

distances to the closest hospital, many uninsured or underinsured residents, and a larger number of aging residents with chronic conditions.

Another issue is simply the lack of doctors and providers. There are only 40 physicians for every 100,000 people in rural America. This leads to unserved patients and overworked medical professionals.

One way to address these issues is through telemedicine. Telemedicine can reduce healthcare barriers, increase access, and bolster convenience for millions of Americans.

Telemedicine is critical in ensuring increased access to care for Americans who live many miles away from a hospital or a doctor's office. It can also make a difference in the lives of limited-mobility Americans, like those who may be elderly or living with different types of disabilities.

Another way to improve the health of rural Americans who may be considered low-income is to address out-of-pocket costs for Medicaid expenses.

Something that needs to be addressed for seniors in not only rural America but also across the country is the misuse of direct and indirect remuneration, or DIR, and how it has impacted the part D drug plans. Over the years, DIR has become a catchall for pharmacy fees, which has unfairly shifted additional costs onto Medicaid patients.

While progress has been made with the 2018 Medicare part D pricing rule, there is still much more to be done. That is why I cosponsored H.R. 1034, the Phair Pricing Act. This bill directly addresses necessary reforms to DIR fees by doing four key things.

First, the Phair Pricing Act will require all price concessions between a pharmacy and a pharmacy benefits manager be included at the point of sale to decrease patient costs.

Second, the bill will realign market incentives to ensure patients have access to and receive the best possible care.

Third, the Phair Pricing Act will direct the Secretary of Health and Human Services to establish a working group of stakeholders to create quality measures based on a pharmacy's practice.

Lastly, the bill would ensure pharmacy benefits managers disclose all fees, price concessions, and programs to the Centers for Medicare and Medicaid Services.

Mr. Speaker, rural Americans deserve the best medical care available, and we can improve options for them and for all Americans through commonsense, bipartisan solutions like investments in telemedicine and legislation like the Phair Pricing Act.

#### STREAMLINING NATURAL DISASTER RESPONSE

The SPEAKER pro tempore. The Chair recognizes the gentleman from Texas (Mr. GREEN) for 5 minutes.

Mr. GREEN of Texas. Mr. Speaker, and still I rise because I love my country, and I rise today with a very special message concerning some of the disasters that confront us in this country.

I rise because, last night, this House passed H.R. 3702. This was a piece of legislation designed to deal with emergency management after these disasters. It is styled the Reforming Disaster Recovery Act of 2019.

This is an important piece of legislation that passed, and because it has passed the House, it is most appropriate that we do several things. The first is to acknowledge the support that it had in the House and give thanks to those who have supported the legislation. I have to thank all the 290 Members of this House who voted to support this legislation—290 Members. It was bipartisan.

Mrs. ANN WAGNER was the Republican lead on this bill, and she did great work in bringing along the bipartisan effort that was necessary to pass the legislation—Mrs. ANN WAGNER, a cosponsor of the legislation to deal with natural disasters.

I would also like to thank my chairwoman of the Financial Services Committee, the Honorable MAXINE WATERS, who fought fearlessly to help us get this passed.

But I cannot do this without acknowledging the ranking member, the Honorable Mr. MCHENRY, who also fought to get it passed. In fact, it passed out of the committee unanimously because of WATERS and MCHENRY, and because of the Honorable ANN WAGNER. It passed out of the committee unanimously.

The bill came to the floor, and again, 290 of the Members of this Congress voted for it. I salute all the persons who helped to make this possible.

Just a quick word about the bill, and 5 minutes is not nearly enough to thank all the people associated with it.

Mr. Speaker, I include in the RECORD a long list of persons, not the least of which, of course, will be the staff.

Rep. Wagner, Chair Waters and Ranking Member McHenry, Leaders Hoyer and McCarthy, Democratic and Republican Staff, Office of Inspector General, Department of Housing and Urban Development; Secretary of Housing and Urban Development Dr. Ben Carson, Chair DeFazio and Ranking Member Sam Graves, Chair Lowey and Ranking Member Kay Granger, Houston Mayor Sylvester Turner, Harris County Judge Hidalgo, Harris County Commissioner Rodney Ellis, Harris County Commissioner Adrian Garcia.

#### ENDORSEMENTS

National Housing Resource Center.  
National Fair Housing Alliance.  
National Low Income Housing Coalition.  
Disaster Housing Recovery Coalition, 800+ members, including: The Arc of the United States, Autistic Self Advocacy Network, Consortium for Citizens with Disabilities Housing Task Force, Disaster Law Project, Enterprise Community Partners, Fair Share Housing Center, Habitat for Humanity International, Hispanic Federation, Local Initiatives Support Coalition, National Association of Councils on Developmental Disabilities, National Coalition for Healthy Housing, National Community Development Asso-

ciation, National Law Center on Homelessness & Poverty, Paralyzed Veterans of America, Texas Low Income Housing Information Service.

Mr. GREEN of Texas. Mr. Speaker, the staff really worked diligently and tirelessly to get this bill passed as well.

But the bill itself, after natural disasters in this country, we have been relegated to starting a process to accord various areas in the country that are impacted funding to help them rebuild, to help them restore order to their lives.

In doing this, we have not codified the methodology by which we would perfect the assistance that is needed. We never codified it. Twenty-six years ago, HUD received the responsibility to respond, but we didn't give any codified rules.

The HUD OIG indicated that there was a necessity to codify some rules so that we could respond in a timely manner but, also, do it in an efficacious manner such that we would not reinvent the wheel each and every time, which is what we have been doing, reinventing the wheel.

Well, this bill does that. It codifies the whole process of dealing with management after a disaster.

FEMA deals with the emergency side of it, in terms of an immediate response, providing persons with someplace to live, providing persons with the necessities of life. But the long-term response is what HUD deals with.

Under this long-term response legislation that we passed yesterday, HUD now can work with municipalities directly, in some cases. If a municipality has demonstrated that it can handle large sums of money, then funding can go from the Congress to the municipality, as opposed to some other agency within the State and then trickle down to that municipality.

Houston, Texas, by way of example, has demonstrated that it can handle these large sums of money. They have a great accounting department. Mayor Turner is there, and he has done an outstanding job.

With this kind of opportunity to get direct funding, people will receive help more efficaciously. They will receive it immediately.

Also, in small areas of the country, small cities, they will get a better understanding of how they can approach this process and how they can get the funding accorded them in a faster way.

The bill really is something that has been needed, not only for the hurricanes and the flooding but also for the tornadic activities, for the earthquakes that will visit some parts of the country, and for the fires that we will have.

This legislation is meaningful, and I will say more about it in the future.

#### MOVING IMPEACHMENT GOALPOSTS

The SPEAKER pro tempore. The Chair recognizes the gentleman from Alabama (Mr. BYRNE) for 5 minutes.