

amendment actually takes the same approach as Senator MARKEY's does. It adds a simple requirement, a requirement that before the Drug Enforcement Administration can register someone to prescribe or dispense these powerful addictive medications, that this applicant must be able to prove that they are either a U.S. citizen or a legal resident. That is it.

There is actually a Federal law already on the books that requires this. It was signed into law and passed by Congress and signed by Bill Clinton in 1996, but there was a loophole in the law that allowed States—like what New York is doing—States to come around later and exempt illegal immigrants from the requirement in their State.

New York is doing that right now through its board. It is not the State legislature that is doing it in New York. It is not the citizens of New York who are doing it. They are not the ones saying they are willing to take a chance and loosen the standards of those who can prescribe these powerful, addictive medications. This is being done, and this decision is being made by a very small State agency acting on its own authority. I think this decision is much too important to be left to a small group of people in Albany, NY.

I want to be clear. This is not about immigrants. This is about the threat that comes from the misuse of opioid painkillers. It is about maintaining the standards of the law. My grandfather came to this country. He did it legally like millions of others. He followed the rules. He worked hard. He continued to obey the law. We all know this is a country of immigrants, and we know America still proudly welcomes legal immigrants today.

We also know that being a doctor is not like other jobs. When a patient goes to her doctor, she may literally be placing her own life in that doctor's hands. People need to have complete confidence that their doctor is ethical, honest, and can be trusted with life-and-death decisions. How can a patient have this kind of faith in someone who broke the law and is in the country illegally at this time? This action by the New York Board of Regents could seriously undermine the doctor-patient relationship and the trust that needs to be there.

Doctors are held to the highest possible standards. They need to be outstanding members of their community. In the State of New York, a doctor can actually lose their license if convicted of a crime. What is it being in the country illegally? Why would we then give a license to someone who already knows they have committed a crime by being in the country illegally? It makes no sense.

As a doctor, I will tell you these opioid medications are very powerful. They can be abused, and they have been abused, especially if they fall into the hands of someone who is not up to the highest moral professional and

legal standards who is writing the prescription in the first place.

We in Congress have a responsibility to make sure such dangerous medications can be given out only by people who meet the standards. I think it would set a terrible precedent if we allow people who are in this country illegally to begin prescribing these highly addictive drugs, but that is what New York wants to do. I don't think we can allow someone who has broken the law to serve as the gatekeeper for those potentially dangerous medications. We owe every American the peace of mind that the doctor treating their sick child is who that doctor claims to be and that their doctor is in the country legally.

The New York Board of Regents is ignoring, absolutely ignoring, this important public health and public safety concern. If New York will not act to protect its people, then Congress must.

Thank you.

Mr. President, I yield the floor.

I suggest the absence of a quorum.

The PRESIDING OFFICER. The clerk will call the roll.

The senior assistant legislative clerk proceeded to call the roll.

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

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

#### RECESS

The PRESIDING OFFICER. Under the previous order, the Senate stands in recess until 2:15 p.m.

Thereupon, the Senate, at 12:30 p.m., recessed until 2:15 p.m. and reassembled when called to order by the Presiding Officer (Mr. PORTMAN).

#### COMPREHENSIVE ADDICTION AND RECOVERY ACT OF 2015—Continued

The PRESIDING OFFICER. The Senator from Rhode Island.

Mr. WHITEHOUSE. Mr. President, I suggest the absence of a quorum.

The PRESIDING OFFICER. The clerk will call the roll.

The senior assistant legislative clerk proceeded to call the roll.

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

The PRESIDING OFFICER (Mr. LANKFORD). Without objection, it is so ordered.

Mr. PORTMAN. Mr. President, today the Senate continues to work on legislation that addresses the heroin epidemic affecting our communities all over the country. Every State represented by a Senator in this Chamber is affected by it. I am pleased to see that yesterday we had a strong vote on an important step forward to consider more amendments, with the hope we will consider them today or tomorrow and then have a vote on this legislation before the end of the week and send it over to the House of Representatives,

where there is similar legislation, a companion bill that has already been drafted and is also bipartisan.

I thank SHELDON WHITEHOUSE, who is on the floor now, my coauthor, and also Senators AMY KLOBUCHAR, KELLY AYOTTE, and the 42 other bipartisan coauthors of our legislation. This is bipartisan, but it is also comprehensive and evidence based. It is not just supported by a lot of Senators, but it is also supported by a lot of groups. That is very important.

Over the past few years, Senator WHITEHOUSE and I have worked with groups around the country and in our own States to come up with the right answers; in other words, evidence-based solutions to prevention and education to help people not make the mistake and get into the funnel of addiction but also, once those people are addicted, to help them more with better treatment, better recovery, and to ensure we are treating addiction like a disease, which it is. We are also helping law enforcement and helping to keep prescription drugs off the bathroom shelves and helping to monitor people's prescription drug use because a lot of this comes from the overprescribing of prescription drugs for pain medication.

I am pleased to see we are making progress, and I want to talk about one specific issue that is included in the legislation but which we have yet to talk about, at least at length on the floor.

Over the last few years, we have had five forums in Washington, DC, to talk about issues related to addiction. Some have been with regard to the science of addiction, some about our youth, some about prevention, and some about better treatment options, but we had one that was particularly interesting, I thought. It was about a very special issue; that is, how to treat substance abuse impacting our veterans and servicemembers and how to prevent our veterans and servicemembers from becoming subject to this addiction.

In the legislation we are considering on the floor, we focus on this issue. This came out of the expert testimony we had and the work that has been done around the country on this issue. CARA allows veterans who were discharged for a substance abuse disorder to use drug courts as they recover.

Too often our men and women come home from serving our country with untreated trauma and PTSD, which often manifests itself in an addiction. We know from the research that has been done that more than 20 percent of veterans with PTSD also suffer from an addiction or dependence on drugs like heroin or a dependence on alcohol. So post-traumatic stress disorder is related very much to this addiction issue.

A few weeks ago, I was in Columbus, OH, and met with our veterans court there. We had a roundtable discussion with some of the veterans who had been through it. It was actually a very inspiring experience hearing from veterans, many of whom had been serving