This legislation will help ensure that rebates go toward reducing the cost of drugs for our seniors as well as the cost to the American taxpayer.

Additionally, I am thankful this legislation includes the text of my bill, the Shop Rx Act. This provision, which I carried in committee with the support of both Republicans and Democrats, requires drug plans for seniors to offer realtime information regarding the various options of drugs and their associated costs.

By providing seniors with access to the readily available and relevant information they need in order to be real consumers, we will empower them with the knowledge to choose the options that best fit their needs and their budget. Once consumers have more information, they will have more choices, and insurers will have to actually compete for their business, which will ultimately bring down the cost of drugs.

Madam Speaker, I believe this legislation will help transform the system from one in which patients are often powerless victims to one in which they have true bargaining power and real control over their healthcare needs. I am proud to support it, and I encourage my colleagues to do the same.

Mr. BURGESS. Madam Speaker, I yield 3 minutes to the gentleman from Montana (Mr. GIANFORTE), a valuable member of the Health Subcommittee.

Mr. GIANFORTE. Madam Speaker, I thank the gentleman for yielding.

Far too many Montanans can't afford the prescription drugs they need. They shouldn't have to leave the pharmacy counter empty-handed because costs are too high. Montanans need access to affordable medications, which is why reducing drug prices is one of my top priorities.

To lower costs, we need more transparency in our healthcare system. We need to shine a light onto the opaque drug pricing process. Our commonsense, bipartisan bill before the House today will shine that much-needed light.

The Payment Commission Data Act gives Congress' nonpartisan think tanks MedPAC and MACPAC greater access to drug pricing data. Armed with this data, they can better advise Congress about who is being a bad actor in the drug supply chain. It will help Congress address prescription drug prices more effectively.

We all want to ensure the American people can buy more affordable prescription drugs. I believe the bipartisan approach we have here should be a working model for how to move forward, not simply ramming through partisan bills.

Madam Speaker, I urge my colleagues to vote "yes" on this commonsense reform to lower drug prices.

Mr. BURGESS. Madam Speaker, I urge passage of this bill, and I yield back the balance of my time.

Mr. SCHRADER. Madam Speaker, I rise today in support of H.R. 2115, the "Public Dis-

closure of Drug Discounts Act" introduced from my friend and colleague, Ms. SPANBERGER.

While I believe something must be done to bring down the cost of drugs, I also know that unless we have a better view into the process of how a patient's cost is calculated, we will continue to struggle to address the problem. That's why I support this important piece of legislation that requires PBMs to report on all the price concessions and factors that contribute to determining the net cost of a drug.

PBMs play an important role in our healthcare system as the intermediary negotiating drug prices in the current marketplace. But only if we understand the actual cost of the drug can we ensure that consumers are getting a fair shake. The bill before you today is comprehensive, as it requires PBMs to report the amount of rebates, discounts, direct and indirect remuneration fees, administrative fees, and any other price concessions. The Secretary will make this information available publicly in a way that aggregates the information by class of a drug to protect the negotiation process but also provide insight into any discrepancy between the negotiated drug's net cost and the price a patient pays for that drug.

Addressing any healthcare problem requires a comprehensive approach. There is no one entity that is solely responsible for the high cost of drugs. We need transparency in our healthcare system. This bill had bipartisan support throughout the Committee process and similar measures have had support in the Senate. I am proud that we continue to work on measures that will help address one of the most concerning issues of our time, the exorbitant price of prescription drugs, and I thank leadership for bringing this measure to the floor today.

The SPEAKER pro tempore. The question is on the motion offered by the gentlewoman from Illinois (Ms. SCHAKOWSKY) that the House suspend the rules and pass the bill, H.R. 2115, as amended.

The question was taken.

The SPEAKER pro tempore. In the opinion of the Chair, two-thirds being in the affirmative, the ayes have it.

Ms. SCHAKOWSKY. Madam Speaker, on that I demand the yeas and nays.

The yeas and nays were ordered.

The SPEAKER pro tempore. Pursuant to clause 8 of rule XX, further proceedings on this motion will be postponed.

ANNOUNCEMENT BY THE SPEAKER PRO TEMPORE

The SPEAKER pro tempore. Proceedings will resume on questions previously postponed.

Votes will be taken in the following order:

Motions to suspend the rules and pass:

H.R. 2440; and

H.R. 2115.

The first electronic vote will be conducted as a 15-minute vote. Pursuant to clause 9 of rule XX, remaining electronic votes will be conducted as 5minute votes.

FULL UTILIZATION OF THE HARBOR MAINTENANCE TRUST FUND ACT

The SPEAKER pro tempore. Pursuant to clause 8 of rule XX, the unfinished business is the vote on the motion to suspend the rules and pass the bill (H.R. 2440) to provide for the use of funds in the Harbor Maintenance Trust Fund for the purposes for which the funds were collected and to ensure that funds credited to the Harbor Maintenance Trust Fund are used to support navigation, and for other purposes, as amended, 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 Oregon (Mr. DEFA-ZIO) that the House suspend the rules and pass the bill, as amended.

The vote was taken by electronic device, and there were—yeas 296, nays 109, not voting 26, as follows:

[Roll No. 585]

YEAS-296 Davis, Danny K. Abraham Adams Davis, Rodney Aguilar Dean Allred DeFazio Amodei DeGette DeLauro Axne Babin DelBene Bacon Delgado Baird Demings Balderson DeSaulnier Barragán Deutch Dingell Bass Bera. Doggett Bergman Dunn Beyer Emmer Bilirakis Engel Bishop (GA) Escobar Blumenauer Eshoo Espaillat Blunt Rochester Bonamici Evans Bost Finkenauer Boyle Brendan Fitzpatrick Fletcher F. Brindisi Foster Brooks (IN) Frankel Brown (MD) Fudge Brownley (CA) Gabbard Buchanan Gallagher Bucshon Gallego Bustos Butterfield Garamendi García (IL) Byrne Garcia (TX) Calvert Gibbs Carbajal Golden Gomez Cárdenas Carson (IN) Gonzalez (OH) Case Gonzalez (TX) Casten (IL) Gottheimer Castor (FL) Graves (LA) Castro (TX) Graves (MO) Chu, Judy Green, Al (TX) Cicilline Grijalva Cisneros Haaland Clark (MA) Hagedorn Clarke (NY) Harder (CA) Hartzler Clay Cleaver Hastings Cloud Haves Heck Clyburn Cohen Herrera Beutler Connolly Higgins (LA) Higgins (NY) Cook Cooper Himes Hollingsworth Correa Courtney Horn. Kendra S. Horsford Craig Crenshaw Houlahan Crist Hover Crow Huizenga Cuellar Hunter Cunningham Hurd (TX) Davids (KS) Jackson Lee Davis (CA) Jayapal

Jeffries Johnson (GA) Johnson (LA) Johnson (TX) Joyce (OH) Kaptur Katko Keating Kelly (IL) Kellv (PA) Khanna Kildee Kilmer Kim Kind King (NY) Kinzinger Kirkpatrick Krishnamoorthi Kuster (NH) LaMalfa Lamb Langevin Larsen (WA) Larson (CT) Lawrence Lawson (FL) Lee (CA) Lee (NV) Levin (CA) Levin (MI) Lewis Lieu, Ted Lipinski Loebsack Lofgren Lowenthal Lowey Lucas Luián Luria Lynch Malinowski Maloney, Carolyn B. Maloney, Sean Mast Matsui McBath McCaul McCollum McGovern McKinley McNernev Miller Mitchell Moore Morelle Moulton Mucarsel-Powell Mullin Murphy (FL) Murphy (NC)