

servicing others. I know that Felipe's legacy will inspire future generations to honorably serve our fellow man.

Madam Speaker, last month our country lost a veteran, and one of its kindest individuals. His family will be in my thoughts and prayers. It is a privilege to represent individuals like Felipe Huerta, Jr. and his family.

HONORING THE SERVICE OF  
GENNARO (JERRY) CIANCIOTTA

HON. LEE M. ZELDIN

OF NEW YORK

IN THE HOUSE OF REPRESENTATIVES

*Wednesday, January 9, 2019*

Mr. ZELDIN. Madam Speaker, today I rise to honor the service and sacrifice of Gennaro (Jerry) Cianciotta who was born on January 13, 1919, grew up in the Bensonhurst section of Brooklyn and now resides in Ronkonkoma, New York.

Jerry enlisted in the United States Army Air Corps during the summer of 1940 and was sent to Fort Benning in Georgia where he was assigned to the Fifteenth Air Corps Group—68th Materiel. Upon completion of Basic Training, Jerry was transferred to Africa where he encountered enemy fire and bombings by the German military. Tasked with the treacherous job of refueling aircrafts, he achieved the rank of Corporal and was awarded multiple awards for his service, including a Good Conduct medal.

Jerry was then sent to England, where the enemy aggression continued. "I was really lucky," Jerry stated in reference to surviving the bombs and fire he encountered. After serving in England for a year, Jerry, who was fluent in Italian, was sent to Italy, where he remained until just prior to the end of World War II. Having returned home on leave to get married at the conclusion of the war, Jerry returned to Fort Dix, New Jersey, where he was honorably discharged.

For his service and sacrifice, our Nation will always be indebted to Buck Sergeant Gennaro (Jerry) Cianciotta, and his bravery and selflessness, then and now, continues to inspire us all.

ADOPTING THE RULES OF THE  
HOUSE OF REPRESENTATIVES  
FOR THE 116TH CONGRESS

SPEECH OF

HON. SHEILA JACKSON LEE

OF TEXAS

IN THE HOUSE OF REPRESENTATIVES

*Thursday, January 3, 2019*

Ms. JACKSON LEE. Mr. Speaker, in 2010, after a century of trying, under the leadership of Speaker NANCY PELOSI and our nation's 44th President, Barack Obama, the Affordable Care Act became the law of the land.

Before the Affordable Care Act, untold millions of Americans lived with the reality that they did not have access to Affordable Care Act.

Before the passage of the Affordable Care Act, 17.1 percent of Americans lacked health insurance; today nearly nine of ten (89.1 percent) are insured, which is the highest rate since Gallup began tracking insurance coverage in 2008.

Because of the Affordable Healthcare Act: insurance companies are banned from discriminating against anyone, including 17 million children, with a preexisting condition, or charging higher rates based on gender or health status; 6.6 million young-adults up to age 26 can stay on their parents' health insurance plans; 100 million Americans no longer have annual or life-time limits on healthcare coverage; 6.3 million seniors in the "donut hole" have saved \$6.1 billion on their prescription drugs; 3.2 million seniors now get free annual wellness visits under Medicare, and 360,000 Small Businesses are using the Health Care Tax Credit to help them provide health insurance to their workers; Pregnancy is no longer a pre-existing condition and women can no longer be charged a higher rate just because they are women.

This bill was fiercely debated for over a year. It passed both houses of Congress and was signed by President Obama on March 23, 2010.

The bill did many things—it improved access to quality care; made care more affordable, and improved the quality of the law.

It also advanced several pillars that will undoubtedly advance healthcare in America.

For example, the Affordable Care Act:

Lowers the uninsured rate. Gallup recently estimated that the uninsured rate in Texas in 2015 was 22.3 percent, down from 27.0 percent in 2013. In 2017, the number was at 16 percent.

Prohibits coverage denials and reduced benefits, protecting as many as 10,694,840 Texans who have some type of pre-existing health condition, including 1,632,475 children.

Eliminates lifetime and annual limits on insurance coverage and establishes annual limits on out-of-pocket spending on essential health benefits, benefiting 7,536,000 people in Texas, including 2,771,000 women and 2,094,000 children.

Allows states to expand Medicaid to all non-eligible adults with incomes under 133 percent of the federal poverty level. If Texas expands Medicaid, an additional 1,107,000 uninsured people would gain coverage.

Establishes a system of state and federal Health Insurance Exchanges, or Marketplaces, to make it easier for individuals and small-business employees to purchase health plans at affordable prices. During the open enrollment period for 2016 coverage, 1,306,208 people in Texas selected a plan through the Marketplace, including approximately 626,980 new consumers and 378,800 young adults. In Texas, 78 percent of Marketplace consumers could have selected a plan for \$100 per month or less after tax credits for 2016 coverage.

Created a temporary high-risk pool program to cover uninsured people with pre-existing conditions prior to 2014 reforms, which helped 10,336 people in Texas.

And, the ACA creates health plan disclosure requirements and simple, standardized summaries so 12,620,500 people in Texas can better understand coverage information and compare benefits.

With respect to the affordability of care, the ACA made marked improvements in this sphere, too. For example, the ACA:

Creates a tax credit that, during the most recent open enrollment period, has helped 1,093,573 Marketplace enrollees in Texas who otherwise might not be able to afford it sign up for health coverage through the Health Insurance Marketplace.

Requires health insurers to provide consumers with rebates if the amount they spend on health benefits and quality of care, as opposed to advertising and marketing, is too low. Last year, 96,024 consumers in Texas received \$14,119,897 in rebates. Since this requirement was put in place in 2011 more than \$2.4 billion in total refunds have been paid to consumers nationwide through 2014.

Eliminates out-of-pocket costs for preventive services like immunizations, certain cancer screenings, contraception, reproductive counseling, obesity screening, and behavioral assessments for children. This coverage is guaranteed for 10,278,005 people in Texas, including 4,029,215 women.

Eliminates out-of-pocket costs for 2,556,874 Medicare beneficiaries in Texas for preventive services like cancer screenings, bone-mass measurements, annual physicals, and smoking cessation.

Phases out the "donut hole" coverage gap for 346,750 Medicare prescription drug beneficiaries in Texas, who have saved an average of \$1,057 per beneficiary.

Creates Accountable Care Organizations consisting of doctors and other health-care providers who come together to provide coordinated, high-quality care at lower costs to 564,161 Medicare beneficiaries in Texas.

Phases out overpayments through the Medicare Advantage system, while requiring Medicare Advantage plans to spend at least 85 percent of Medicare revenue on patient care. Since 2009, Medicare Advantage enrollment has grown by 704,407 to 1,230,523 in Texas while premiums have dropped by 10 percent nationwide.

And, the ACA also improved quality of care, too. For example, the ACA:

Provides incentives to hospitals in Medicare to reduce hospital-acquired infections and avoidable readmissions. Creates a collaborative health-safety learning network, the Partnership for Patients, which includes 121 hospitals in Texas, to promote best quality practices. Avoidable readmissions have fallen since 2010, saving 87,000 lives and \$20 billion in health care costs, and the rate of one common deadly hospital acquired infection, central-line blood stream infections, fell by 50 percent from 2008 to 2014 nationwide.

Yet, for some reason, Republicans filed countless legal challenges to this law.

On two separate occasions, the United States Supreme Court has ruled on the validity of the Affordable Care Act.

In 2012, it pushed back on a challenge arguing that the ACA is unconstitutional.

In 2015, the Supreme Court pushed back on a statutory challenge to the ACA.

In both instances, the United States Supreme Court upheld the Affordable Care Act and did so with a Supreme Court Justice appointed by a Republican President

Following these two endorsements of the law by the Supreme Court, the law appeared safe.

Until last month, when a sole federal district judge in Texas invalidated the Affordable Care Act based on perverse logic.

The genesis of this entire litigation is has been problematic.

Texas v. United States as an action filed in Texas by our state attorney general, who is currently under criminal indictment.

The matter was then joined by state attorneys general, who now pledge to fight the House's vigorous appeal of this matter.

That judge's ruling indicated that when Republicans in Congress, as part of the GOP tax scam, repealed the individual mandate of the Affordable Care Act—that part of the law that required all to have proof of health insurance or pay a penalty—they in effect invalidated the whole law, rendering it unconstitutional.

This is absurd. First, it ignores the fact that the Affordable Care Act has twice been upheld by the Supreme Court.

Second, despite the fact that the Supreme Court has twice ruled on the ACA, it has never endorsed the perverse reasoning underlying this district court's ruling.

To be clear, in *NFIB v. Sebellius*, 567 U.S. 519 (2012), the Supreme Court held that the penalty for failing to buy health insurance was a constitutional exercise of the Congress's tax and spending power, not that it must be, or that the provision of the law at issue from the tax is otherwise unconstitutional in the absence of it.

It follows that a district court invalidating a law as unconstitutional based on this provision, without giving to the Congress the opportunity to fix the infirmity, smacks of the type of judicial activism which the American political right often laments, especially when the Supreme Court has twice ruled on the law's constitutionality.

The ruling was met by cheers and applause by the President and Congressional Republicans, whose singular policy mission over the last eight years has been to end the Affordable Care Act, and in the process take away the health care that millions of individuals receive through it.

Let me first state that the Affordable Care Act, which House Republicans derisively call Obamacare, is still the law of the land.

The ruling issued by a federal district court judge in the Northern District of Texas is wrong on the facts, the law, and will not stand.

Unfortunately, the present administration occupying the White House is a sworn opponent of the Affordable Care Act, and the provisions it contains, like protecting people with pre-existing conditions and ensuring that young adults can stay on their parents' healthcare plans until Age 26.

That is why, with respect to *Texas v. United States*, Democrats offer H. Res. 6, which would: permit the Speaker, on behalf of the House of Representatives, in consultation with the Bipartisan Legal Advisory Group, to intervene, otherwise appear, or take any other steps in any other cases involving the Patient

Protection and Affordable Care Act, to protect the institutional interests of the House and to defend such act and the amendments made by such Act to other provisions of law, and any amendments to such provisions, including the provisions ensuring affordable health coverage for those with preexisting conditions.

The title directs the Office of General Counsel of the House of Representatives to represent the House in any such litigation and authorizes the Office of General Counsel to employ the services of outside counsel, including pro bono counsel, or other outside experts.

This is not an unprecedented action and in fact is contemplated by federal authority.

Rule 24 Federal Rules of Civil Procedure prescribe permissive intervention in a federal action by a government entity to vindicate a real interest.

The need to protect the healthcare interests of tens of millions of Americans—which was made possible, in part, by an act of this body, is a real interest as contemplated by Rule 24.

And this approach has bipartisan history.

As recently as 2011, when the Obama Administration refused to uphold the validity of the discriminatory Defense of Marriage Act, which I did not support, House Republicans invoked Title III to hire outside counsel in defense of an ultimately unconstitutional bill—the first time the Supreme Court had ever ruled on the law's validity.

In contrast, in this case, the Affordable Care Act has withstood many legal challenges by the Supreme Court and has emerged from them intact.

The need to intervene in this case is informed by the millions of Americans whose peace of mind about their healthcare security is in doubt, including the countless Texans in my home state.

I urge my colleagues to approve H. Res. 6, and authorize intervention in this case, to vindicate the healthcare interests of tens of millions.

#### SENATE COMMITTEE MEETINGS

Title IV of Senate Resolution 4, agreed to by the Senate of February 4, 1977, calls for establishment of a system for a computerized schedule of all meetings and hearings of Senate committees, subcommittees, joint committees, and committees of conference. This title requires all such committees

to notify the Office of the Senate Daily Digest—designated by the Rules Committee—of the time, place and purpose of the meetings, when scheduled and any cancellations or changes in the meetings as they occur.

As an additional procedure along with the computerization of this information, the Office of the Senate Daily Digest will prepare this information for printing in the Extensions of Remarks section of the CONGRESSIONAL RECORD on Monday and Wednesday of each week.

Meetings scheduled for Thursday, January 10, 2019 may be found in the Daily Digest of today's RECORD.

#### MEETINGS SCHEDULED

##### JANUARY 15

9:30 a.m.

Committee on the Judiciary

To hold hearings to examine the nomination of William Pelham Barr, of Virginia, to be Attorney General, Department of Justice.

SH-216

##### JANUARY 16

9:30 a.m.

Committee on the Judiciary

To continue hearings to examine the nomination of William Pelham Barr, of Virginia, to be Attorney General, Department of Justice.

SH-216

10 a.m.

Committee on Commerce, Science, and Transportation

Organizational business meeting to consider committee rules for the 116th Congress.

SD-106

Committee on Environment and Public Works

To hold hearings to examine the nomination of Andrew Wheeler, of Virginia, to be Administrator of the Environmental Protection Agency.

SD-406

2:30 p.m.

Committee on Appropriations

Subcommittee on Energy and Water Development

To hold hearings to examine the future of nuclear power, focusing on advanced reactors.

SD-138