and love for the ministry explain why so many follow his vision of hope.

QUIETER SKIES

(Ms. LEE asked and was given permission to address the House for 1 minute.)

Ms. LEE. Mr. Speaker, I want to comment very briefly on the Federal Aviation Reauthorization Act, which provides long-term stability for our Nation's aviation community and critical investments in U.S. airports. I have many, many issues in my district that this bill, hopefully, will address.

Airplane noise is an issue that directly affects my constituents in the East Bay. I have convened meetings with Federal and local stakeholders to come up with a regional solution to airport noise in the bay area.

This bill will help us make progress to address noise pollution and ensure that my constituents can live under quiet skies. It would establish a pilot program for the Department of Transportation to give grants of up to \$2.5 million to six airports for noise mitigation projects. That is so important.

Also, I am pleased to see that the bill includes language that would require the FAA to partner with higher education institutions to assess the health effects of white noise.

While these changes may not reduce airplane noise immediately, we are moving in the right direction. I look forward to working with the FAA to ensure my constituents affected by airplane noise are addressed in a timely fashion. This legislation is critical legislation to help support America's innovation in aviation technology and will ensure quieter skies for all.

DEA NATIONAL PRESCRIPTION DRUG TAKE BACK DAY

(Ms. KAPTUR asked and was given permission to address the House for 1 minute.)

Ms. KAPTUR. Mr. Speaker, I rise today to call attention to National Prescription Drug Take Back Day this Saturday, April 28.

While prescription opioids may be a short-term, safe treatment for extreme pain management, misuse and addiction can become a tragic side effect and are extremely common, unfortunately. Ohio is second in our Nation in opioid overdose deaths per capita.

According to the National Survey on Drug Use and Health, 6.4 million Americans abused controlled prescription drugs in 2015. About half of the people over the age of 12 who misused prescription pain relievers obtained the drugs from a friend or relative.

Americans of sound mind and body must do more to reduce this number and mitigate misuse by taking action. Please join your fellow citizens in participating in National Prescription Drug Take Back Day this Saturday, April 28. Proper disposal of drugs can save lives.

Remember that you can go to a collection site any day of the year to deposit unused or extra pills and prescription drugs. Get rid of them.

You can find a collection site near you by visiting takebackday.dea.gov.

Do your part to prevent accidental poisoning misuse and overdose today. Your vigilance matters.

$\begin{array}{c} \text{HONORING THE LIFE OF ADRIAN} \\ \text{MURFITT} \end{array}$

(Mr. KIHUEN asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. KIHUEN. Mr. Speaker, today, I rise to remember the life of Adrian Murfitt, who went to Las Vegas on October 1 for the Route 91 festival.

Adrian had a love for fishing. He would spend months on a commercial fishing boat to catch and sell fish. When it was not fishing season, he would repair appliances, tinker with cars, and spend time with his friends.

Adrian was a very hard worker and decided to reward himself for a successful fishing season by traveling to Las Vegas. He loved to listen and sing country music with a voice that friends described as "beautiful."

He enjoyed his two dogs, Laika and Paxson, and always made sure to spend time with them. Adrian had many friends who remember him as being silly and goofy and wanting to make people laugh, no matter what.

I would like to extend my condolences to Adrian Murfitt's family and friends. Please know that the city of Las Vegas, the State of Nevada, and the whole country grieve with you.

MEDICARE FOR ALL

(Mrs. CAROLYN B. MALONEY of New York asked and was given permission to address the House for 1 minute.)

Mrs. CAROLYN B. MALONEY of New York. Mr. Speaker, I rise to join my colleague and good friend Representative Ellison and other members of the Progressive Caucus to say that healthcare should be a right for everyone in the United States of America.

I have proudly cosponsored the Medicare for All legislation for many years because I don't believe a person's economic status should have any bearing whatsoever on their ability to access quality and affordable healthcare.

The Affordable Care Act took us a long way toward that goal, and I am so proud of that vote. I am proud to join all of the Members here who are supporting it and to fight back against attacks from the Republican majority and the White House to dismantle it.

But we can't just play defense. We have to move toward ensuring greater access to coverage, greater affordability, stronger consumer protections, and higher quality healthcare services. That is why this bill is so important, and I think its time has come.

What Medicare for All would provide is universal coverage for everyone.

This is something we should be taking up right now. I am proud to join my colleagues who are supporting it.

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RECOGNIZING THE LIFE AND SERVICE OF TIQUE LEE CAUL

(Mr. DESAULNIER asked and was given permission to address the House for 1 minute.)

Mr. DESAULNIER. Mr. Speaker, I rise today to recognize the life and service of a longtime Antioch, California, resident and friend, Ms. Tique Lee Caul.

Tique was a single mother, worked full-time, attended classes at Laney College, and served as a volunteer with Habitat for Humanity. She was a trail-blazer and a woman who wore many hats. She also sat on multiple boards, including Toastmasters and Black Women Organized for Political Action.

She was a true stalwart of our community, active with volunteers in many efforts. She enjoyed supporting others in their personal transformation and goal attainment.

A mother of five beautiful children, a successful realtor, Tique was a shining light until the very end. She will be sincerely missed by her family, friends, everyone who knew her, and our community.

BETTER DEAL VERSUS RAW DEAL

(Mr. CICILLINE asked and was given permission to address the House for 1 minute.)

Mr. CICILLINE. Mr. Speaker, almost 2 years ago, Presidential candidate Donald Trump said: "We are going to win so much, you are going to get tired of winning."

It has been 16 months since Republicans took control of the White House and Congress, and the only people who are winning are the wealthy and well connected. The rest of America is getting a raw deal.

The Republicans have failed to make healthcare more affordable. They have failed to invest in rebuilding our crumbling infrastructure. They failed to lower the cost of living for working families, and they failed to drain the swamp. The rigged system that they promised to tear down is now bigger and stronger than ever before. The wealthy and well connected are making out like bandits while working people are asked to sacrifice more and more each day.

It doesn't have to be this way. Democrats are offering a better deal: a better deal to deliver better jobs, better wages for a better future; a better deal to raise incomes, lower the cost of living, and make sure the economy works for all Americans, not just those at the very top.

Let's give the American people a better deal than the raw deal they are getting from the Republicans.

MEDICARE FOR ALL

The SPEAKER pro tempore. Under the Speaker's announced policy of January 3, 2017, the gentleman from Minnesota (Mr. ELLISON) is recognized for 60 minutes as the designee of the minority leader.

Mr. ELLISON. Mr. Speaker, today we are going to talk about Medicare for All, the importance of making sure that every American, regardless of income, can get the healthcare that they need. That will be our topic over the course of the next hour.

So I would like to invite to the podium to kick off our discussion the gentleman from California, Mr. Ro KHANNA, a distinguished gentleman from the great State of California who has been a leader on economic justice, and justice in general.

Mr. Speaker, I yield to the gentleman from California (Mr. KHANNA).

Mr. KHANNA. Mr. Speaker, I thank the distinguished gentleman from Minnesota for his leadership on so many issues, particularly on healthcare and the fight for Medicare for all.

I rise today to share a heartbreaking story so we understand what is at stake in this fight.

Sarah Fay Broughton was a young woman in San Jose, California. Sarah was going to work with special needs kids. At the age of 20, she came down with a simple sinus infection. Such a condition is usually managed by a primary care physician and an ordinary specialist. However, Sarah did not receive treatment because she could not afford health insurance.

Six months before she fell ill, Sarah applied for Medi-Cal, California's Medicaid system, but her paperwork kept getting lost. The county was so overwhelmed that her family went through three different caseworkers trying to get medical coverage, but each time they were told to start over. Like more than 28 million Americans without any healthcare, for Sarah, getting sick meant facing crippling medical bills and harassment by debt collectors.

So she ignored the pain, only going to the emergency room when it became too much to bear. By that point, the simple sinus infection had grown powerful, spreading to her brain, swelling it, and causing irreversible damage. It was simply too late. On the day Sarah passed away, her family received a letter saying that her Medi-Cal coverage had been approved. She was doing everything right, but the system failed her. Her life was cut short because the wealthiest country in the world has not yet prioritized healthcare.

The question is: Should a young woman who is 20 years old die of a simple sinus infection in the United States of America? If we care about the lives of people like Sarah, if we believe that healthcare is a basic right, then it is long past time to have Medicare for All. Every American should be guaranteed decent, basic healthcare from the day they are born.

This is not a political issue. This is a moral issue. It is an issue of human de-

cency. It is an issue to make sure we don't have people who have simple conditions like Sarah be denied the care they deserve.

That is why I am so proud of my colleague KEITH ELLISON for leading the call for Medicare for All. I am proud to serve on the task force and encourage my colleagues to join him, PETER WELCH, and other voices in bringing to this country Medicare for All.

Mr. ELLISON. Mr. Speaker, I want to thank the gentleman again for his comments. We can talk about statistics. We can talk about the way the program is going to work. We can talk about all these things. But there is nothing that can replace the precious life of the young woman whom you talked about. She had people who loved her. She had people who knew her. She had everything to look forward to.

She just needed her society, her community, to step forward for her and to help her. And because we don't have the kind of healthcare system we could have, we weren't there for her. But in her memory, we have to be able to make it right for the young people and the people who are still with us. In her memory, we will fight for Medicare for All.

I thank the gentleman. Would the gentleman like to make any final comments?

Mr. KHANNA. Mr. Speaker, I appreciate the gentleman saying that. I had a conversation with her mother and with the community, and people just feel: what a tragic loss. So, if there are things we can do here under your leadership and as elected Representatives, I hope we will—and we will—take seriously the consequence of the failure in our healthcare policy.

Mr. ELLISON. Mr. Speaker, I would like to invite to share a few remarks the gentleman from the great State of Vermont. As you can see from the course of this debate, Mr. Speaker, we have tremendous geographic diversity: California, Vermont. But we have one thing in common: we need a healthcare system that works for everybody.

Mr. Speaker, I yield to the gentleman from Vermont (Mr. WELCH), my good friend.

Mr. WELCH. Mr. Speaker, I thank the gentleman very much for yielding.

We have the wealthiest country in the world, we have the healthcare system that is the most expensive in the world, and we have more costs and more people not covered than is at all necessary. The fact is, we have had as a goal in this country, since the Presidency of Harry Truman, a goal that all our citizens be covered and have access to healthcare.

And that dream made a solid step forward when Lyndon Baines Johnson was the President and Congress, on a bipartisan basis, passed Medicare, which provided healthcare protection for all Americans 65 and older and provided Medicaid for low-income children and families. We made a second step forward, unfortunately not on a bipar-

tisan basis, with the passage during the Obama administration of the Affordable Care Act. That extended coverage to millions of Americans who otherwise never would have had access to care. It also made some significant improvements in how we deliver care.

We are continuing with that battle. Those are two solid steps forward. Medicare and Medicaid passed in the Johnson administration and the Affordable Care Act during the Obama administration. Yet we are still spending the most on healthcare with outcomes that are not the best and, in fact, in many cases, are not even in the top ten. So we are spending the most and getting the least.

The program for healthcare that has the most popularity in this country among Republicans, among Democrats, and among Independents is Medicare. The reason: all of us pay into the Medicare fund, and then when we are eligible at 65, we are all covered. It is simple. It is not a government-run program. It is financed by taxpayers, and taxpayers are the beneficiaries of that program itself. It makes sense. It has the confidence of the American people.

It also puts us in a position to try to control costs, not at the expense of throwing 24 million people off of the healthcare rolls, which is what would have happened had the repeal of the Affordable Care Act been passed; but by bringing down, for instance, the cost of prescription drugs, where something that was costing \$7.50 suddenly cost \$1,500 per pill because the owner bought up a company and then had a monopoly power and stuck it to the consumers.

I believe we should strive to get Medicare for every single citizen in this country. Would there be hard questions that we have to address? Sure. There are. But what we have now with this fractured system is young girls who, because they don't have access to healthcare, because the bureaucracy takes so much time to see if she is eligible for Medicaid, or Medi-Cal in the case of this young girl, they don't get access to care, and the tragedy of that situation is that this young woman lost her life.

Had there been healthcare where the parents weren't terrified about what that bill would be, about how they might have to take out a second mortgage, about how they would be bearing the burden of escaping the clutches of bill collectors, that person would have been able to get to a doctor in time to get limited care that would have taken care of what, at that point, was a very limited challenge.

So I thank my colleague (Mr. Ellison) for convening this here tonight. And the goal that I believe we should have in this country is to have a healthcare system where everybody is covered and everybody helps pay for that system and is about affordable, quality care where the emphasis is on the patient and on the taxpayer.

By the way, this is not about making government run the healthcare. That is