of fentanyl in fiscal year 2022.

The Department of Justice disrupted or dismantled 130 fentanyl networks.

The administration is expanding access to treatments for those suffering from addictions.

Democrats in Congress filed a funding bill last year that beefed up resources for the High Intensity Drug Trafficking Areas Program, the National Guard counter-drug program, and the Drug Communities Program.

Contrast that with the Trump administration. A GAO report blasted the previous administration for failing to come up with a coherent national opioid strategy, and the crisis spiked. In the first 2 years of the Trump administration, we saw significant spikes in the fentanyl crisis, and more people died.

According to the CDC, the annual number of overdose deaths from synthetic opioids increased by 192 percent between 2016 and 2020.

In contrast, since day one of this administration, President Biden has provided solutions to the overdose crisis.

Madam Speaker, I ask unanimous consent to include in the RECORD the December 2019 GAO report: "The Office of National Drug Control Policy Should Develop Key Planning Elements to Meet Statutory Requirements."

The SPEAKER pro tempore. Is there objection to the request of the gentlewoman from New Mexico?

There was no objection.

[From the United States Government Accountability Office, Dec. 2019]

THE OFFICE OF NATIONAL DRUG CONTROL POLICY SHOULD DEVELOP KEY PLANNING ELEMENTS TO MEET STATUTORY REQUIREMENTS

WHY GAO DID THIS STUDY

Almost 70,000 people died from drug overdoses in 2018, according to the latest Centers for Disease Control and Prevention data. The 2018 SUPPORT Act reauthorized ONDCP and imposed new requirements. GAO noted in its March 2019 High Risk report that the federal effort to prevent drug misuse is an emerging issue requiring close attention.

Pursuant to 21 U.S.C. §1708a(b), GAO has periodically assessed ONDCP's programs and operations. This report assesses the extent to which ONDCP (1) met selected statutory requirements related to the National Drug Control Strategy in 2017, 2018, and 2019, and (2) has planned or implemented actions to meet selected new requirements in the SUP-PORT Act. GAO assessed the 2019 Strategy and companion documents against four key statutory requirements that were consistent with or similar to ONDCP's ongoing responsibilities under the SUPPORT Act. GAO also assessed ONDCP's progress in addressing seven new SUPPORT Act requirements, and interviewed ONDCP officials.

#### WHAT GAO RECOMMENDS

GAO is making 4 recommendations to ONDCP to develop, document, and implement key planning elements to meet certain requirements in the SUPPORT Act. ONDCP agreed to implement 2 recommendations related to the Strategy, but disagreed with 2 related to the Drug Control Data Dashboard, noting that recent updates satisfy the law. GAO maintains that they do not fully do so, and that implementing key planning elements would help address the law, as discussed in the report.

### WHAT GAO FOUND

The Office of National Drug Control Policy (ONDCP) is responsible for overseeing and coordinating the development and implementation of U.S. drug control policy across the federal government. However, ONDCP did not issue a National Drug Control Strategy for either 2017 or 2018, as required by statute. ONDCP was also required to assess and certify federal agencies' drug control budgets to determine if they were adequate to meet Strategy goals and objectives. Without a Strategy in 2017 and 2018. ONDCP could not complete this process according to statutory requirements. ONDCP issued a 2019 Strategy and companion documents that addressed some but not all of the selected statutory requirements GAO reviewed. For example, the Strategy and companion documents did not include the required 5-year projection for budget priorities.

The October 2018 Substance Use-Disorder Prevention that Promotes Opioid Recovery and Treatment for Patients and Communities Act (SUPPORT Act) retained some requirements and introduced new ones for ONDCP. ONDCP met some SUPPORT Act requirements GAO reviewed. For example, ONDCP filled all five coordinator positions described in the SUPPORT Act. However, its approach to meeting other requirements does not incorporate key planning elements. For example, the SUPPORT Act requires that future iterations of the Strategy include a description of how each goal will be achieved, performance evaluation plans, and a plan for expanding treatment of substance use disorders. ONDCP could not provide in

writing or otherwise describe its planned steps, interim milestones, resource investments, or overall timeframes-all key planning elements-that would provide assurance it can meet these requirements by the deadline for the next Strategy-February 2020. The SUPPORT Act also required ONDCP to publish an online searchable Data Dashboard of drug control data, with information including quantities of drugs and frequency of their use. While ONDCP published (and later updated) a public version of this resource on its website, as of December 2019, it was not complete (e.g., lacked required data on the unmet need for substance use disorder treatment). Further, ONDCP officials had no information on next steps for fully meeting the requirements. Developing, documenting, and implementing key planning elements to meet these requirements—including resource investments, time frames, and any processes. policies, roles, and responsibilities—would be consistent with key principles for achieving an entity's objective and standards for project management. Importantly, doing so would help ONDCP structure its planning efforts and comply with the law.

DECEMBER 18, 2019.

Congressional Addressees:

The scale and impact of illicit drug use and prescription drug misuse has profoundly affected individuals, their families, and the communities in which they live, and continues to represent a significant threat to public health. Almost 70,000 people died from drug overdoses in 2018, a 27 percent increase in deaths since 2015, according to the latest, preliminary data from the Centers for Disease Control and Prevention. Since 2011, these deaths have also outnumbered injury deaths by firearms, motor vehicle crashes suicide, and homicide, according to the Drug Enforcement Administration. Opioids-particularly highly potent synthetic opioids like fentanyl that are manufactured to mimic naturally occurring opioids such as morphine-are currently the main driver of these deaths. Primarily due to increasing rates of opioid-related deaths and opioid use disorder, the then-acting secretary of the Department of Health and Human Services (HHS) declared the opioid crisis a public health emergency on October 26, 2017. Overdose deaths due to other potentially dandrugs-including and gerous cocaine methamphetamines—have also increased in recent years.

The Office of National Drug Control Policy (ONDCP), within the Executive Office of the President, is responsible for coordinating and overseeing the implementation of national drug control policy, including the National Drug Control Strategy, across the federal government, ONDCP is also responsible for evaluating the effectiveness of national drug control policy efforts by developing and applying specific goals and performance measurements and monitoring certain agencies' program-level spending. According to the President's fiscal year 2020 budget, federal drug control funding for fiscal year 2018 was \$33 billion. Federal drug control efforts span a range of activities across multiple agencies-known as National Drug Control Program agencies-including efforts to prevent illicit drug use and prescription drug misuse, treat drug use disorders, enforce drug laws, and stop the importation of illicit drugs into the United States. As part of overseeing and coordinating these efforts, the Director of ONDCP is required to promulgate a National Drug Control Strategy and assess and certify the adequacy of the annual drug control budgets submitted by National Drug Control Program agencies.

ONDCP was established by the Anti-Drug Abuse Act of 1988, and, until 2018, was most

recently reauthorized by the Office of National Drug Control Policy Reauthorization Act of 2006 (ONDCP Reauthorization Act of 2006). The ONDCP Reauthorization Act of 2006 reauthorized ONDCP through September 30, 2010. After that date, ONDCP continued to operate under the provisions of the ONDCP Reauthorization Act of 2006 pursuant to continued funding in annual appropriations acts. In October 2018, the Substance Use-Disorder Prevention that Promotes Opioid Recovery and Treatment for Patients and Communities Act (SUPPORT Act), among other things, reauthorized ONDCP and amended its authorities. In particular, the SUPPORT Act continues to require the ONDCP Director to promulgate the National Drug Control Strategy, and also includes a number of detailed new requirements for its content and development. For example, the Strategy is required to include a performance evaluation plan for each long-range goal in the Strategy for each National Drug Control Program agency. Furthermore, the SUPPORT Act includes other new requirements, such as the creation of a publicly accessible Drug Control Data Dashboard that captures an array of drug related data.

Pursuant to 2I U.S.C. §1708a(b), we have periodically assessed ONDCP's programs and operations. This report assesses the extent to which (1) ONDCP met selected statutory requirements related to the National Drug Control Strategy for 2017, 2018, and 2019, and (2) ONDCP has planned or implemented actions to meet selected new requirements of the SUPPORT Act. In March and May 2019, we provided testimony on our preliminary findings regarding the extent to which ONDCP's 2019 National Drug Control Strategy met selected statutory requirements.

To assess the extent to which ONDCP met selected statutory requirements related to the Strategy for 2017, 2018, and 2019, we reviewed the current National Drug Control Strategy and three associated companion documents that ONDCP stated are intended to fulfill their statutory requirements, and assessed these documents against selected provisions of the ONDCP Reauthorization Act of 2006. ONDCP officials told us that they began preparing the current National Drug Control Strategy, which they issued on January 31, 2019, in early 2018—prior to the enactment of the SUPPORT Act in October 2018. Officials stated that they intended for the 2019 National Drug Control Strategy to respond to the requirements of the ONDCP Reauthorization Act of 2006 because this was the applicable law at the time that they began drafting the Strategy. In light of ONDCP's stated approach, we based our analvsis of the 2019 Strategy and companion documents on requirements in the ONDCP Reauthorization Act of 2006, focusing on the same four provisions we discussed in our March and May 2019 testimonies. These four requirements were that the National Drug Control Strategy must contain (1) annual and quantifiable objectives and targets, (2) a 5-year projection for program and budget priorities, (3) specific drug trend assessments, and (4) a description of a performance measurement system. We selected these four provisions from the ONDCP Reauthorization Act of 2006 because we determined them to be related to aspects of ONDCP's role in (a) setting a strategic direction to oversee and coordinate national drug control policy and (b) ensuring a framework for measuring results. We also selected these provisions because they were consistent with or similar to ONDCP's ongoing responsibilities under the SUPPORT Act, which is the governing statute for future iterations of the National Drug Control Strategy. In addition to our analysis of the 2019 Strategy, we interviewed ONDCP officials about their activities and responsibilities in overseeing and coordinating national drug control policy.

To assess the extent to which ONDCP has planned or implemented actions to meet selected new requirements in the SUPPORT Act, we reviewed the SUPPORT Act and the ONDCP Reauthorization Act of 2006 to identify requirements from the SUPPORT Act that were relevant to ONDCP and excluded, for example, requirements for other federal agencies. Due to the large number of requirements in the SUPPORT Act, we focused on those that were new and notably different from the ONDCP Reauthorization Act of 2006. Based on this review, we selected seven requirements to examine. Specifically, we selected two requirements to designate officials to fill new coordinator positions-the performance budget coordinator and the emerging and continuing threats coordinator; four requirements for new elements to be included in the National Drug Control Strategy, such as a performance evaluation plan for each long-range goal in the Strategy: and one requirement to establish and maintain a drug control data dashboard. We then assessed relevant documents and information gathered during interviews ONDCP officials about any efforts they had taken to address selected requirements and compared these against the relevant statute and Standards for Internal Control in the Federal Government related to defining and establishing an entity's objectives.

To provide additional context for both of our objectives, we also interviewed officials from three National Drug Control Program agencies-HHS, the Department of Justice (DOJ), and the Department of Homeland Security (DHS)-about their views on and contributions to ONDCP's development and implementation of the 2019 National Drug Control Strategy. We also interviewed these officials about their agencies' and components' engagement with ONDCP during the 2017, 2018, and 2019 budget certification process. We selected these agencies because they received the largest share of 2018 drug control funding. For each agency, we interviewed headquarters officials who had responsibilities related to drug control policy and annual drug control budget submissions. We also selected and interviewed officials from one component from each agency-the Substance Abuse and Mental Health Services Administration from HHS, the Drug Enforcement Administration from DOJ, and U.S. Customs and Border Protection from DHS. We chose these components because of their drug control program responsibilities and their share of the 2018 drug control funding. The information collected from these interviews is not generalizable to all National Drug Control Program agencies but provides perspective on their experiences.

We conducted this performance audit from September 2018 to December 2019 in accordance with generally accepted government auditing standards. Those standards require that we plan and perform the audit to obtain sufficient, appropriate evidence to provide a reasonable basis for our findings and conclusions based on our audit objectives. We believe that the evidence obtained provides a reasonable basis for our findings and conclusions based on our audit objectives.

### BACKGROUND—ONDCP'S RESPONSIBILITIES

ONDCP was established by the Anti-Drug Abuse Act of 1988 as a component of the Executive Office of the President, and its Director is to assist the President in the establishment of policies, goals, objectives, and priorities for the National Drug Control Program. ONDCP is responsible for (1) leading the national drug control effort, (2) coordinating and overseeing the implementation of national drug control policy, (3) assessing

and certifying the adequacy of National Drug Control Programs and the budget for those programs, and (4) evaluating the effectiveness of national drug control policy efforts. About a dozen National Drug Control Program agencies, as identified by ONDCP, have responsibilities for drug prevention, treatment, and law enforcement activities.

DEVELOPING THE NATIONAL DRUG CONTROL STRATEGY

Among other responsibilities, the Director of ONDCP is required to develop and promulgate the National Drug Control Strategy. The National Drug Control Drug Control Strategy is to set forth a comprehensive plan to reduce illicit drug use and the consequences of such illicit drug use in the United States by limiting the availability of and reducing the demand for illegal drugs. Many of the SUPPORT Act's requirements for the National Drug Control Strategy are the same as, or similar to, those that applied under the ONDCP Reauthorization Act of 2006. For example, both laws require the National Drug Control Strategy to include a 5year projection for the National Drug Control Program and budget priorities. However, there are certain differences, and the SUP-PORT Act includes a wide range of detailed new requirements that were not included under the ONDCP Reauthorization Act of 2006. One of these is that the National Drug Control Strategy include a description of how each comprehensive, research-based, long-range quantifiable goal established in the Strategy for reducing illicit drug use and the consequences of illicit drug use in the United States will be achieved. Other examples of new requirements include creating plans to increase data collection and expand treatment of substance use disorders. The SUPPORT Act also requires the Director to release a statement of drug control policy priorities in the calendar year of a presidential inauguration (but not later than April 1). The President is then required to submit to Congress a National Drug Control Strategy not later than the first Monday on February following the year in which the term of the President commences, and every two years thereafter.

CERTIFYING AGENCY DRUG CONTROL BUDGETS

The Director of ONDCP is also responsible for developing a consolidated National Drug Control Program budget proposal for each fiscal year, which is designed to implement the National Drug Control Strategy and inform Congress and the public about total federal spending on drug control activities. As part of this effort, the Director of ONDCP is required to assess and certify National Drug Control Program agencies' drug control budgets on an annual basis to determine if they are adequate to meet the goals and objectives of the National Drug Control Strategy.

ONDCP DID NOT FULLY ADDRESS SELECTED STATUTORY REQUIREMENTS RELATED TO THE NATIONAL DRUG CONTROL STRATEGY IN 2017, 2018. OR 2019

FOR 2017 AND 2018, ONDCP DID NOT ISSUE A NATIONAL DRUG CONTROL STRATEGY

ONDCP did not issue a National Drug Control Strategy for 2017 or 2018. Pursuant to the ONDCP Reauthorization Act of 2006, the Director of ONDCP was required to promulgate the National Drug Control Strategy annually and the President was to submit the National Drug Control Strategy to Congress by February 1 of each year. According to ONDCP officials, ONDCP did not issue a National Drug Control Strategy for these years because (1) ONDCP did not have a Senate-confirmed Director during those years; and (2) 2017 was the administration's inaugural year, and previous administrations also did

not issue a Strategy during their first years. By statute, in the absence of a Director, the Deputy Director of ONDCP is to perform the functions and duties of the Director temporarily in an acting capacity. ONDCP had officials serving as Acting Director beginning in January 2017. The current Director of ONDCP was appointed Deputy Director beginning in February 2018 and served as Acting Director from February 2018 until April 2018. As of April 2018, the current Director continued in his role as Deputy Director until he was confirmed by the Senate as Director of ONDCP in January 2019. The previous administration also did not issue a National Drug Control Strategy in its inaugural year—2009—but it did issue a National Drug Control Strategy in its second year. On January 31, 2019, ONDCP issued its National Drug Control Strategy for 2019, which we discuss in more detail later in the report.

WITHOUT A NATIONAL DRUG CONTROL STRAT-EGY, ONDCP COULD NOT COMPLETE THE DRUG CONTROL BUDGET CERTIFICATION PROCESS IN ACCORDANCE WITH STATUTORY REQUIREMENTS IN 2017 AND 2018

The ONDCP Reauthorization Act of 2006 required the Director of ONDCP to issue drug control funding guidance to the heads of departments and agencies with responsibilities under the National Drug Control Program by July 1 of each year. ONDCP is to issue funding guidance for agency budget proposals for the fiscal year two years in the future. For example, ONDCP was to issue funding guidance to agencies in 2017 for development of the 2019 budget, and issue funding guidance in 2018 for development of the 2020 budget. Such funding guidance was required to address funding priorities developed in the National Drug Control Strategy. National Drug Control Program agencies are to submit their budget requests to ONDCP in the summer of each year (before submission to the Office of Management and Budget) and in the fall of each year (at the same time as submission to the Office of Management and Budget). The Director of ONDCP then determines whether National Drug Control Program agencies' summer budget requests are adequate to meet the goals of the National Drug Control Strategy and certifies whether fall budget submissions include the funding levels and initiatives identified during the summer budget review.

Since ONDCP did not issue a Strategy in 2017 or 2018, ONDCP could not develop and issue funding guidance, nor could it review and certify budget requests and submissions of National Drug Control Program agencies, in accordance with the statutory requirement. ONDCP officials stated that—in lieu of a Strategy-they used other sources to formulate the administration's priorities, which served as the basis for drug control funding guidance in 2017 and 2018. For example, for the development of the fiscal year 2019 drug control budget in calendar year 2017, ONDCP officials stated that they relied upon the following sources for drug policy guidance:

Initial development of the President's Initiative to Stop Opioid Abuse and Reduce Drug Supply and Demand;

Draft recommendations from the President's Commission on Combating Drug Addiction and the Opioid Crisis;

policy statements made by the President as a candidate; and

policy priorities identified in the fiscal year 2018 President's Budget.

Additionally, for the development of the fiscal year 2020 funding guidance in calendar year 2018, ONDCP officials stated that they relied upon the following sources for drug policy priorities:

the interim and final Report of the President's Commission on Combating Drug Addiction and the Opioid Crisis;

the President's Initiative to Stop Opioid Abuse and Reduce Drug Supply and Demand; the draft National Security Council Strategic Framework; and

a draft 2018 National Drug Control Strategy that ONDCP officials told us they drafted but did not issue

These sources may have provided ONDCP officials with some information about policy priorities and actions. However, ONDCP officials stated they did not consider these documents to be the National Drug Control Strategy, and none of the sources fulfill the statutory requirements under the ONDCP Reauthorization Act of 2006, which require funding guidance to address priorities from the National Drug Control Strategy, ONDCP officials told us that they provided drug control funding guidance to the heads of departments and agencies with responsibilities under the National Drug Control Program in 2017 and 2018. As described by ONDCP officials, drug control funding guidance identifies key program goals and the programs and activities that require agency funding to achieve the objectives of the National Drug Control Strategy.

ONDCP has since issued the 2019 National Drug Control Strategy which states that it establishes the administration's drug control priorities. The Strategy also states that the priorities provide federal drug control departments and agencies strategic guidance for developing their own drug control plans and strategies, and that the Strategy is intended to ensure federal drug control budget dollars are allocated in a manner consistent with the administration's priorities. ONDCP officials told us that the agency intends to issue the next National Drug Control Strategy in February 2020 in accordance with the SUPPORT Act.

Ms. LEGER FERNANDEZ. Madam Speaker, this GAO report highlights the failures of the last administration in addressing this crisis we are talking about today.

The rule also makes in order two Congressional Review Act disapproval resolutions.

H.J. Res. 45 would roll back the student loan payment pause to last October. It would create chaos and instability for millions who are living check to check.

Let's remember why student loans were paused in the first place. Let's remember how dark and horrible it was when the pandemic first hit.

Remember how scary it was when COVID-19 started and the economy was in free fall? People lost their jobs. They were struggling to pay rent. We didn't know what the future held.

A pause to student loan payments was the right response to a public health emergency that was also a financial emergency. The payment pause was a lifeline for 37 million borrowers and their families, giving them muchneeded breathing room to pay their bills, to pay their rent without worrying about sabotaging their credit.

H.J. Res. 45 could send surprise bills for interest to tens of millions of Americans. This could lead to unprecedented delinquencies and defaults for the most vulnerable borrowers.

The third bill, S.J. Res. 11, would reverse an EPA rule that reduces air pollution from the trucking industry.

Many parts of America were once cloaked in air pollution that would sit at street level, sting your eyes, fill your lungs. Choking air, they called it.

In response, we enacted the Clean Air Act and tasked the EPA with cleaning up our air.

Still, one in three Americans live in counties with unhealthy air pollution. Heavy-duty vehicles make up about 6 percent of vehicles on the road but generate 59 percent of these dangerous pollutants that we are talking about. This contributes to respiratory illness, cardiovascular problems, and even death.

The Clean Air Act gives the EPA both the authority and obligation to protect Americans from air pollution that could endanger public health or welfare. That is exactly what EPA's heavy-duty engine and vehicle rule would do.

Republicans want to block the EPA rule from going into effect. Even worse, if this passes, Republicans would block EPA from regulating this pollution in the future.

Why would we want to keep this agency from doing its job of keeping us healthy?

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So instead of putting polluters first, Republicans should be spending this week paying America's bills. It is the patriotic thing to do. Clearly, that is not their priority. Remember, a default hurts working-class Americans. It hurts seniors on Medicare, food assistance recipients, and teachers' and students' access to care. If you are still waiting for your tax refund, it might not come.

Democrats have signed a petition to bring to the floor for a vote a bill that would raise the debt ceiling without any harmful cuts to the programs Americans rely on. All we need is five moderate Republicans to join the petition and the default crisis would be over.

Madam Speaker, I reserve the balance of my time.

Mr. BURGESS. Madam Speaker, I yield 3 minutes to the gentleman from New York (Mr. LANGWORTHY), a valuable member of the Rules Committee.

Mr. LANGWORTHY. Madam Speaker, I thank the gentleman from Texas that I am proud to serve with on the House Committee on Rules for yielding.

Madam Speaker, I rise today in support of the rule which provides for consideration of the HALT Fentanyl Act, an important first step in fighting back against a drug that is killing thousands of Americans.

The HALT Fentanyl Act is an extension of the work that this majority is doing to support our law enforcement officers and first responders. These men and women in blue, who are maligned, villainized, and defunded in cities and States across the country, need our support today to continue to fight back against the trafficking of these lethal drugs.

Federal, State, and local law enforcement officers all agree that without

this important scheduling in place, the surge of fentanyl into this country will break new records and more lives and communities will be ruined in the wake.

In just a 10-day span earlier this year, State troopers in my district reported over 20 deaths from fentanyl overdoses. In just a 10-day span, 20 victims of the flood of this deadly substance into our country were killed, their families and their communities torn apart in the process.

In recent years, the drug-related death rate in Erie County in western New York has risen by 256 percent. As is the case in so many communities, fentanyl and fentanyl-related substances are responsible for more and more of these deaths.

It is hard to believe it can get any worse, but sadly, it could. If we allow the scheduling of fentanyl-related substances to expire, we will strip law enforcement of the authority they need to seize these extremely lethal drugs.

They are the ones who are pursuing the traffickers and getting them off the streets. They are also the ones who, too often, arrive on the scene to try to save the life of someone who has tragically succumbed to an overdose.

Madam Speaker, I am proud to support this legislation that will help ensure law enforcement has the tools they need to protect our communities and save lives.

Ms. LEGER FERNANDEZ. Madam Speaker, I agree that we need to address the fentanyl crisis, but what we are saying is we need to do more. The bill we are looking at today does not increase any funding for law enforcement. It does not address the need that we have to increase our funding to assist law enforcement in interdicting this horrible drug.

Madam Speaker, I yield 3 minutes to the gentleman from Texas (Mr. Dog-GETT).

Mr. DOGGETT. Madam Speaker, it reminds me of Texas—in fact, it reminds me of someone with whom I served in the Texas Legislature. He was asked what he did there, and he said: "Oh, I am not here to do anything, I am just here in case somebody else decides to do something."

That is the approach of these extreme House Republicans. They have no plan to protect our families from pollution or protect our planet from the climate crisis. Following their seditious leader, Donald Trump, they are just here to say "no." For some reason, any time we have a success that is green, it just makes them see red.

Democrats are choosing to stand with families that are concerned about real health problems like bronchitis and childhood asthma and cardio-vascular disease that is caused and accentuated by pollution.

We need some heavy-duty action here today to protect our lungs and the lungs of our planet. Yet, they object to even this modest heavy-duty truck rule—the first updating of this pollution standard in 20 years.

With their fossilized thinking and smoggy judgment, Republicans are permitting our planet to overheat, and with this rule rollback, they would ensure that we keep choking during the overheating.

As health-harming pollutants enter our air and bake, smog pollutes our cities and endangers the most vulnerable. To prevent announcements of yet another ozone action day, what we need is a little ozone action right here in the Capitol.

When this truck rule takes effect, each year we will see tens of thousands fewer cases of childhood asthma and fewer premature deaths. Yet, MAGA extremists are not content with merely polluting our minds, as they do across this country, they refuse to prevent smog and soot from polluting our lungs.

Yes, life is a highway, but it need not be overwhelmed with health-harming pollution. Adopting a cleaner standard for trucks protects all of us, but especially the most vulnerable, the young, the elderly, and those with respiratory ailments.

You may remember a great musical that proclaimed, "On a Clear Day You Can See Forever." Not so much now. Not so often across America, even in our smoggy national parks. Democrats and Republicans may not see eye-to-eye on much, but we should be able to be clear on smog, it shouldn't be a partisan issue.

Once upon a time, long, long ago, "conservation" was a conservative value. A "no" vote is a breath of fresh air—a vote to keep soot out of our lungs.

Mr. BURGESS. Madam Speaker, I yield 3 minutes to the gentleman from Texas (Mr. Roy), another member of the Rules Committee.

Mr. ROY. Madam Speaker, I thank my friend from Texas for yielding. A lot of conservatives believe in conservation. For example, the Governor of Florida, Ron DeSantis, has expanded the Everglades more than any Governor in the history of the State because that is actual conservation—instead of the nonsense being spewed by my colleagues on the other side of the aisle.

When they say, oh, we do something. Let's just be clear to the American people what doing something actually is. It is giving billions of dollars of subsidies to your fat cat corporate cronies, enriching them at the expense of hardworking American families. That is the truth.

Madam Speaker, 90 percent of subsidies are going to billion-dollar corporations and 80 percent of electronic vehicle subsidies are going to people making well over \$100,000. That is the actual truth of what is going on.

Here today we are talking about several bills. We are dealing with the fentanyl crisis, which my colleagues on the other side of the aisle refuse to address by allowing our border to be wide open, exploited by cartels, driving

fentanyl into our communities on the back of the Chinese, making money doing so, and killing 72,000 Americans last year alone, including 5 children in Hays County where I live south of Austin. It is happening every single day.

My colleagues don't care about securing the border. They want to hide behind the fact that they say that fentanyl comes through ports of entry. What they don't acknowledge is that there is no patrolling of the border by Border Patrol because they are all processing human beings being smuggled here for profit by dangerous cartels.

This bill is designed to take a step forward. It takes an important step forward in ensuring that we are dealing with the fentanyl precursors and that we are doing what we need to do to recognize how deadly it is. The fact is, our colleagues don't want to actually secure the border, which is where fentanyl pours across every single day.

On student loans—need we go any further than looking at the quotes from Speaker Pelosi when she said: "People think that the President of the United States has the power for debt forgiveness. He does not. He can postpone. He can delay. But he does not have that power. That has to be an act of Congress."

That was that grand MAGA extremist, NANCY PELOSI.

She also added: "Suppose . . . your child just decided they, at this time, [do] not want to go to college, but you're paying taxes to forgive somebody else's obligations." She continued, "You may not be happy about that."

Are American families supposed to be happy that they now must cover the cost of someone else's education? Again, that great MAGA extremist NANCY PELOSI.

The fact is, the American people understand that making other Americans, plumbers or people who paid off their loans, pay off other people's student loans is inherently un-American and inherently unfair.

One last message to my Republican colleagues, passing a CRA to die in the Senate and die at the President's desk is not enough. We should defund the student loan fiasco in the debt ceiling bill. Don't blink.

Ms. LEGER FERNANDEZ. Madam Speaker, while my colleague speaks loudly about stopping fentanyl at the border, I will remind him that this bill doesn't do anything about fentanyl at the border. Indeed, the Republicans in the Rules Committee last night rejected amendments which would have placed more money on law enforcement and on the ability to stop fentanyl at the border.

Madam Speaker, I remind them that the Cato report points out that fentanyl is brought in at our ports of entry more than 90 percent of the time.

Madam Speaker, I point out that if we defeat the previous question, I will offer an amendment to the rule to provide for consideration of a resolution, which states that it is the House's responsibility to protect and preserve Social Security and Medicare for future generations and reject any cuts to these essential programs.

Madam Speaker, I ask unanimous consent to insert the text of my amendment in the RECORD, along with any extraneous material, immediately prior to the vote on the previous question.

The SPEAKER pro tempore. Is there objection to the request of the gentlewoman from New Mexico?

There was no objection.

Ms. LEGER FERNANDEZ. Madam Speaker, I yield 2 minutes to the gentleman from Florida (Mr. Frost), who will discuss the need to reassure the American people.

Mr. FROST. Madam Speaker, I thank the gentlewoman for yielding.

Madam Speaker, seniors in America deserve to retire with dignity. They have earned Social Security and Medicare benefits through a lifetime of work. The seniors of today without pensions or generational wealth depend upon their benefits. Yet, they are living in fear that Republicans in this body will take away their healthcare and their means to pay for housing or food.

The bills we are considering this week have nothing to do with combating those fears. What they actually do is harm the health and financial stability of Americans. They dirty our air, they worsen student debt, and they increase the prison population.

My Republican colleagues cannot be serious. These priorities and bad policies do nothing to meet the moment.

Madam Speaker, I urge my Republican colleagues to come to their senses, and I urge them to stop playing games with our economy. Instead, give the American people some certainty. Give our seniors some certainty. Assure our seniors that you will not cut Social Security and Medicare. It is one thing to say it on the news, and it is another thing to do it in this Chamber.

Before Medicare, nearly half of older Americans had no health insurance. Today, Medicare is often the only source of healthcare for nearly all seniors. More than 66 million people rely on Social Security to meet their basic needs in a country where most Americans, over 60 percent, can't afford an unexpected \$400 bill tomorrow; that is seniors, people with disabilities, children, and more than 8 million veterans.

Republican proposals to sunset Social Security and Medicare would cause panic and disruption for our seniors at a time when peace and security are critical and well-deserved.

Let's spend our time this week finally considering Democrats' legislation that guarantees seniors the retirement that they were promised and that strengthens our healthcare. Our elders give us so much: culture, wisdom, and tradition.

Madam Speaker, I urge my Republican colleagues in this body to give

back to them and guarantee them what they have earned. Let's do even more. Let's expand Medicare to cover dental, vision, and hearing benefits.

The SPEAKER pro tempore. The time of the gentleman has expired.

Ms. LEGER FERNANDEZ. Madam Speaker, I yield an additional 1 minute to the gentleman from Florida.

Mr. FROST. Let's work together to get rid of surprise bills. Let's end unaffordable prescription drug prices.

Madam Speaker, Î urge Republicans in this Chamber to abandon the bad bills that they are bringing to the floor and refocus on real solutions that working families and our seniors deserve.

Madam Speaker, I urge my colleagues to defeat the previous question.

Mr. BURGESS. Madam Speaker, I yield 2 minutes to the gentleman from South Carolina (Mr. NORMAN), another member of the Rules Committee.

Mr. NORMAN. Madam Speaker, as I sit here and listen—I am on the Rules Committee—I hope all those listening in the balcony, what my Democrat friends are saying are just words. My strong belief is that this fentanyl bill, H.R. 467, is a step in the right direction.

The issue that is plaguing this country is the invasion of the border.

Where have we heard one word from my Democrat colleagues about stopping the invasion?

We are a Nation of borders. Every nation is sovereign or you cease to be a Nation. That is where our fentanyl is coming in and it shocks me to keep hearing you say it is coming in at designated points of entry. There are no designated points of entry. The whole border is open.

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The lives that were lost due to the drug overdoses that killed 100,000 of our young people last year, why does that not resonate? I have no earthly idea why this administration is intent on keeping our borders open, and they know it.

You got a Vice President who is laughing at it. You got a President who hasn't even been there other than to go on one regulated visit to the border. It is insane, and the American people are tired of it.

In South Carolina, I went to a news conference with police officers. They seized enough fentanyl to wipe out the whole State of South Carolina. What do we hear from the other side? Crickets. We hear nothing, and it is a crying shame of what happens.

Mr. Speaker, I will end with this: A DEA agent who was talking about this problem—he had picture after picture of our young people—said, In the morgue, there are no drug treatment centers. In the morgue, there are no education systems. In the morgue, there are no things to coach people who are in a casket. It is a sad day for America, and hopefully this insanity will end at some point in time when a new administration takes over.

Ms. LEGER FERNANDEZ. Mr. Speaker, I ask unanimous consent to include in the RECORD an October 2020 NPR article titled: "Opioid Crisis: Critics Say Trump Fumbled Response To Another Deadly Pandemic."

The SPEAKER pro tempore (Mr. STRONG). Is there objection to the request of the gentlewoman from New Mexico?

There was no objection.

[From NPR, Oct. 29, 2020]

OPIOID CRISIS: CRITICS SAY TRUMP FUMBLED RESPONSE TO ANOTHER DEADLY EPIDEMIC

(By Brian Mann)

When then-presidential candidate Donald Trump spoke in Manchester, N.H., a week before the 2016 election, he said the opioid crisis was destroying lives and shattering families.

"We are going to stop the inflow of drugs into New Hampshire and into our country 100%," Trump promised.

It was a major campaign issue. Overdoses were surging in battleground states key to the election, like New Hampshire, Ohio and Pennsylvania.

In 2017—Trump's first year in office—more than 42,000 Americans died from overdoses linked to heroin, fentanyl and prescription opioids, according to the Centers for Disease Control and Prevention.

Before coronavirus hit, opioids were widely viewed as the nation's top public health crisis

Trump declared a public health emergency in October 2017, noting that overdoses had joined gun violence and car crashes as a leading cause of death in America.

"No part of our society, not young or old, rich or poor, urban or rule has been spared this plague," he said.

Significant accomplishments followed. Trump signed legislation in 2018 that boosted federal funding for drug treatment. During trade talks with China last year, Trump pushed to slow that country's exports of fentanyl.

"The federal government has taken some important steps to increase access to evidence-based treatment for opioid use disorder," said Beau Kilmer, who heads the Rand Corporation's Drug Policy Research Center.

Kilmer also credits Trump for "pressuring China to better regulate some of its synthetic opioids."

A PUBLIC HEALTH EMERGENCY, BUT NO CLEAR LEADERSHIP

But while some progress was made, critics point to serious missteps behind the scenes that hampered federal efforts, including the decision to sideline and defund the Office of National Drug Control Policy-(ONDCP).

An internal memo acquired by NPR in 2017 found the White House was contemplating a 94% cut in resources to the agency, tasked since 1988 with developing and coordinating the nation's drug addiction efforts.

That decision was later reversed but Trump handed leadership of the opioid response to a series of political appointees, including former New Jersey Gov. Christ Christie and White House adviser Kellyanne Conway.

"This made it difficult for people to understand, you know, who's leading and coordinating the effort on opioids," Kilmer said.

Still, there seemed to be some success, with opioid deaths dipping slightly in 2018. "This sign of progress is an example of what can happen when an administration prioritizes an issue," said ONDCP director Jim Carroll in a statement earlier this year.

But in 2019, the number of overdoses surged again to a new record with more than 50,000

opioid-related fatalities. The CDC's preliminary data shows another big increase in deaths during the first four months of 2020.

U.S. WENT TWO YEARS WITHOUT A NATIONAL STRATEGY

Researchers also say fentanyl has continued to spread fast, despite interdiction efforts, contributing to more overdose deaths in the western United States where the synthetic opioid had been scarce.

In December, the Government Accountability Office issued a report blasting the administration for failing to come up with a coherent national opioid strategy as required by law.

"ONDCP did not issue a national drug control strategy for either 2017 or 2018," the GAO concluded.

The ONDCP declined an interview request for this story, but a spokesman told NPR in an email that the agency has addressed the GAO's concerns and is once again functioning in full compliance.

"ONDCP has released several documents that together address all of the statutory requirements that GAO noted as missing," the spokesman said.

But in recent months, even some members of the Trump administration have begun voicing alarm.

"Basically everything is pointed in the wrong direction," said Adm. Brett Giroir, assistant secretary for health and an opioid policy expert at the Department of Health and Human Services.

During a panel discussion in late July, Giroir described recent increases in opioid overdoses as "a nightmare," adding that "all the progress that we made has been reversed and this is even before the pandemic."

## TRUMP ATTACK ON AFFORDABLE CARE ACT THREATENS OPIOID RESPONSE

Drug policy experts say things could grow even worse in the months ahead if Trump is successful in dismantling the Affordable Care Act.

The program created during the Obama administration subsidizes state Medicaid programs that provide insurance coverage for roughly 40% of Americans receiving opioid addiction treatment.

"We've seen very large increases in the number of individuals going to treatment programs," said Brendan Saloner, a researcher at Johns Hopkins Bloomberg School of Public Health.

If the Supreme Court strikes down the ACA, as Trump has urged, those gains in insurance coverage and care would likely be reversed.

"The situation is bleak and it could be a lot bleaker," Saloner said.

Meanwhile, Democrat Joe Eiden has released a plan of his own promising to end the overdose crisis if he's elected. His number one policy idea? Preserve and expand the Affordable Care Act.

Ms. LEGER FERNANDEZ. Mr. Speaker, I ask unanimous consent to include in the RECORD a Newsweek article titled: "Fentanyl Surge Started and Peaked Under Trump Despite GOP Blaming Biden."

The SPEAKER pro tempore. Is there objection to the request of the gentlewoman from New Mexico?

There was no objection.

[From Newsweek, Feb. 11, 2022]

FENTANYL SURGE STARTED AND PEAKED UNDER TRUMP DESPITE GOP BLAMING BIDEN

(By Alex J. Rouhandeh)

A major jump in fentanyl seizures at the border between fiscal year 2020 and fiscal year 2021 has placed President Joe Biden at

the center of GOP criticism. However, the problem appeared to be mounting months before he took office.

The first time monthly fentanyl seizures saw a sizable spike over the last four years was in June of 2020 under former President Donald Trump when Customs and Border Protection (CBP) seized 713 pounds of the drug, an almost 200 percent increase from the month

Only once before then, over fiscal years 2020 and 2019, did the pounds of fentanyl seized in a month crack 400 pounds. However, following the June 2020 seizure, the pounds of fentanyl taken by CBP has surpassed the 700-pound mark each month all but twice. The two greatest monthly seizures of 1,212 pounds and 1,193 pounds both took place in October and December of 2020, just before Trump's turnover to Biden.

Nonetheless, certain Republican politicians have looked to place sole blame for the issue on Biden.

"The Biden administration's weak stance on border security and drug enforcement has enabled drug traffickers to send enormous amounts of fentanyl into our country," Republican Congressman Madison Cawthorn of North Carolina said in a February 10 statement. "The carnage and destruction caused by these weak and incompetent policies must end now.

"This has everything to do with the open borders policies President Biden imposed on day one of his term that has allowed an unprecedented supply of this drug to enter the homeland and devastate families and communities," Republican Congressman Darrell Issa said in a February 8 statement.

So far, 117 Republicans joined together in signing a letter demanding the president take "immediate action" to address the crisis by supporting the classification of fentanyl as a schedule 1 drug (with accepted medical use) instead of a schedule 2 drug (substances with "high potential for abuse").

Although fentanyl is used to treat pain in cancer patients, according to Med Line, Republicans argue that the drug should be reclassified to ensure law enforcement "has the tools they need to combat this threat."

Funding for CBP drug enforcement activities through the National Drug Control Program has looked consistent over the pass several years. Under Trump, almost \$3.8 billion went to CBP for drug enforcement in 2020, and over \$3.1 billion was allocated to the agency in 2019. Under Biden, over \$3.4 billion went to CBP through the Drug Program in 2021.

Following the Trump peaks in October and December of 2020, the fentanyl seized each month has generally hovered between 800 and 1,000 pounds. However, in December of 2021, CBP seized 549 pounds of fentanyl, the lowest amount seized since the June of 2020 uptick. The data for January and February of this year has not come out yet.

Newsweek contacted CBP for comment but did not receive a response in time for publication.

Ms. LEGER FERNANDEZ. Mr. Speaker, I think that we need to bring back to focus what we are doing here. This bill does something that we have no objection to, which is to permanently classify fentanyl as schedule I.

What we keep hearing on the other side, though, is about what more needs to be done, but their bill doesn't do it. Democrats have bills that would indeed increase law enforcement, that would indeed increase treatment for addiction, that would indeed increase the ability for us to research into these drugs and determine if there are possibilities in this ground where we could

actually find antagonistic drugs that would help counter the overdose that happens from them, but this bill doesn't do that.

Now, when they get up there and they start talking about the open border, this is not what this bill is. This is not what this bill is. This bill simply, as was pointed out last night, sort of codifies the status quo.

Our communities want more. Democrats were willing to provide more. We have introduced bills that do more, but they were rejected by the Republicans.

Mr. Speaker, I reserve the balance of

my time.

Mr. BURGESS. Mr. Speaker, I yield 2 minutes to the gentleman from New York (Mr. MOLINARO).

Mr. MOLINARO. Mr. Speaker, I thank the gentleman for yielding.

Mr. Speaker, should we do more? Of course, we should do more, but fentanyl is pouring into our country not only at our ports of entry, but across our borders. We did do more a week ago bolstering border security.

Fentanyl is taking too many American lives, and I rise today in support of the HALT Fentanyl Act. This bill will help to combat the spread of fentanyl-related substances by permanently listing it as a schedule I drug, recognizing its deadly effects, giving our communities yet one more tool in a growing and necessary toolbox.

The smallest amounts of these drugs can kill even just one person, and laced with other substances, they are taking countless lives. Accessibility and lethality of these drugs have fueled countless fatalities. Fentanyl poisoning is the number one cause of death among adults 18 to 49 years of age, more than cancer, more than heart disease, and more than car accidents.

In upstate New York, the opioid crisis is devastating our communities, and it is being fueled by fentanyl. This is the public health crisis of our lifetime. In my home State, my district in Sullivan County, New York, has the highest opioid death rate in the entire State. That is why we are also pushing for Sullivan County to be designated a Federal High-Intensity Drug Trafficking Area.

The truth is, every community in America is a victim to the fentanyl crisis, every family is on the front line of this opioid crisis, and we must give law enforcement and communities every tool necessary. I am proud to support this bill. I am proud to support law enforcement and their efforts to inter-

fentanyl out of our communities and off our streets.

Mr. BURGESS. Mr. Speaker, I reserve the balance of my time.

cede and give them the tools to keep

Ms. LEGER FERNANDEZ. Mr. Speaker, yes, indeed, I agree that we need to make sure that we address fentanyl for every community whether it be New York or New Mexico, because the fentanyl crisis is a public health crisis, and families are losing loved ones every day.

Indeed, in New Mexico in 2020, the New Mexico Department of Health found that 65 percent of people with substance use disorders were not getting the treatment they needed. The same problem we find nationwide. Over 86 percent of people suffering from opioid abuse were not getting the treatment they needed in 2020.

Even once treatment began, people are at their most vulnerable when they suffer from a relapse. Their bodies cannot handle the sudden return of high levels of opioids, and the result is often fatal.

I do hope that we can continue to agree that we must address this and that we must provide an addition to this bill, the kind of funding that is needed and that is urgent to treat addiction.

Mr. Speaker, I yield 3 minutes to the gentlewoman from Texas (Ms. JACKSON LEE), my distinguished colleague.

Ms. JACKSON LEE. Mr. Speaker, I give the compliment back to the distinguished gentlewoman from New Mexico. We are alums, and we will leave that for all to find out from where, but I am very proud to stand with her and really to stand with all of those who believe that the scourge of fentanyl must end now.

Mr. Speaker, we should not have one more death. I don't think there is any disagreement on this floor that there shouldn't be any more deaths. I also believe that it is important to recognize that there are some things that we come together on. I have never heard a Democrat be against border security. I have never heard a Democrat be against fighting the scourge of fentanyl taking out children.

As I have said over and over again, as a senior member on Homeland Security and Judiciary, who has written comprehensive immigration bills to protect Americans and to secure our borders, at the same time as the ranking member and former chair of the Crime Subcommittee, I know what to do with fentanyl.

I have introduced H.R. 3570. We have to stop fentanyl now to be able to get at the core of our problem. There is no doubt fentanyl comes in mostly from legal points of entry by United States citizens and others.

It does have other entry points, but the core is to protect the lives of our children. Why couldn't we do our work where we are doing one bill and another bill? H.R. 3570 deals with synthetics. It deals with educational outreach.

Just last night, I was speaking to a young person who said, Can you get Naloxone to be, if you will, in nontraditional places, clubs? Certainly, it should be in schools. It might even need to be in places of civic mindedness because it is where young people go to save their lives. Then synthetics, fentanyl that is used medically, are being sold online in pills that are misrepresented to our young people, and they lose their life.

H.R. 3570 takes care of that, fights the scourge of online sales and fentanyl trafficking. There is a pathway of getting to where we want to be, but a schedule I where you are, in essence, doing mandatory minimums that are not stopping, if you will, this horrible traffic. We are indicating we can get to this with enhanced penalties for the actions of the perpetrator so that you don't by mistake get someone innocently doing research or otherwise dealing with this particular drug that we are talking about that can be deadly.

There are scientists, there are responsible medical professionals, and then there are the devastatingly drastic evil people who try to use this to kill our children. We cannot adhere to that.

H.R. 3570 looks at it comprehensively. Working with the Judiciary Committee, working with Energy and Commerce, and all our Members, it is important to put forward legislation that can embrace us all. I believe that we have the responsibility to do the right thing.

The SPEAKER pro tempore. The time of the gentlewoman has expired.

Ms. LEGER FERNANDEZ. Mr. Speaker, I yield an additional 30 seconds to the gentlewoman from Texas.

Ms. JACKSON LEE. The underlying bill could stand some work from all of us, and I ask us to save our children. Let's save our children and stop this deadly drug from coming into the United States, and let's find a way to reach our children.

Mr. BURGESS. Mr. Speaker, may I inquire as to the time remaining.

The SPEAKER pro tempore. The gentleman from Texas has 10½ minutes remaining. The gentlewoman from New Mexico has 8 minutes remaining.

Mr. BURGESS. Mr. Speaker, I yield 2 minutes to the gentleman from Ohio (Mr. JOHNSON), a fellow member of the Energy and Commerce Committee.

Mr. JOHNSON of Ohio. Mr. Speaker, I rise today to speak in strong support of H.R. 467 to make class-wide scheduling of fentanyl-related substances permanent.

This hits close to home for me. I represent the men and women of eastern Ohio, a region of the country that has been hit particularly hard by this deadly drug. If the current order is allowed to expire, law enforcement will lose their ability to seize some of these fentanyl-related drugs. They will effectively be street legal.

Here are two staggering truths: Fentanyl poisonings are now the number one cause of death in the country of adults between 18 and 49. Over three-quarters of teen overdose deaths in 2021 were caused by fentanyl. That is 75 percent. In many of these instances, those taking the fentanyl had no idea they were doing so. That is what makes this lethal and heavily addictive drug so dangerous.

Sadly, it is very clear that the Biden administration is not serious about

solving this epidemic. If they were, they wouldn't be allowing our southern border to be overrun by the cartels and their drug mules. Who is paying the price for these policies and lack of border enforcement? It is the families of those that have become addicted. It is those that have overdosed and died from fentanyl. We have even had law enforcement officials in eastern Ohio that have been exposed to fentanyl and almost died during the conduct of their work busting up drug rings.

We should not be relaxing the penalties for that. We should be stiffening the penalties for fentanyl. Just 19 grams of fentanyl, what would fill a saltshaker in a restaurant, could kill 10.000 people.

Here is the bottom line: This legislation is necessary to make the temporary class-wide scheduling order for fentanyl-related substances permanent. If this body doesn't act, we should all be ashamed.

Mr. Speaker, I thank my colleagues Mr. LATTA and Mr. GRIFFITH for their leadership here, and I urge quick and overwhelming passage of this life-saving bill.

Mr. BURGESS. Mr. Speaker, I reserve the balance of my time.

Ms. LEGER FERNANDEZ. Mr. Speaker, I think what we heard on the House floor today was agreement, agreement on the need to address the scourge of fentanyl and what it is doing to our communities. I think we heard individuals talk about the individual pain they feel, whether it be in Texas, in New York, in New Mexico.

I think we want to hold that sense of agreement on this topic together because we don't always agree on things, but I think in this instance, we agree that we need to put our families first. We need to put the people who unwittingly end up dying from fentanyl with no idea that they were even taking that drug, and we need to remember that pain and that fear that those families must have.

## □ 1315

As we talk about this issue, we must also remember that we have to do more. Making sure that fentanyl is classified and is not available with the fentanyl substances is important. We don't disagree on that. The issue that we are raising is the need to do more, and especially given the moment we are living in today.

This week, we are days away from a potential default because Republicans have refused to raise the debt limit. We are in a crisis, and it is a crisis that the Republicans have manufactured. We need to remember what that crisis does. That crisis actually hinders our ability to do the work that is so urgent to combat fentanyl.

Fentanyl comes in through our ports of entry. The Cato Institute, which is not a liberal or progressive institute, notes that 90 percent of fentanyl enters into the country through our ports of entry, smuggled in by, what I would

call, despicable Americans who profit off addiction and death.

But let's go back and say what would happen if their default that they have engineered would actually come to be. The Department of Homeland Security has said that if the default in America act goes into effect, it would lead to 2,400 fewer frontline CBP law enforcement officers. That is 2,400 fewer Border Patrol officers. That means that there are going to be fewer officers to help prevent illegal drugs from entering into our country. That would lead to over 150,000 pounds of cocaine and over 350,000 grams of fentanyl avoiding seizure.

The cuts that they have proposed would lead to more fentanyl coming in because there would be fewer officers on the ground to combat it. That is shameful that they would raise and talk about this bill in the angry and loud ways that they have done without acknowledging that the work that they did several weeks ago would actually make this crisis worse.

In New Mexico, as I noted, we know the pain of addiction and overdose all too well. We have lost too many beautiful lives to addiction and fentanyl.

We need to think about what those solutions are that we would want to do. We would want to increase the funding for substance abuse prevention and treatment block grants. That was one of the amendments that was suggested to this rule by Representative BALINT.

We want to use Representative BLUNT ROCHESTER's amendment, which would have increased education, so stakeholders would know about research and treatment and how to make sure that we make the public aware of these issues.

These are things that Republicans have refused to address in the bills we are looking at today.

I urge my colleagues, I urge those on the other side of the aisle, to really look at what we are doing today. We are doing something that we all agree on, which is addressing a teeny-tiny piece of the fentanyl problem, but we aren't doing what needs to be done in terms of increasing law enforcement, in terms of increasing funding at our borders and for those who are actually doing the work of seizing fentanyl as it comes in, of the law enforcement that must be done. We need to increase that funding, not cut it.

With regard to truck emissions, we cannot tie the EPA's hands. We must keep our air clean. The number of deaths from asthma in children who would survive and not be hurt if this rule goes into effect, would be horrible. I need to tell you that each child who would not be able to breathe because of polluted air is the child that I will think about when I vote on this bill later today.

Mr. Speaker, I yield back the balance of my time.

Mr. BURGESS. Mr. Speaker, I yield myself the balance of my time.

Mr. Speaker, it is important to point out, first off, that the Republican

House has voted on and passed an increase to the Nation's debt limit. This happened 2 weeks ago. Further action is awaiting in the Senate. Further action is awaiting down at the White House. This House, under the leadership of Speaker McCarthy, has acted and acted appropriately.

Furthermore, I would like to point out, in October of 2018, President Trump signed the SUPPORT Act. The SUPPORT Act was the first meaningful step toward countering what was at the time a crisis in this country because of diversion of prescription drugs, the so-called opioid crisis.

Mr. Speaker, it has changed since then. Since 2018, we are now faced with a different disease in fentanyl poisoning brought to us because of an open southern border, because the President has refused to secure the southern border and because the border czar has refused to secure the southern border. As a consequence, we have an unprecedented amount of fentanyl flowing into our country.

Yes, it is quite right, apps on social media have made it easier for kids to get access to this than ever before.

There is some good news. The Food and Drug Administration has allowed for the over-the-counter sale of Narcan that is to begin this summer. That is a good thing. However, that in no way counteracts the increase in illicit fentanyl that is coming across the southern border because of the refusal of this administration to secure our sovereign border.

Back in 2018 when the SUPPORT Act passed, it was largely through bipartisan efforts on the Committee on Energy and Commerce that brought that bill to its signing. Once again, I thank members of the Committee on Energy and Commerce and members of the Senate for bringing before us these important pieces of legislation to roll back the damage that President Biden has done in the fentanyl crisis.

Republicans remain united in pursuing a legislative agenda that puts the welfare of Americans above the special interests of a few.

Mr. Speaker, I urge fellow Members to support the rule and support the underlying legislation.

The material previously referred to by Ms. Leger Fernandez is as follows:

AN AMENDMENT TO H. RES. 429 OFFERED BY MS. LEGER FERNANDEZ OF NEW MEXICO

At the end of the resolution, add the following:

SEC. 4. Immediately upon adoption of this resolution, the House shall proceed to the consideration in the House of the resolution (H. Res. 178) affirming the House of Representatives' commitment to protect and strengthen Social Security and Medicare. The resolution shall be considered as read. The previous question shall be considered as ordered on the resolution and preamble to adoption without intervening motion or demand for division of the question except one hour of debate equally divided and controlled by the chair and ranking minority member of the Committee on Ways and Means or their respective designees.

SEC. 5. Clause 1(c) of rule XIX shall not apply to the consideration of H. Res. 178.

Mr. BURGESS. Mr. Speaker, I yield back the balance of my time, and I move the previous question on the resolution.

The SPEAKER pro tempore. The question is on ordering the previous question.

The question was taken; and the Speaker pro tempore announced that the ayes appeared to have it.

Ms. LEGER FERNANDEZ. Mr. Speaker, on that I demand the yeas and nays.

The yeas and nays were ordered.

The SPEAKER pro tempore. Pursuant to clause 8 of rule XX, further proceedings on this question are postponed.

### RECESS

The SPEAKER pro tempore. Pursuant to clause 12(a) of rule I, the Chair declares the House in recess for a period of less than 15 minutes.

Accordingly (at 1 o'clock and 23 minutes p.m.), the House stood in recess.

### □ 1330

### AFTER RECESS

The recess having expired, the House was called to order by the Speaker pro tempore (Mr. Strong) at 1 o'clock and 30 minutes p.m.

# ANNOUNCEMENT BY THE SPEAKER PRO TEMPORE

The SPEAKER pro tempore. Proceedings will resume on questions previously postponed.

Votes will be taken in the following order:

Ordering the previous question on House Resolution 429; and

Adoption of House Resolution 429, if ordered.

The first electronic vote will be conducted as a 15-minute vote. Pursuant to clause 9 of rule XX, the second electronic vote will be conducted as a 5-minute vote.

PROVIDING FOR CONSIDERATION OF H.R. 467, HALT ALL LETHAL TRAFFICKING OF FENTANYL ACT; PROVIDING FOR CONSIDER-ATION OF S.J. RES. 11, PRO-VIDING FOR CONGRESSIONAL DISAPPROVAL  $_{
m OF}$ THERULE SUBMITTED BY THE ENVIRON-MENTAL PROTECTION AGENCY RELATING TO "CONTROL OF AIR POLLUTION FROM NEW MOTOR VEHICLES: HEAVY-DUTY ENGINE AND VEHICLE STANDARDS"; AND PROVIDING FOR CONSIDERATION OF H.J. RES. 45, PROVIDING FOR CONGRESSIONAL DISAPPROVAL OF THE RULE SUBMITTED BY DEPARTMENT ofEDU-CATION RELATING TO "WAIVERS AND MODIFICATIONS OF FED-ERAL STUDENT LOANS"

The SPEAKER pro tempore. Pursuant to clause 8 of rule XX, the unfin-

ished business is the vote on ordering the previous question on the resolution (H. Res. 429) providing for consideration of the bill (H.R. 467) to amend the Controlled Substances Act with respect to the scheduling of fentanyl-related substances, and for other purposes; providing for consideration of the joint resolution (S.J. Res. 11) providing for congressional disapproval under chapter 8 of title 5, United States Code, of the rule submitted by the Environmental Protection Agency relating to "Control of Air Pollution From New Motor Vehicles: Heavy-Duty Engine and Vehicle Standards"; and providing for consideration of the joint resolution (H.J. Res. 45) providing for congressional disapproval under chapter 8 of title 5, United States Code, of the rule submitted by the Department of Education relating to "Waivers and Modifications of Federal Student Loans", on which the yeas and nays were ordered.

The Clerk read the title of the resolution.

The SPEAKER pro tempore. The question is on ordering the previous question

The vote was taken by electronic device, and there were—yeas 219, nays 208, not voting 8, as follows:

### [Roll No. 230]

### YEAS-219

Dunn (FL) Aderholt Johnson (SD) Alford Edwards Jordan Joyce (OH) Allen Ellzey Amodei Emmer Joyce (PA) Kean (NJ) Armstrong Estes Kelly (MS) Arrington **Bahin** Fallon Kelly (PA) Bacon Feenstra Kiggans (VA) Baird Ferguson Kiley Kim (CA) Balderson Finstad Fischbach LaHood Banks Barr Fitzgerald LaLota Bean (FL) Fitzpatrick LaMalfa. Bentz Fleischmann Lamborn Bergman Flood Langworthy Rice Foxx Latta Franklin, C. LaTurner Biggs Bilirakis Scott Lawler Lee (FL) Bishop (NC) FrvFulcher Boebert Lesko Bost Gaetz Letlow Gallagher Loudermilk Brecheen Buchanan Garbarino Lucas Garcia, Mike Luetkemeyer Buck Bucshon Gimenez Luna Gonzales, Tony Luttrell Burchett Burgess Good (VA) Mace Gooden (TX) Malliotakis Burlison Calvert  $\operatorname{Gosar}$ Mann Cammack Granger Massie Graves (LA) Carev Mast McCarthy Carl Graves (MO) Carter (GA) Green (TN) McCaul Carter (TX) Greene (GA) McClain Chavez-DeRemer Griffith McClintock Ciscomani Grothman McCormick Cline McHenry Guest Guthrie Meuser Miller (IL) Cloud Clyde Hageman Cole Miller (OH) Harris Collins Harshbarger Miller (WV) Comer Hern Miller-Meeks Crane Higgins (LA) Mills Crawford Hill Molinaro Crenshaw Hinson Moolenaar Curtis Houchin Mooney Hudson D'Esposito Moore (AL) Davidson Huizenga Moore (UT) De La Cruz Hunt Moran DesJarlais Murphy Issa Jackson (TX) Diaz-Balart Nehls Newhouse Donalds James Johnson (LA) Norman Duarte

Johnson (OH)

Duncan

Palmer Pence Perry Pfluger Posey Reschenthaler Rodgers (WA) Rogers (AL) Rogers (KY) Rose Rosendale Rouzer R.ov Rutherford Salazar Santos Scalise Schweikert

Scott, Austin Self Sessions Smith (MO) Smith (NE) Smith (NJ) Smucker Spartz Stauber Steel Stefanik Steil Steube Stewart Strong Tenney Thompson (PA) Tiffany Timmons

Valadao Van Drew Van Duvne Van Orden Wagner Walberg Waltz Weber (TX) Webster (FL) Wenstrup Westerman Williams (NY) Williams (TX) Wilson (SC) Wittman Womack Yakvm Zinke

### NAYS-208

Adams Golden (ME) Pallone Goldman (NY) Aguilar Panetta Allred Gomez Pappas Auchineloss Gonzalez. Pascrell Balint Vicente Payne Green, Al (TX) Barragán Pelosi Beatty Grijalya. Peltola Harder (CA) Bera Perez Bishop (GA) Hayes Peters Higgins (NY) Blumenauer Pettersen Blunt Rochester Himes Phillips Bonamici Horsford Pingree Bowman Houlahan Pocan Boyle (PA) Hoyer Porter Hovle (OR.) Brown Pressley Brownley Huffman Ramirez Budzinski Ivey Raskin Bush Jackson (IL) Ross Caraveo Jackson (NC) Ruiz Carbajal Jackson Lee Ruppersberger Cárdenas Jacobs Rvan Carson Jayapal Salinas Carter (LA) Jeffries Sánchez Johnson (GA) Cartwright Sarbanes Kamlager-Dove Casar Case Kaptur Scanlon Schakowsky Casten Keating Schiff Castor (FL) Kelly (IL) Schneider Castro (TX) Khanna Scholten Cherfilus-Kildee McCormick Schrier Kilmer Chu Cicilline Kim (NJ) Scott (VA) Krishnamoorthi Scott, David Clark (MA) Kuster Sewell Clarke (NY) Landsman Sherman Cleaver Larsen (WA) Sherrill Clyburn Larson (CT) Slotkin Lee (CA) Cohen Smith (WA) Connolly Lee (NV) Sorensen Correa Lee (PA) Soto Costa Leger Fernandez Spanberger Courtney Levin Stansbury Craig Lieu Stanton Crockett Lofgren Stevens Crow Lynch Strickland Cuellar Magaziner Swalwell Davids (KS) Manning Sykes Davis (IL) Matsui Takano Davis (NC) McBath Thanedar Dean (PA) McClellan Thompson (CA) DeGette McCollum Titus DeLauro McGarvey Tlaib DelBene McGovern Tokuda Deluzio Meeks Tonko DeSaulnier Menendez Torres (CA) Dingell Meng Torres (NY) Doggett Mfume Trahan Escobar Moore (WI) Trone Eshoo Morelle Espaillat Moskowitz Underwood Vargas Evans Moulton Vasquez Fletcher Mrvan Mullin Foster Veasey Velázquez Foushee Nadler Wasserman Frankel, Lois Napolitano Schultz Watson Coleman Gallego Neguse Wexton Garamendi Nickel García (IL) Wild Norcross

### NOT VOTING-

Ocasio-Cortez

Omar

Beyer C Gottheimer G Kustoff S

Garcia (TX)

Nunn (IA)

Garcia, Robert

Obernolte Thompson (MS) Quigley Waters Simpson

Williams (GA)

Wilson (FL)