

21ST CENTURY CURES ACT

SPEECH OF

HON. JOSEPH R. PITTS

OF PENNSYLVANIA

IN THE HOUSE OF REPRESENTATIVES

Thursday, July 9, 2015

The House in Committee of the Whole House on the state of the Union had under consideration the bill (H.R. 6) to accelerate the discovery, development, and delivery of 21st century cures, and for other purposes:

Mr. PITTS. Mr. Chair, I rise in strong support for H.R. 6, the 21st Century Cures Act which will help advance the discovery, development, and delivery of new treatments and cures for patients and will foster private sector innovation here in the U.S.

Arriving here today has been a long journey—full of lots of steps and some twists and turns along the way. I especially want to thank Legislative Counsel for their tireless efforts in helping translate our legislative aims into legislative language. They worked nights and weekends and were consummate professionals throughout the process. Specifically, I want to thank the following: Warren Burke, Ed Grossman, Jessica Shapiro, Michelle Vanek, and Jesse Cross.

I also want to thank the health care staff of the Congressional Budget Office for all their help in recent months. In addition to their role in estimating the budgetary effects of numerous policies in the bill, they were instrumental in helping us shape a number of proposals the Committee considered. I specifically want to thank Holly Harvey, Tom Bradley, Chad Chirico, and all their colleagues for their diligence and assistance through the process.

And I would be remiss if I did not again thank the outstanding team on Energy and Commerce, and most especially the Health team, led by Chief Health Counsel, Clay Alspach, supported by Josh Trent, Paul Edattel, John Stone, Robert Horne, Carly McWilliams, Michelle Rosenberg, Katie Novaria, Adrianna Simonelli, Traci Vitek and Graham Pittman—without whose expertise, wisdom and counsel, this legislative work would not be possible.

H.R. 6 was reported from Energy and Commerce Committee by a vote of 51–0 and advances conservative fiscal and regulatory reforms. Every dollar of advanced appropriations in the bill (which will sunset at the end of FY 2020) is offset with other permanent reforms—including billions of dollars in mandatory entitlement savings in Medicare and Medicaid.

But this is no ordinary mandatory spending—like the kind we usually see in entitlement spending such as Social Security, Medicare, Medicaid and Obamacare. This mandatory spending is for five years only and then stops or sunsets. This mandatory spending is fully paid for with mandatory spending cuts elsewhere that will not stop in five years, but are permanent reforms resulting in real savings. By comparison, the Ryan-Murray budget deal for health care savings yielded much less.

This innovative hybrid approach allows us to cut mandatory spending (entitlement spending) and use the savings to fund what would otherwise be a discretionary project—but in this case is 5-year dedicated spending on medical research.

Congressional Budget Office determined that H.R. 6 will reduce the deficit by \$500 mil-

lion over the first ten years, and at least another \$7 billion over the second decade.

The funds provided to the National Institutes for Health (NIH) and Food and Drug Administration (FDA) will be subject to explicit review and reprogramming through the annual appropriations process. Congress can review the dedicated funding and allocate it for specific initiatives.

Additionally, all the important policy riders that accompany federal funding through appropriations will be included—such as the Hyde Amendment and the Dickey-Wicker Amendment.

This bill also includes a policy that excludes authorized generics from Average Manufacturers' Price. This is a commonsense policy from the President's budget proposal, intended to ensure the appropriate calculation of Medicaid brand name rebates paid by manufacturers. The policy is not intended to effect Medicaid programs' pharmacy reimbursements. Instead, the provision, which many states support, will result in an increase in manufacturer rebates under Medicaid and thus save money for states and the federal government.

H.R. 6 will help America to innovate its way out of our entitlement crisis. The regulatory reforms included in H.R. 6 will accelerate the pace of discovery, development and delivery of new treatments and cures, thereby providing significant health care savings to the federal budget that will only grow over time.

By modernizing clinical trials, eliminating duplicative administrative requirements, and perhaps most importantly, making FDA less bureaucratic by advancing the voice and needs of patients in the drug and device approval process—H.R. 6 will make lasting, positive changes to the entire ecosystem of Cures. Over 250 patient groups have enthusiastically said “yes” and endorsed Cures.

I urge all of my colleagues to think of the patients and vote “AYE” in support of H.R. 6.

PROVIDING FOR CONSIDERATION
OF H.R. 6, 21ST CENTURY CURES
ACT

SPEECH OF

HON. LOUISE McINTOSH SLAUGHTER

OF NEW YORK

IN THE HOUSE OF REPRESENTATIVES

Thursday, July 9, 2015

Ms. SLAUGHTER. Mr. Speaker, I am the Ranking Member of the Rules Committee. Rules, as you know, is the process committee.

Whether you are a majority or a minority member, you have rights, but they have been trampled on and abused with increasing regularity under this majority, and we have two glaring examples of that just today.

Mr. Speaker, this bill is important to all of us, and we all agree on the importance of putting more money into major research in the United States, we are falling behind other countries in finding the cures and the innovation for which we have been known for centuries. This is an important step that we are taking. This is a critically important bill, but process matters.

Mr. Speaker, after the Energy and Commerce Committee had voted out this bill unanimously, major changes were made with no committee input at all. They include a reduction of the amount of money that the com-

mittee had said would be put into the National Institutes of Health by \$1.250 billion, a very substantial sum.

They added some policy riders that literally made no sense. Why in the world would you put an abortion rider on a bill for medical research? As far as I know, the NIH and most medical universities doing this research do not perform abortion procedures. It was simply a way, again, to mollify members and make them vote for this bill.

Mr. Speaker, despite the importance of this bill, despite the fact that it came out of committee unanimously, despite the fact that so many people have worked on it, and despite the fact that good things were in it, the process was completely changed after it was over by rewriting major portions of it. That doesn't appear anywhere in the rules of the House.

Now, let's also think about what happened here last night during the debate on the Interior bill, which was considered under an open rule. After the Ranking Member, BETTY MCCOLLUM of Minnesota, had yielded back her time, a new amendment was offered at the request of Republican leadership in order to pick up enough votes to ensure final passage. This new amendment sought to undo two already adopted amendments that would restrict the display of the Confederate flags in National Park Service cemeteries. These amendments were initially noncontroversial—as they should have remained. In fact, they were adopted by voice vote. However, following a revolt by Members of the Republican Conference, Republican leadership offered this new amendment without any warning in order to gain more votes. In the end, the Majority pulled the entire bill in order to avoid taking a vote on their effort to place Confederate flags in U.S. cemeteries.

Mr. Speaker, and then this morning the Majority chose to send Leader PELOS's resolution to committee in order to avoid taking a vote on it. Her resolution would have required the removal of state flags containing the Confederate battle flag from the House wing of the Capitol, unless the flag is flown by an individual Member. Mr. MCGOVERN stated quite precisely that the resolution will die in committee—we will never see that one again. Unfortunately, that's what happens here, but Mr. Speaker, it is time it was stopped.

I was born in a border State, in Kentucky. I lived there most of my life. I was educated there. I never saw a Confederate flag in all those years. These battle flags that they are putting up appeared in the South after the civil rights legislation. They were the products of Strom Thurmond and the Dixiecrats. That is when they started to bloom all over. It is a symbol of pure hate or fear. It needs to go.

RECOGNIZING THE 2015 OFFICERS
OF THE OCCOQUAN WOODBRIDGE
LORTON VOLUNTEER FIRE DE-
PARTMENT

HON. GERALD E. CONNOLLY

OF VIRGINIA

IN THE HOUSE OF REPRESENTATIVES

Monday, July 13, 2015

Mr. CONNOLLY. Mr. Speaker, I rise to recognize the 2015 Officers of the Occoquan Woodbridge Lorton Volunteer Fire Department. The 2015 officers and members of the