

million Federal TIGER grant award that will be used to help Rhode Island replace the aging Providence Viaduct. It's part of the I-95 corridor that goes right through the center of Providence. This bill eliminates the TIGER grant program.

In April, our State Department of Transportation unveiled plans to improve the Providence Amtrak station. The station serves over 1 million Amtrak and commuter rail passengers each year, benefiting our entire State, as well as neighboring ones with multimodal connections from Providence to the Boston metropolitan area. This bill cuts Amtrak funding by 33 percent, endangering further improvements to important interstate transportation infrastructure.

In June, Rhode Islanders celebrated the 100th anniversary of the Amalgamated Transit Union Local 618. Their 1,000 members take us to school, work, to the doctor, and to the grocery store quickly and safely every day. Public transportation decreases congestion, pollution, and individual fuel costs; it connects us to recreation, family, and community; and it creates jobs in the short term, while supporting careers over the long term. This bill cuts transit funding by 17 percent from last year.

It also delivers a 25 percent cut to the Housing Counseling Assistance Fund, which helped over 2,000 Rhode Island families last year stay in their homes, avoid foreclosure, or refinance their mortgage. This bill would cut the HOME program by \$300 million, a 30 percent reduction from pre-sequestration levels. HOME is a critical resource that's used to develop affordable housing for those who need it most. It has resulted in over 4,200 units in Rhode Island alone being created.

Meanwhile, homeless families, the most vulnerable among us, once again will feel the full brunt of the majority's misplaced priorities. In 2012, over 4,800 Rhode Islanders found themselves homeless, one-quarter of them children. The State homeless assistance programs depend on Federal support to operate shelters to help move people to a permanent housing solution; yet H.R. 2610 does not come close to adequately funding these programs, placing thousands of Rhode Island families in even further jeopardy.

By cutting the administrative fund for section 8, this bill seeks to undermine the very integrity of that program. Those seeking housing assistance vouchers will find agencies understaffed, underfunded, and unable to serve the millions who depend on section 8 to stay in affordable housing. This is outrageous.

Finally, Mr. Chairman, this bill cuts the CDBG program by almost 50 percent, an unacceptable and draconian move that will cripple the neighborhoods that need the most help. These grants are the cornerstone of local investment opportunities. For every dollar spent on CDBG grants, \$3 is lever-

aged from private, nonprofit, and other non-Federal funding sources. The organizations working with CDBG funds use them for employment services, homeless assistance, child care, senior care, mental health outreach, and countless other services. I'm sad to see that the committee has decided that this is not worth the investment.

This bill is misguided, and I hope we will rethink this. I urge my colleagues to oppose it.

I yield back the balance of my time.

Mr. LATHAM. Mr. Chairman, I move that the Committee do now rise.

The motion was agreed to.

Accordingly, the Committee rose; and the Speaker pro tempore (Mrs. WOODALL, Acting Chair of the Committee of the Whole House on the state of the Union, reported that that Committee, having had under consideration the bill (H.R. 2610) making appropriations for the Departments of Transportation, and Housing and Urban Development, and related agencies for the fiscal year ending September 30, 2014, and for other purposes, had come to no resolution thereon.

REPORT ON H.R. 2855, STATE, FOREIGN OPERATIONS, AND RELATED PROGRAMS APPROPRIATIONS ACT, 2014

Ms. GRANGER, from the Committee on Appropriations, submitted a privileged report (Rept. No. 113-185) on the bill making appropriations for the Department of State, foreign operations, and related programs for the fiscal year ending September 30, 2014, and for other purposes, which was referred to the Union Calendar and ordered to be printed.

The SPEAKER pro tempore. Pursuant to clause 1, rule XXI, all points of order are reserved on the bill.

REMOVAL OF NAME OF MEMBER AS COSPONSOR OF H.R. 693

Mr. DOYLE. Mr. Speaker, I ask unanimous consent to remove my name as a cosponsor of H.R. 693.

The SPEAKER pro tempore (Mr. WOODALL). Is there objection to the request of the gentleman from Pennsylvania?

There was no objection.

ANNOUNCEMENT BY THE SPEAKER PRO TEMPORE

The SPEAKER pro tempore. Pursuant to clause 8 of rule XX, the Chair will postpone further proceedings today on motions to suspend the rules on which a recorded vote or the yeas and nays are ordered, or on which the vote incurs objection under clause 6 of rule XX.

Record votes on postponed questions will be taken later.

SCHOOL ACCESS TO EMERGENCY EPINEPHRINE ACT

Mr. BURGESS. Mr. Speaker, I move to suspend the rules and pass the bill (H.R. 2094) to amend the Public Health Service Act to increase the preference given, in awarding certain asthma-related grants, to certain States (those allowing trained school personnel to administer epinephrine and meeting other related requirements).

The Clerk read the title of the bill.

The text of the bill is as follows:

H.R. 2094

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

SECTION 1. SHORT TITLE.

This Act may be cited as the "School Access to Emergency Epinephrine Act".

SEC. 2. ADDITIONAL PREFERENCE TO CERTAIN STATES THAT ALLOW TRAINED SCHOOL PERSONNEL TO ADMINISTER EPINEPHRINE.

Section 399L(d) of part P of title III of the Public Health Service Act (42 U.S.C. 280g(d)) is amended—

(1) in paragraph (1), by adding at the end the following:

“(F) SCHOOL PERSONNEL ADMINISTRATION OF EPINEPHRINE.—In determining the preference (if any) to be given to a State under this subsection, the Secretary shall give additional preference to a State that provides to the Secretary the certification described in subparagraph (G) and that requires that each public elementary school and secondary school in the State—

“(i) permits trained personnel of the school to administer epinephrine to any student of the school reasonably believed to be having an anaphylactic reaction;

“(ii) maintains a supply of epinephrine in a secure location that is easily accessible to trained personnel of the school for the purpose of administration to any student of the school reasonably believed to be having an anaphylactic reaction; and

“(iii) has in place a plan for having on the premises of the school during all operating hours of the school one or more individuals who are trained personnel of the school.

“(G) CIVIL LIABILITY PROTECTION LAW.—The certification required in subparagraph (F) shall be a certification made by the State attorney general that the State has reviewed any applicable civil liability protection law to determine the application of such law with regard to elementary and secondary school trained personnel who may administer epinephrine to a student reasonably believed to be having an anaphylactic reaction and has concluded that such law provides adequate civil liability protection applicable to such trained personnel. For purposes of the previous sentence, the term ‘civil liability protection law’ means a State law offering legal protection to individuals who give aid on a voluntary basis in an emergency to an individual who is ill, in peril, or otherwise incapacitated.”; and

(2) in paragraph (3), by adding at the end the following:

“(E) The term ‘trained personnel’ means, with respect to an elementary or secondary school, an individual—

“(i) who has been designated by the principal (or other appropriate administrative staff) of the school to administer epinephrine on a voluntary basis outside their scope of employment;

“(ii) who has received training in the administration of epinephrine; and

“(iii) whose training in the administration of epinephrine meets appropriate medical