

minute and to revise and extend his remarks.)

Mr. CASE. Madam Speaker, can anyone seriously dispute that our Federal fiscal house is seriously out of order?

Our national debt stands at \$23 trillion, doubling in just the last decade alone. No end is in sight, as we just registered \$1 trillion annual deficit in the last fiscal year, and this fiscal year looks the same or worse. Interest payments alone will exceed defense spending by 2025.

We need look no further than into the mirror for the root cause. It is our collective inability to face the music of fiscal responsibility and sustainability. We clearly need help.

H.R. 5211, the Sustainable Budget Act, reintroduced today with my colleague from Arkansas, the ranking member of the Budget Committee, Mr. WOMACK, would follow the models of Simpson-Bowles and other such independent commissions charged with focusing on our debt and recommending a sustainable path forward for an up-or-down vote by Congress.

In that, our bill is similar to other measures I have also reintroduced: H.R. 4907, the TRUST Act, with Representatives GALLAGHER and MCADAMS; and H.R. 5178, the RAFT Act, with Representative BURCHETT. Together, they offer a far better way forward to tackling our debt crisis, and I urge their prompt consideration and passage.

FUNDING FOR PUERTO RICO'S MEDICAID PROGRAM

(Miss GONZÁLEZ-COLÓN of Puerto Rico asked and was given permission to address the House for 1 minute and to revise and extend her remarks.)

Miss GONZÁLEZ-COLÓN of Puerto Rico. Madam Speaker, today I rise, and I am pleased to say that the continuing resolution to keep our government open until December 20 extends, once again, the provision of the 2018 BBA to provide Puerto Rico a 100 percent Federal Medical Assistance Percentage in the Medicaid program.

However, the time available for an extension is quickly coming to an end. Unless Congress acts quickly to adequately fund this vital program, Puerto Rico will face a \$1 billion shortfall as early as March of 2020, putting in grave jeopardy the 1.1 million American citizens in my district who rely on this program.

This insecurity in funding also makes it impossible to negotiate long-term provider contracts, and it disrupts the ongoing implementation of important transparency and integrity measures.

Without decisive and long-term funding, the progress into stabilizing Puerto Rico's Medicaid program could be reversed as payments to providers would once again fall close to 40 percent Medicare fee schedule and accelerate provider exodus.

Puerto Rico will also not be able to pay for lifesaving hepatitis C medicines

that positively impact the quality of life, while decreasing long-term health costs.

Puerto Rico will also not be able to subsidize dual Medicare B premiums and shift those healthcare costs to Medicare, where they belong.

The lack of a solution for Puerto Rico's Medicaid program, such as the one proposed by the House, could have a ripple effect on our healthcare system.

I urge my colleagues to act on Medicaid provisions.

HONORING THE MEMORY OF VERNA CAMPBELL

(Mr. ROSE of New York asked and was given permission to address the House for 1 minute.)

Mr. ROSE of New York. Madam Speaker, I rise today in solemn memory of Ms. Verna Campbell, a constituent, beloved mother, grandmother, and eternal fighter for the working class.

Ms. Campbell left us on October 22 but leaves behind a powerful legacy in my community. She was a loving mother to 10 children and step-children, and always worked to support her second family, 1199 SEIU.

Ms. Verna was a long-time delegate for 1199, where she fought for labor rights, fair pay, and dignity for all workers.

She devoted herself to the Staten Island Democratic Association, the Staten Island NAACP, the Staten Island Women's Political Caucus, and the 120th Precinct Council.

Ms. Verna was a founder of the Staten Island African American Political Association and, over the years, has worked to bring African Americans into Staten Island politics.

Ms. Verna also played key roles in electing numerous African Americans to public office throughout her life.

Staten Island and all of New York City will deeply miss Ms. Verna Campbell, but we are all blessed for her membership in our community throughout her lifetime.

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HOUSE DEMOCRATS ARE WORKING FOR THE PEOPLE

(Mr. TED LIEU of California asked and was given permission to address the House for 1 minute.)

Mr. TED LIEU of California. Madam Speaker, the House of Representatives this year has had one of the most productive sessions in U.S. history. We have passed over 275 bipartisan bills to the United States Senate. Let me just say that again: We have passed over 275 bipartisan bills to the United States Senate.

Unfortunately, the Republican-led Senate has not gotten around to letting these bills go for a vote.

Some of these bills include common-sense legislation such as the Violence

Against Women Act reauthorization, the Save the Internet Act, Securing America's Federal Elections Act, the Gold Star Family Tax Relief Act, the Climate Action Now Act, the Paycheck Fairness Act, and the Raise the Wage Act. It is time for the do-nothing Republicans to start doing their jobs.

RECOGNIZING NATIONAL RURAL HEALTH DAY

(Ms. PLASKETT asked and was given permission to address the House for 1 minute and to revise and extend her remarks.)

Ms. PLASKETT. Madam Speaker, today is National Rural Health Day.

More than 60 million Americans live in rural areas. Unfortunately, these individuals tend to be in poorer health than those who live in urban and suburban areas. They experience greater rates of chronic disease than the rest of the U.S. population.

The U.S. Virgin Islands is one of these rural areas. Like most rural America, the VI has high rates of chronic disease, diabetes, heart disease, stroke, and experience unique challenges in accessing healthcare.

The Virgin Islands, however, due to geographic distance from the contiguous United States and our territorial status, face even further challenges, including inequitable Federal funding. Our health providers and families have to make difficult decisions, not based on care but on distance and funding.

All Americans deserve easy accessibility to high quality healthcare. I want to take this time to recognize the healthcare providers in the Virgin Islands for their tireless work and commitment to the health and well-being of our people.

RECOGNIZING LINDA LAURIA FOR 34 YEARS OF SERVICE WITH THE SOCIAL SECURITY ADMINISTRATION

(Ms. OCASIO-CORTEZ asked and was given permission to address the House for 1 minute and to revise and extend her remarks.)

Ms. OCASIO-CORTEZ. Madam Speaker, I rise today to recognize a long-term public servant and New York-14 constituent, Linda Lauria.

On November 30, 2019, Linda Lauria, public affairs specialist, will retire from the Social Security Administration. Linda's retirement will mark the close of a phenomenal 34-year career that spans multiple decades of public service.

Linda began her career with the Social Security Administration in August 1973 as a claims development clerk in the east Bronx Social Security office as a GS-2, as she proudly notes. Linda was subsequently promoted to positions in the field, including service representative and claims representative.

Linda has been instrumental in the timely resolution of several thousand cases, eliminating barriers between our

most vulnerable people and their essential benefits.

Linda's outstanding contributions to the agency have been recognized with several awards, including the Deputy Commissioner Citation and the New York Regional Management Society's Regional Office Employee of the Year. She has also been instrumental in helping my own district team from the very beginning.

Throughout Linda's career, she has brought intelligence, technical savvy, practical knowledge, and a strong commitment to excellence to every assignment.

Today my staff, the Social Security Administration, and I thank Linda for her dedication, passion, and commitment to our community.

RECOGNIZING ATLANTICARE

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

Mr. VAN DREW. Madam Speaker, today I want to recognize AtlantiCare, a major health system in south Jersey for over one century. The group started with one hospital in 1898 and has now expanded to over 100 different locations across the region to fulfill the medical needs of our community.

AtlantiCare improves the health and happiness of the people of south Jersey by providing high-quality medical care, which has recently been celebrated with the Critical Care Gold Beacon Award, the Emergency Nurses Association's Lantern Award, and many more.

Beyond health services, AtlantiCare has been a staple to south Jersey because of their focus on community outreach programs, which are so very important. They have tackled a variety of issues facing our area.

AtlantiCare has installed programs to supply healthy school lunches to children, to bring fresh produce to those struggling with food insecurity, and to provide residency opportunities for local medical school students so that they stay in the area.

In south Jersey we are very lucky to have AtlantiCare's accessible medical services and outreach programs to better our region. I thank AtlantiCare and all the staff and all the volunteers for caring about our community in south Jersey.

OUR CHILDREN ARE OUR PRIORITY

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

Ms. JACKSON LEE. Madam Speaker, I have worked in the area of criminal justice and juvenile justice for as many years as I have served in the United States Congress.

Dealing with juveniles here in this country and giving them a pathway of opportunity to success has been my dream and goal. I intend to introduce

the Omnibus Juvenile Justice Restoration and Uplift Act.

There are 75 million juveniles, plus, in the United States since 2013. That number has grown. That means that one in four have the possibility of being in the juvenile delinquency system. That should not be tolerated.

My bill will include adding more trained social workers; giving sensitivity training and special training to our law enforcement officers, who really want to be role models; to Ban the Box, so they do not have a lifetime of saying, as a juvenile I was arrested; ending solitary confinement throughout the entire United States for juveniles; alternative sentencing, so that old-fashioned juvenile detention jails can be closed; gang intervention, so that we can find a way for resolution and direction and another way for gang prevention, violence cessation, wrap-around services, closing all juvenile centers over a 10-year period, and finally, conflict resolution.

I encourage my colleagues to join me in introducing this legislation. Our children are our priority.

THE SENATE MUST ACT ON LEGISLATION

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

Mr. GREEN of Texas. Madam Speaker, I rise today in support of the For the People Agenda generated by this House, and I am antithetical to the Senate's provision, which is a for-the-President agenda.

We, the Members of the House, have passed legislation for gun safety. The President has merely talked about it.

We have passed legislation to help with personal and financial security for women. The President says ugly things about women.

We pass legislation that will help the Dreamers. The President is about ending the dream.

We have passed legislation helping those who are being discriminated against in the LGBTQ community. The President ignores this community.

We passed legislation to help with election and democracy security. The President wants to do all that he can to help Putin and those in Russia with their security, ignoring ours.

In our House we have, for the people, passed a bill to increase the minimum wage. The President seems to be antithetical to it. If we have our For the People Agenda and we pass these bills and send them to the Senate, the least that the Senate can do is generate their own version so that these bills may go to a conference committee.

They don't have to have a for-the-President agenda. I am for the people. The Senate is for the President.

The SPEAKER pro tempore. Members are reminded to refrain from engaging in personalities toward the President.

RECOGNIZING NATIONAL RURAL HEALTH DAY

The SPEAKER pro tempore. Under the Speaker's announced policy of January 3, 2019, the gentleman from Arizona (Mr. O'HALLERAN) is recognized for 60 minutes as the designee of the majority leader.

GENERAL LEAVE

Mr. O'HALLERAN. Madam Speaker, I ask unanimous consent that all Members have 5 legislative days to revise and extend their remarks and include extraneous material on the subject of my Special Order.

The SPEAKER pro tempore. Is there objection to the request of the gentleman from Arizona?

There was no objection.

Mr. O'HALLERAN. Madam Speaker, I rise today in honor of National Rural Health Day.

To mark this important day, my colleagues and I will discuss the unique challenges that rural America faces when seeking quality healthcare close to home or as close to home as rural America has it.

I am proud to represent Arizona's First Congressional District in the House of Representatives. Our district is actually larger than the entire State of Illinois, and it is one of the most rural in the country.

This year, I have held 26 town halls across this vast and diverse district. At each and every one I hear from rural residents struggling to access quality healthcare, especially emergency care. Many of my constituents must spend hours traveling hundreds of miles to access any kind of care, let alone specialist care or maternity care.

Since I was elected, I have worked with my colleagues on both sides of the aisle to identify legislative solutions to the issues our rural residents are facing. This year I introduced the CHIME Act, legislation to extend the Community Health Center Fund and the National Health Service Corps for 5 years and increase funding for priority areas.

Community health centers are critical to serve hundreds of thousands of patients every year just in Arizona. In my district, and many rural areas, community health centers are often the primary care facility for a large portion of the population. If funding for community health centers in Arizona were to lapse, just in my district, tens of thousands of rural residents would be left without access to critical care.

My language to extend this funding was included in this week's continuing resolution, but it is at risk of expiring if we cannot come together to fund the government. We need a long-term solution. I will continue to work with my colleagues on both sides of the aisle to pass this bill into law permanently, so our communities have the support and certainty they need.

Additionally this year, I introduced the GME, graduate medical education amendment, to the Lower Drug Costs