

SUPPORT SENIORS AND THOSE ON MEDICARE BY LOWERING THE COST OF PRESCRIPTION DRUGS

(Mrs. AXNE asked and was given permission to address the House for 1 minute.)

Mrs. AXNE. Mr. Speaker, I rise today and call on Congress to support our seniors and those on Medicare by lowering the cost of prescription drugs.

Seniors will get a 1.6 percent cost-of-living increase this year, yet the cost of prescription drugs is expected to go up 3.8 percent.

How can older Americans on a fixed income afford this? The answer is they can't, and they need to act on this.

I have spoken with Iowans who are rationing their medications or skipping meals just to cover the cost of the drugs they take.

I heard from Joan in west Des Moines, who has an autoimmune disease, and her medication suddenly skyrocketed. If she doesn't take it, she will need a liver transplant, and she doesn't know how she is going to afford the medication.

John in Madrid discovered his standard refill of insulin costs more than, literally, the price of gold.

So something must change. Older Americans need Congress to act.

That is why I am supporting H.R. 3 to protect our seniors. It means our older Americans won't be robbed of their retirement savings and they will live healthier lives.

If you want to give seniors a healthier, happier, safer retirement, then I call on you to support this bill.

HONORING SERGEANT KORT PLANTENBERG; CHIEF WARRANT OFFICER 2 JAMES ROGERS, JR.; AND CHIEF WARRANT OFFICER 2 CHARLES NORD

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

Mr. PHILLIPS. Mr. Speaker, last week, my State and our country lost three young and remarkable servicemembers in a tragic helicopter crash outside of St. Cloud, Minnesota.

Sergeant Kort Plantenberg; Chief Warrant Officer 2 James Rogers, Jr.; and Chief Warrant Officer 2 Charles Nord each served our country with valor and leave behind grieving families and friends and heartbroken communities.

I recently flew with a crew from St. Cloud, and I lost my own father in a helicopter crash in the Vietnam war back in 1969, so my heart is particularly heavy today for Kaley Nord, 2-year-old Lydia, and her soon-to-be-born sibling, who will grow up without a father.

But we will never forget, and we will carry their legacies forward in the spirit of service, duty, and above all else, sacrifice.

May their memories be for a blessing.

PRESCRIPTION DRUG PRICES ARE OUT OF CONTROL

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

Mr. CASTEN of Illinois. Mr. Speaker, prescription drug prices are out of control. Year after year, we see prices rise. Old drugs become unaffordable, and new drugs may cost more than a house.

That is why I support H.R. 3, the Elijah E. Cummings Lower Drug Costs Now Act. This bill would change the lives of the 89,000 seniors on part D in my district and over 600,000 people on private health insurance plans in my district.

One of those, in particular, is Liz Phelan. Liz lives in Algonquin, Illinois, and retired after 38 years of public service. In 2007, she had a double transplant: a kidney and a pancreas. She is alive today for two reasons: One is the generosity of a donor, and, the second, the antirejection drugs that she has to take to keep her alive.

Those drugs alone cost \$662 every 3 months, out of pocket, but because she needs additional medication, she hits the Medicare coverage gap, where she is on the hook for the balance of her costs.

H.R. 3 would be a game changer for Liz. It would lower her prescription drug costs to \$2,000 because H.R. 3 would create, for the first time, a cap on how much seniors need to pay out of pocket in Medicare. It would make sure that the drugs she needs to survive do not increase above the rate of inflation.

For Liz and for the millions of other Americans who face high-priced medicines, we must pass H.R. 3.

REDUCE OUT-OF-POCKET COSTS FOR PRESCRIPTION DRUGS

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

Ms. UNDERWOOD. Mr. Speaker, today is a historic day for patients in this country because today we will be voting for a piece of legislation that my community in northern Illinois wants urgently. It cannot wait.

I hear about unfortunate and unaffordably high drug prices every time I am home. Recently, a 15-year-old boy in my district who relies on insulin wrote to me: "I am concerned with what my future holds. I need this medicine to live, and if the costs continue to rise . . . I am afraid that, one day, I won't be able to get the medicine and I will die."

No one should be thinking about the possibility of death because they can't afford a common, live-saving medication, and the Lower Drug Costs Now Act delivers the reforms we critically need because the bill reduces out-of-pocket costs for prescription drugs; it creates a new, \$2,000 out-of-pocket limit for seniors; and it allows the Sec-

retary of Health and Human Services to negotiate a fair price for the highest cost drugs, which will reduce private insurance premiums and out-of-pocket costs.

This legislation also incorporates my bill to prevent drug companies from making outrageous, unfair price hikes. And with the savings from lower drug costs, we reinvest in Medicare, expanding much needed hearing, dental, and vision services to seniors.

I am proud of this bill. It is a product of countless hours of research and negotiation. I would like to thank the committee chairs, leadership members, and staff who made it possible.

PUT THE NEEDS OF AMERICANS ABOVE THE GREED OF THE PHARMACEUTICAL INDUSTRY

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

Mr. TAKANO. Mr. Speaker, Americans are skipping their medications because the cost of prescription drugs is too expensive. This is immoral.

Americans are going into debt because the cost of prescription drugs is too high. This is immoral.

Americans often pay four times more for the same drugs as those in foreign countries. This is immoral.

This is why I rise today in strong support of H.R. 3, the Elijah E. Cummings Lower Drug Costs Now Act, legislation that will lower the cost of prescription drugs for millions of Americans and benefit nearly 500,000 people in my district.

No one in America should have to ration their medicine. No one in America should have to travel to another country because the medication they need is too unaffordable here.

We have a moral obligation to put the needs of American people above the greed of the pharmaceutical industry.

I urge all of my colleagues to vote in support of this critical piece of legislation.

ALLOW DIRECT NEGOTIATION OF PRESCRIPTION DRUG PRICES BY MEDICARE

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

Ms. KUSTER of New Hampshire. Mr. Speaker, I have long called for Congress to take meaningful action to lower prescription drug costs by allowing the direct negotiation of prescription drug prices by Medicare.

I am proud to cosponsor H.R. 3, the Lower Drug Costs Now Act, and I am pleased to see it includes my legislation, the Respond Now Act, as the basis for much needed funding to combat the opioid epidemic.

H.R. 3 provides \$10 billion in direct funding, including investments directly into our communities who are the front lines of this epidemic.

I am also grateful to see that H.R. 3 includes funding to support children impacted by this crisis, so that they can access trauma-informed practices in schools.

I thank the Speaker for the inclusion of this critical funding to help Granite State families and communities across this country. I urge my colleagues to vote "yes" on the bill.

PFAS REPRESENTS CLEAR AND PRESENT DANGER

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

Mr. PAPPAS. Mr. Speaker, I rise today on behalf of communities across the Nation that have been contaminated with PFAS.

PFAS represents a clear and present danger to families in my district, and I am disappointed that certain provisions to protect public health and our environment were abandoned by negotiators of the National Defense Authorization Act.

I am encouraged that several PFAS-related provisions were included, like the one I introduced which creates a clearinghouse of information for affected servicemembers and their families and one that phases out the use of PFAS in firefighting foam by 2024.

But Congress should have seized the opportunity to go much further in protecting people from these toxic-forever chemicals. Losing provisions for drinking water standards, environmental protections, and cleanup was a shameful missed opportunity.

People are getting sick from PFAS contamination, families are scared, and they are looking to us for answers. They need action now, and we must continue to fight for health information, stricter regulations, and mitigation so we can protect families, communities, and the environment from PFAS.

This fight is just beginning, and I look forward to working with my colleagues in both parties to pass additional legislation.

PREVENT BIG PHARMA FROM RAISING THE COST OF PRESCRIPTION DRUGS PAST RATE OF INFLATION

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

Mr. CROW. Mr. Speaker, I rise today in support of H.R. 3, the Elijah E. Cummings Lower Drug Costs Now Act.

For too long, we have seen the influence of Big Pharma on this Chamber. For every Member of Congress, there are three industry lobbyists looking to buy their vote.

Meanwhile, back home in Colorado, one in three of my constituents can't afford to pay for their medication. It needs to stop.

I am proud to have helped introduce a provision to H.R. 3 that would prevent Big Pharma from raising the cost of prescription drugs past the rate of inflation.

I stand here today for the 300,000 Coloradans with diabetes who will save 75 percent on their insulin. I stand here today for the 400,000 Coloradans with asthma, who will save 80 percent on their prescriptions.

And tomorrow I will cast my vote for my constituents, people like Sue Way of Aurora, who, after seeing her insulin increase by 500 percent, was forced to ration her medicine, resulting in an ulcer.

Her story is the story of so many Coloradans. The time is now to deliver on our promise to reduce the cost of prescription drugs.

□ 1230

12 DAYS OF SALT

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

Ms. SHERRILL. Mr. Speaker, on this sixth day of SALT, my constituents have said to me that they want me to read a resolution from the New Jersey State League of Municipalities.

In a unanimous, bipartisan resolution signed this month, the mayors of New Jersey urged Congress to act on SALT. Today, I would like to read part of this resolution into the RECORD.

New Jersey State League of Municipalities Conference Resolution Number 2019-14:

Whereas, our tax obligation is an issue that concerns all residents in every municipality in the State of New Jersey; and

Whereas, many New Jersey families relied upon the Federal SALT deduction to ensure tax fairness, and capping the SALT deduction has placed an unfair burden on New Jersey homeowners; and

Whereas, the SALT deduction cap presents a barrier to affordable homeownership in New Jersey, impacting the ability of new, young families to prosper in the future,

Now, therefore, be it resolved that the New Jersey State League of Municipalities, in conference assembled, urges Congress to restore the full SALT deduction and provide more equitable taxation once again to residents of New Jersey.

Mr. Speaker, it is time to listen to our local elected officials, and I thank Committeewoman Amalia Duarte of Mendham Township for leading this resolution.

COMMUNICATION FROM THE CLERK OF THE HOUSE

The SPEAKER pro tempore (Mr. PANNETTA) laid before the House the following communication from the Clerk of the House of Representatives:

OFFICE OF THE CLERK,
HOUSE OF REPRESENTATIVES,
Washington, DC, December 11, 2019.

Hon. NANCY PELOSI,
Speaker, House of Representatives,
Washington, DC.

DEAR MADAM SPEAKER: Pursuant to the permission granted in Clause 2(h) of Rule II

of the Rules of the U.S. House of Representatives, the Clerk received the following message from the Secretary of the Senate on December 11, 2019, at 9:20 a.m.:

That the Senate passed S. 2740.

With best wishes, I am

Sincerely,

CHERYL L. JOHNSON.

COMMUNICATION FROM THE CLERK OF THE HOUSE

The SPEAKER pro tempore laid before the House the following communication from the Clerk of the House of Representatives:

OFFICE OF THE CLERK,
HOUSE OF REPRESENTATIVES,
Washington, DC, December 11, 2019.

Hon. NANCY PELOSI,
Speaker, House of Representatives,
Washington, DC.

DEAR MADAM SPEAKER: Pursuant to the permission granted in Clause 2(h) of Rule II of the Rules of the U.S. House of Representatives, the Clerk received the following message from the Secretary of the Senate on December 11, 2019, at 9:46 a.m.:

That the Senate passed without amendment H.R. 4566.

That the Senate passed without amendment H.R. 5363.

With best wishes, I am

Sincerely,

CHERYL L. JOHNSON.

PROVIDING FOR CONSIDERATION OF H.R. 3, LOWER DRUG COSTS NOW ACT OF 2019; PROVIDING FOR CONSIDERATION OF H.R. 5038, FARM WORKFORCE MODERNIZATION ACT OF 2019; AND PROVIDING FOR CONSIDERATION OF THE CONFERENCE REPORT TO ACCOMPANY S. 1790, NATIONAL DEFENSE AUTHORIZATION ACT FOR FISCAL YEAR 2020

Ms. SHALALA. Mr. Speaker, by direction of the Committee on Rules, I call up House Resolution 758 and ask for its immediate consideration.

The Clerk read the resolution, as follows:

H. RES. 758

Resolved, That at any time after adoption of this resolution the Speaker may, pursuant to clause 2(b) of rule XVIII, declare the House resolved into the Committee of the Whole House on the state of the Union for consideration of the bill (H.R. 3) to establish a fair price negotiation program, protect the Medicare program from excessive price increases, and establish an out-of-pocket maximum for Medicare part D enrollees, and for other purposes. The first reading of the bill shall be dispensed with. All points of order against consideration of the bill are waived. General debate shall be confined to the bill and shall not exceed four hours, with three hours equally divided among and controlled by the respective chairs and ranking minority members of the Committees on Education and Labor, Energy and Commerce, and Ways and Means, and one hour equally divided and controlled by the Majority Leader and the Minority Leader or their respective designees. After general debate the bill shall be considered for amendment under the five-minute rule. In lieu of the amendments in the nature of a substitute recommended by the Committees on Education and Labor, Energy and Commerce, and Ways and Means