of his retirement from the United States Navy, I thank him, his wife, and their four children for their honorable service to our nation and wish them fair winds and following seas as Captain Harris concludes this portion of his distinguished legal career.

HONORING THE REVEREND MI-CHAEL L. COOPER-WHITE OF PENNSYLVANIA

HON. SCOTT PERRY

OF PENNSYLVANIA IN THE HOUSE OF REPRESENTATIVES

Thursday, March 9, 2017

Mr. PERRY. Mr. Speaker, today I honor my constituent, the Reverend Michael L. Cooper-White, upon the occasion of his retirement as the 12th president of the Lutheran Theological Seminary at Gettysburg, and more than 40 years of service to the Church.

Rev. Cooper-White has served as President of the Lutheran Theological Seminary at Gettysburg since 2000, where he led efforts to: revise curriculum to strengthen an integrative approach to theological education; strengthen the seminary's fiscal health; and forge the pathway of the forthcoming consolidation with the Lutheran Theological Seminary at Philadelphia to form the United Lutheran Seminary. Rev. Cooper-White also served in leadership positions with the Evangelical Lutheran Church in America, the Eastern Cluster of Lutheran Seminaries, the Washington Theological Consortium and myriad local boards. His ministry has spanned multiple continents and he's served the Church as pastor, teacher, author and engaged citizen.

Reverend Cooper-White's dedication has touched the lives of countless people and challenged all with whom he served to be the best. His legacy of service is commendable.

On behalf of Pennsylvania's Fourth Congressional District, I commend and congratulate Reverend Michael L. Cooper-White upon his retirement after many years of service to the Lutheran Theological Seminary at Gettysburg and our community.

FIRST SPECIAL SERVICE FORCE

HON. JOE WILSON

OF SOUTH CAROLINA

IN THE HOUSE OF REPRESENTATIVES Thursday, March 9, 2017

Mr. WILSON of South Carolina. Mr. Speaker, on March 3, 2017, I was grateful to present a Congressional Gold Medal to Joseph Moore of Lexington, South Carolina for his service with the First Special Service Force, a U.S.— Canadian unit of volunteers, who initiated the liberation of Europe at Anzio, Italy, in January

1944. During the presentation with his family, he presented me with an extraordinary prayer which was read by Eugene Gutierrez at the 2015 Reunion of the First Special Service Force. The following prayer was found on the body of an American soldier killed in action on the beachhead at Anzio:

Look God, I have never spoken to you. But now I want to say, "How do you do?" You see, God, they told me you didn't exist. And like a fool, I believed all this. Last night from a shell hole, I saw your sky And figured then they had told me a lie. Had I taken time to see things you made, I'd have known they weren't calling a spade a spade.

I wonder, God, if you'd shake my hand? Somehow, I feel you will understand. Funny, I had to come to see your face. Well, I guess there isn't much more to say. But, I'm sure glad, God, I met you today. I guess the zero hour will soon be here, But I'm not afraid since I know you are near. There's the signal . . . I've got to go. I like you lots, I want you to know. Look now, this will be a horrible fight. Who knows, I may come to your house tonight.

Though I wasn't friendly to you before, I wonder, God, if you'd wait at your door? Look, I'm crying . . . me, shedding tears. I wish I had known you these many years. Well, I have to go now, God, goodbye . . . Strange, since I met you, I'm not afraid to die.

RECOGNIZING THE 29TH ANNIVER-SARY OF MASSACRES AGAINST ARMENIANS IN SUMGAIT

HON. JIM COSTA

OF CALIFORNIA

IN THE HOUSE OF REPRESENTATIVES

Thursday, March 9, 2017

Mr. COSTA. Mr. Speaker, I rise today to recognize the twenty-ninth anniversary of the pogroms against people of Armenian descent in Sumgait, Azerbaijan.

In late February of 1988 the Armenian people of Nagomo Karabakh, more commonly known by its people and descendants as Artsakh, rose up in peaceful protest to demand their right to self-determination. This courageous call for equality and human dignity was met with murderous riots beginning on February 27, 1988 which lasted for three days. Scores of Armenians were killed, hundreds were wounded, and thousands were forced to leave their homes and livelihoods behind.

Undeterred by this oppression, the Armenian community and its dedication to democratic self-determination sparked a movement that finally helped bring an end to the dictatorship of the Soviet Union. The courage demonstrated by the people of Artsakh in demanding their rights even after all of the adversity is admirable and should never be forgotten.

Sadly however, authoritarian leaders in Azerbaijan continue to this day to aggravate efforts by the Organization for Security Co-operation in Europe Minsk Group to achieve lasting peace in Artsakh and the surrounding region. On February 25, 2017, just a few days ago, the ceasefire along the line of contact was breached resulting in several casualties. This aggression is completely unacceptable and further hurts efforts to achieve a peaceful resolution to this conflict.

On behalf of the thousands of Armenian Americans living in my congressional district I ask my colleagues to stand with the people of Artsakh in remembering the lives lost during this tragic conflict. May their memory serve as a reminder for each and every one of us to continue advocating for human rights and democratic freedoms around the world. THE KHOJALY TRAGEDY

HON. GENE GREEN

IN THE HOUSE OF REPRESENTATIVES

Thursday, March 9, 2017

Mr. GENE GREEN of Texas. Mr. Speaker, on February 25 and 26, 1992, twenty-five years ago, the Armenian military forces occupied the town of Khojaly and destroyed hundreds of innocent lives. Those that weren't killed were wounded or taken hostage while their city was under siege.

Khojaly was recognized as occupied territory from 1988 until 1994 when a ceasefire was signed. The aggression and occupation by Armenian forces has been condemned by the United Nations Security Council.

More than two decades have passed since those horrific events and little attention has been paid to those killed during the attacks and the struggles of displaced person.

According to Human Rights Watch and other international observers the massacre was committed by Armenian troops, reportedly with the help of the former Soviet 366th Motor Rifle Regiment. Human Rights Watch described the Khojaly Massacre as "the largest massacre to date in the conflict" over Nagorno-Karabakh. In a 1992 report, they stated that Armenian forces and the 366th "deliberately disregarded this customary law restraint on attacks."

Every year, more and more organizations and countries recognize the terrible tragedy perpetrated against Azerbaijani citizens in Khojaly that night. Each year, we need to recognize that without constant reminders and vigilance, violence can be perpetrated against innocent people. We need to stand up and remember that it is the right of all people to coexist peacefully without fear of brutality.

Azerbaijan has been a strong strategic partner and friend of the United States. The tragedy of Khojaly was a war crime which cannot be ignored.

Let's stand with the people of Azerbaijan as they commemorate this tragedy and urge world leaders to help bring a peaceful solution to the occupation of these lands.

RECOGNIZING NACDS RXIMPACT DAY

HON. EARL L. "BUDDY" CARTER

OF GEORGIA

IN THE HOUSE OF REPRESENTATIVES

Thursday, March 9, 2017

Mr. CARTER of Georgia. Mr. Speaker, I rise to recognize the Ninth Annual NACDS RxIMPACT Day on Capitol Hill. This is a special day where we will have the chance to recognize pharmacy's many contributions to the American healthcare system.

Organized by the National Association of Chain Drug Stores (NACDS), this event will take place next week, on March 14–15, 2017. More than 400 individuals from the pharmacy community, including practicing pharmacists, pharmacy school faculty and students, state pharmacy association representatives and pharmacy company leaders, will visit us here on Capitol Hill. Advocates from 47 states will share their views with us about the importance of supporting their access agenda, legislative priorities that will ensure that our constituents will continue to have access to more than 40,000 community and neighborhood pharmacies across the country and be better able to utilize pharmacists to improve healthcare quality while reducing the cost of care.

Patients have always relied on their local pharmacist to meet their healthcare needs and we as policymakers know our local pharmacists to be important community leaders. They are trusted, highly accessible healthcare providers deeply committed to providing high quality, convenient, and efficient healthcare services. A recent national survey showed that 65 percent of the public view pharmacists as individuals who provide credible advice to reduce health costs and in 2016, pharmacists and Ethics survey.

As demand for healthcare services continues to grow, pharmacists have expanded their role in healthcare delivery, partnering with physicians, nurses and other healthcare providers to meet their patients' needs. Innovative services provided by pharmacists do even more to improve overall patient health and wellness.

Pharmacists are highly valued by those that rely on them most, those in rural and underserved areas, as well as older Americans, and those struggling to manage chronic diseases. Pharmacy services improve patients' quality of life as well as healthcare affordability. By helping patients take their medications effectively and providing preventive services, pharmacists help avoid more costly forms of care. Pharmacists also help patients identify strategies to save money, such as through better understanding of their pharmacy benefits, using generic medications, and obtaining 90-day supplies of prescription drugs from local pharmacies. Pharmacists are the nation's most accessible healthcare providers. In many communities, especially in rural areas, the local pharmacist is a patient's most direct link to healthcare. In fact, 91 percent of Americans reside within five miles of a community pharmacy. Utilizing their specialized education, pharmacists play a major role in medication therapy management, disease-state management, immunizations, healthcare screenings, and other healthcare services designed to improve patient health and reduce overall healthcare costs. Pharmacists are also expanding their role into new models of care based on quality of services and outcomes, such as accountable care organizations (AC0s) and medical homes.

The pharmacy advocates of NACDS RxIMPACT Day on Capitol Hill will be promoting an access agenda. They know that we face difficult debates about the future of healthcare and the pharmacy community wishes to work with us to help in the effort to develop comprehensive and consistent approaches to public policy that put pharmacy's value to work for patients and payers. They understand well that the issues we are debating today are highly connected and vital to pharmacy, to all of healthcare, and to society as a whole.

Specifically, advocates will be working to ensure that any changes to the Affordable Care Act do not jeopardize patient access to their local community retail pharmacy. They will also be seeking our support for H.R. 592, the Pharmacy and Medically Underserved Areas Enhancement Act, a bill I strongly sup-

port to allow Medicare Part B to utilize pharmacists to their full capability by providing underserved beneficiaries with services, subject to state scope of practice laws. Already in the 115th Congress, H.R. 592 has 134 cosponsors and the companion bill in the Senate, S. 109, has 32 cosponsors. Finally, they will be talking with us about ways to improve neighborhood pharmacy access for TRICARE beneficiaries and about bringing much-needed transparency and consistency to so-called DIR fees, the complicated fee structure imposed on pharmacies to participate in the Medicare Part D program.

I believe Congress should look at every opportunity to make sure that pharmacists are allowed to utilize their training to the fullest to provide the services that can improve care, increase access and lower costs. In recognition of the Ninth Annual NACDS RxIMPACT Day on Capitol Hill, I would like to congratulate pharmacy leaders, pharmacists, students, and the entire pharmacy community represented by NACDS, for their contributions to the health and wellness of the American people.

HONORING THE LIFE AND SERVICE OF REPRESENTATIVE ENI FALEOMAVAEGA

HON. KEITH ELLISON

OF MINNESOTA

IN THE HOUSE OF REPRESENTATIVES

Thursday, March 9, 2017

Mr. ELLISON. Mr. Speaker, I rise today to honor the life and service of Representative Eni Faleomavaega. He passed away on February 22, 2017 in his home at age 73. Representative Faleomavaega was American Samoa's lieutenant governor from 1985 through 1989, and congressional delegate from 1989 through 2014.

Mr. Faleomavaega was born in Vailoatai Village, American Samoa in 1943, and graduated from Brigham Young University. He later earned his Juris Doctor and Master of Law degrees at the University of Houston Law Center and the UC-Berkeley, respectively. He served in the United States Army from 1966 through 1969, and fought in the Vietnam War.

In 1973, Mr. Faleomavaega started his life in public service by working as an administrative assistant to American Samoa's first representative, A.U. Fuimaono. Following a sixyear stint as staff counsel for the House Committee on Interior and Insular Affairs beginning in 1975, he became attorney general of American Samoa in 1981.

During his time in the House of Representatives, he helped improve the lives of his constituents, directing essential funding to help the development of schools, infrastructure, and health care in American Samoa. Mr. Faleomavaega was a founding member of the Asian Pacific American Caucus in 1994, and was a tireless advocate on behalf of the wider Asian American and Pacific Islander Community. He served thirteen terms, and was a proud member of both the House Natural Resources Committee and the House Foreign Affairs Committee, where he was a ranking member of the Subcommittee on Asia.

He is survived by his wife, five children and 10 grandchildren. Upon his passing, Mr. Faleomavaega's wife expressed gratitude for the trust placed in him for so many years by the people of American Samoa. I am honored

to recognize Representative Eni Faleomavaega for his work as a public servant. We are all better off due to his life of service. He is dearly missed by his friends and colleagues.

COMMUNITY PHARMACIES

HON. H. MORGAN GRIFFITH

IN THE HOUSE OF REPRESENTATIVES

Thursday, March 9, 2017

Mr. GRIFFITH. Mr. Speaker, last month Congressman WELCH and I introduced legislation H.R. 1038, Improving Transparency and Accuracy in Medicare Part D Spending Act. The legislation would help ensure that small business pharmacies get reimbursed at the rate they agreed to when they signed the reimbursement contract with the pharmacy benefit manager (PBMs).

Our bill would prohibit the PBMs/health plans from retroactively reducing pharmacy reimbursement that has already been contractually agreed to. If you fill up your gas tank when the price is \$2.09 per gallon and the price later goes up to \$2.15, you won't receive a bill demanding payment for the extra six cents per gallon. The same principle should apply to our community pharmacists. They deserve to be reimbursed based on the price of drugs when they are dispensed, not when they are charged. The fact that the PBMs can even do this points to the need for action on this bill and the need for broader Congressional scrutiny of large PBMs.

Most Americans don't know who the large PBMs are and what they do—three large PBMs control roughly 78 percent of the market and manage pharmacy benefits for more than 180 million Americans. PBMs not only manage benefits for insurance companies and employers, they also own their own pharmacies whether that is mail order, specialty or retail.

Unfortunately small pharmacies in Southwest Virginia and Vermont have dealt with direct and indirect remuneration (DIR) fees for the last few years and the fees are only getting worse. The inability of small business community pharmacy owners to plan in advance for these retroactive fees is truly threatening their ability to operate.

Additionally these fees push patients into the donut hole faster than they would otherwise, a fact that CMS has stated. CMS has also stated these fees are increasing costs to the government, especially in the catastrophic phase of the Part D program. Virtually all catastrophic costs in Part D are borne by the government, and they have increased dramatically in recent years-from \$10 billion in 2010 to \$33 billion in 2015-fueled by pharmacy DIR fees. These PBMs have an extremely robust business relationship with the Federal Government in Part D, FEHB and DOD TRICARE so it certainly seems possible that the Federal Government could be paying more for prescription drugs than it should be.

Our bill was introduced with 15 original cosponsors and we hope that it will see action in the 115th Congress. Prohibiting retroactive fees like this would help CMS have a better ability to understand all the prescription drug spending that is occurring in Medicare Part D. Additionally, Senators SHELLEY MOORE CAPITO (R-WV) and JON TESTER (D-MT) introduced