

I urge my colleagues to join me in supporting S. 1557 and sending this legislation to the President for his signature.

I yield back the balance of my time.

Mr. Speaker, I rise today in support of the Children's Hospitals GME Support Reauthorization Act, which reauthorizes the Children's Hospitals Graduate Medical Education (CHGME) program through 2018.

The CHGME program provides vital funding to support the training of pediatricians and pediatric specialists in children's hospitals.

Continued strong support for CHGME is essential to maintain this investment in children's health care. Reauthorizing CHGME represents a commitment to ensuring that children throughout the country have access to the quality care they need.

Since its creation in 1999, CHGME has increased the number of pediatric health care providers, addressed critical shortages in pediatric specialty care and improved access to necessary care.

The CHGME recipient hospitals represent less than one percent of all hospitals, yet train half of all the nation's pediatricians and pediatric specialists.

As a co-sponsor of the House bill that passed in February 2013 and a longtime advocate for the CHGME program, I applaud this bipartisan, bicameral effort to preserve and strengthen this important program.

Mr. PITTS. Mr. Speaker, I am very pleased to ask all Members to support S. 1557, very important legislation with bipartisan support, and I yield back the balance of my time.

Mr. WAXMAN. Mr. Speaker, I rise to support S. 1557, the Children's Hospital GME Support Reauthorization Act of 2013.

S. 1557 reauthorizes the children's hospital graduate medical education—or CHGME—program through fiscal year 2018 at an authorization level of \$300 million per year. The legislation also makes two important changes to the program. It provides for a limited expansion of the CHGME program to include children's psychiatric hospitals and other children's hospitals that have been unable—to date—to participate in the program for technical reasons. It also would allow the Secretary of Health and Human Services to redistribute any remaining funding set aside for the newly-eligible hospitals that goes unused based upon quality measures.

This program provides ongoing and consistent financial support to hospitals such as Children's Hospital of Los Angeles for the training of doctors who want to specialize in pediatrics. Over the years, the CHGME program has been enormously successful in reversing the significant decline in the number of pediatrician trainees across the country. Indeed, today, children's hospitals nationwide that are supported by the program train 49% of all pediatricians and 51% of all pediatric specialists.

Not surprisingly, the CHGME program has a decade-long history of bipartisan support. The program was first established in 1999 and has subsequently been reauthorized on two occasions. During the 112th Congress and earlier this Congress, the House passed stand alone legislation that would have reauthorized the CHGME program for another five years.

I am sure that Members on both sides of the aisle agree we want to make certain this

important program remains in place, and we want to send a strong message about the importance of fully funding it.

I want to recognize and applaud the leadership of Ranking Member PALLONE and Chairman PITTS on CHGME legislation in the House. I also want to acknowledge the sponsors of the measure we are considering today—Senators CASEY and ISAKSON. And, of course, I commend Chairman UPTON, Chairman HARKIN, and Ranking Member ALEXANDER for making it possible for the House to consider this bipartisan legislation today.

I urge my colleagues to join me in supporting S. 1557 and sending this legislation to the President for his signature.

Mr. GINGREY of Georgia. Mr. Speaker, I rise in support of S. 1557, the Children's Hospital GME Support Reauthorization Act of 2013. This bill extends and reauthorizes funding for those children's hospitals with approved graduate medical residency training program. We must act now to promote and strengthen our country's pediatric workforce.

It is no secret that our country faces a growing shortage of physicians. It is important for Congress to recognize that investments in our future doctors will be essential to ensuring patient access and quality health outcomes. If we do not have the physicians to care for our sick and needy, no amount of technological advancement will be enough to provide health care services for everyone. The vote today recognizes this fact, and will confirm our desire to provide adequate future access to pediatric care.

As a physician of over 30 years, and one who has delivered over 5,200 babies, I understand the tremendous impact that pediatricians have on the health of our children. The bipartisan support and engagement of this legislation points to its truly important need and I urge my colleagues today to vote to ensure that an adequate funding stream is available to train tomorrow's pediatricians.

For these important reasons, I support S. 1557.

Ms. EDDIE BERNICE JOHNSON of Texas. Mr. Speaker, I rise in support of S. 1557, the Children's Hospital Graduate Medical Education Support Reauthorization Act. Passed in the Senate in November, this legislation is vital to our children's health care system because it provides freestanding children's hospitals with federal funding for graduate medical education.

In my district, Children's Medical Center of Dallas trains 230 medical residents each year and is integral in addressing the current physician shortage in Texas. CHGME is vital to the continuation of the training program at Children's and at pediatric hospitals nationwide. CHGME recipient hospitals make up only one percent of all hospitals and train nearly half of all pediatricians.

Hospitals like Children's provide coordinated care for our nation's sickest kids regardless of their family's ability to pay. The CHGME program ensures that pediatricians and pediatric specialists are properly trained to care for these children, covering basic physician visits to complex, life-threatening cancers.

Since 1999, CHGME has helped to address the gap in federal support for pediatric training and specialty pediatric care. The CHGME program is a critical investment in strengthening our healthcare workforce and is essential to maintaining the gains in pediatric care. I urge

my colleagues to support the CHGME program and vote in favor of S. 1557, the Children's Hospital Graduate Medical Education Support Reauthorization Act.

The SPEAKER pro tempore. The question is on the motion offered by the gentleman from Pennsylvania (Mr. PITTS) that the House suspend the rules and pass the bill, S. 1557.

The question was taken; and (two-thirds being in the affirmative) the rules were suspended and the bill was passed.

A motion to reconsider was laid on the table.

RECESS

The SPEAKER pro tempore. Pursuant to clause 12(a) of rule I, the Chair declares the House in recess until approximately 6:30 p.m. today.

Accordingly (at 6 o'clock and 3 minutes p.m.), the House stood in recess.

□ 1830

AFTER RECESS

The recess having expired, the House was called to order by the Speaker pro tempore (Mr. BYRNE) at 6 o'clock and 30 minutes p.m.

ANNOUNCEMENT BY THE SPEAKER PRO TEMPORE

The SPEAKER pro tempore. Pursuant to clause 8 of rule XX, proceedings will resume on questions previously postponed.

Votes will be taken in the following order:

Suspending the rules with regard to the Senate amendment to H.R. 4152, S. 2183, and agreeing to the Speaker's approval of the Journal.

The first electronic vote will be conducted as a 15-minute vote. Remaining electronic votes will be conducted as 5-minute votes.

PROVISION OF COSTS OF LOAN GUARANTEES FOR UKRAINE

The SPEAKER pro tempore. The unfinished business is the vote on the motion to suspend the rules and concur in the Senate amendment to the bill (H.R. 4152) to provide for the costs of loan guarantees for Ukraine, on which the yeas and nays were ordered.

The Clerk read the title of the bill.

The SPEAKER pro tempore. The question is on the motion offered by the gentleman from California (Mr. ROYCE) that the House suspend the rules and concur in the Senate amendment.

The vote was taken by electronic device, and there were—yeas 378, nays 34, not voting 19, as follows:

[Roll No. 149]

YEAS—378

Aderholt	Bachus	Barr
Amodei	Barber	Barrow (GA)
Bachmann	Barletta	Barton