

the Affordable Care Act. We must repeal ObamaCare and start over for the sake of Americans and our Nation's children.

RECREATIONAL FISHING AND HUNTING

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

Mr. HOLDING. Mr. Speaker, Americans are struggling to find jobs in our economy, so we must take advantage of the opportunities for job growth where and whenever they arise. And today I want to highlight the positive economic impact of recreational fishing and hunting.

Mr. Speaker, nationwide, sportsmen contribute over \$3 billion of State and Federal revenue annually through hunting and fishing licenses, fees, and excise taxes.

In my home State of North Carolina, hunters and anglers produced over 35,000 jobs in 2011—more than the combined employment of the two largest private employers in the State. Sportsmen and -women generated \$249 million in State and local taxes in 2011—enough to support the salaries of over 6,000 police and sheriff's patrol officers.

I rise today to support this important industry and what it is doing for my home State. Hunting, fishing, boating, and other recreational sports foster growth in our economy and create jobs.

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:

JUNE 4, 2013.

Hon. JOHN A. BOEHNER,
Speaker, The Capitol, House of Representatives,
Washington, DC.

DEAR MR. 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 June 4, 2013 at 11:00 a.m.:

That the Senate passed with an amendment H.R. 588.

With best wishes, I am
Sincerely,

KAREN L. HAAS,
Clerk.

ANNOUNCEMENT BY THE SPEAKER PRO TEMPORE

The SPEAKER pro tempore. Pursuant to clause 8 of rule XX, the Chair will postpone further proceedings today on the motion to suspend the rules on which a recorded vote or the yeas and nays are ordered, or on which the vote incurs objection under clause 6 of rule XX.

Any record vote on the postponed question will be taken later.

RUTH MOORE ACT OF 2013

Mr. MILLER of Florida. Mr. Speaker, I move to suspend the rules and pass

the bill (H.R. 671) to amend title 38, United States Code, to improve the disability compensation evaluation procedure of the Secretary of Veterans Affairs for veterans with mental health conditions related to military sexual trauma, and for other purposes, as amended.

The Clerk read the title of the bill.

The text of the bill is as follows:

H.R. 671

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

SECTION 1. SHORT TITLE.

This Act may be cited as the "Ruth Moore Act of 2013".

SEC. 2. REPORTS ON CLAIMS FOR DISABILITIES INCURRED OR AGGRAVATED BY MILITARY SEXUAL TRAUMA.

(a) ANNUAL REPORTS.—

(1) *IN GENERAL.*—Subchapter VI of chapter 11 of title 38, United States Code, is amended by adding at the end the following new section:

"§1164. Reports on claims for disabilities incurred or aggravated by military sexual trauma

"(a) REPORTS.—Not later than December 1, 2014, and each year thereafter through 2018, the Secretary shall submit to Congress a report on covered claims submitted during the previous fiscal year.

"(b) ELEMENTS.—Each report under subsection (a) shall include the following:

"(1) The number of covered claims submitted to or considered by the Secretary during the fiscal year covered by the report.

"(2) Of the covered claims listed under paragraph (1), the number and percentage of such claims—

"(A) submitted by each sex;

"(B) that were approved, including the number and percentage of such approved claims submitted by each sex; and

"(C) that were denied, including the number and percentage of such denied claims submitted by each sex.

"(3) Of the covered claims listed under paragraph (1) that were approved, the number and percentage, listed by each sex, of claims assigned to each rating percentage.

"(4) Of the covered claims listed under paragraph (1) that were denied—

"(A) the three most common reasons given by the Secretary under section 5104(b)(1) of this title for such denials; and

"(B) the number of denials that were based on the failure of a veteran to report for a medical examination.

"(5) The number of covered claims that, as of the end of the fiscal year covered by the report, are pending and, separately, the number of such claims on appeal.

"(6) For the fiscal year covered by the report, the average number of days that covered claims take to complete beginning on the date on which the claim is submitted.

"(7) A description of the training that the Secretary provides to employees of the Veterans Benefits Administration specifically with respect to covered claims, including the frequency, length, and content of such training.

"(c) DEFINITIONS.—In this section:

"(1) The term 'covered claims' means claims for disability compensation submitted to the Secretary based on a covered mental health condition alleged to have been incurred or aggravated by military sexual trauma.

"(2) The term 'covered mental health condition' means post-traumatic stress disorder, anxiety, depression, or other mental health diagnosis described in the current version of the Diagnostic and Statistical Manual of Mental Disorders published by the American Psychiatric Association that the Secretary determines to be related to military sexual trauma.

"(3) The term 'military sexual trauma' means, with respect to a veteran, psychological trauma, which in the judgment of a mental health professional, resulted from a physical assault of a sexual nature, battery of a sexual nature, or sexual harassment which occurred during active military, naval, or air service."

(2) *CLERICAL AMENDMENT.*—The table of sections at the beginning of such chapter is amended by adding at the end the following new item: "1164. Reports on claims for disabilities incurred or aggravated by military sexual trauma."

(3) *INITIAL REPORT.*—The Secretary of Veterans Affairs shall submit to Congress an initial report described in section 1164 of title 38, United States Code, as added by paragraph (1), by not later than 90 days after the date of the enactment of this Act. Such initial report shall be in addition to the annual reports required under such section beginning in December 2014.

(b) *SENSE OF CONGRESS.*—It is the sense of Congress that the Secretary of Veterans Affairs should update and improve the regulations of the Department of Veterans Affairs with respect to military sexual trauma by—

(1) ensuring that military sexual trauma is specified as an in-service stressor in determining the service-connection of post-traumatic stress disorder by including military sexual trauma as a stressor described in section 3.304(f)(3) of title 38, Code of Federal Regulations; and

(2) recognizing the full range of physical and mental disabilities (including depression, anxiety, and other disabilities as indicated in the Diagnostic and Statistical Manual of Mental Disorders published by the American Psychiatric Association) that can result from military sexual trauma.

(c) *PROVISION OF INFORMATION.*—During the period beginning on the date that is 15 months after the date of the enactment of this Act and ending on the date on which the Secretary updates and improves regulations as described in subsection (b), the Secretary shall—

(1) provide to each veteran who has submitted a covered claim or been treated for military sexual trauma at a medical facility of the Department with a copy of the report under subsection (a)(3) or section 1164 of title 38, United States Code, as added by subsection (a)(1), that has most recently been submitted to Congress;

(2) provide on a monthly basis to each veteran who has submitted any claim for disability compensation or been treated at a medical facility of the Department information that includes—

(A) the date that the Secretary plans to complete such updates and improvements to such regulations;

(B) the number of covered claims that have been granted or denied during the month covered by such information;

(C) a comparison to such rate of grants and denials with the rate for other claims regarding post-traumatic stress disorder;

(D) the three most common reasons for such denials;

(E) the average time for completion of covered claims;

(F) the average time for processing covered claims at each regional office; and

(G) any information the Secretary determines relevant with respect to submitting a covered claim;

(3) in addition to providing to veterans the information described in paragraph (2), the Secretary shall make available on a monthly basis such information on a conspicuous location of the Internet website of the Department; and

(4) submit to Congress on a monthly basis a report that includes—

(A) a list of all adjudicated covered claims, including ancillary claims, during the month covered by the report;

(B) the outcome with respect to each medical condition included in the claim; and

(C) the reason given for any denial of such a claim.

(d) *MILITARY SEXUAL TRAUMA DEFINED.*—*In this section:*

(1) The term “covered claim” has the meaning given that term in section 1164(c)(1) of title 38, United States Code, as added by subsection (a)(1).

(2) The term “military sexual trauma” has the meaning given that term in section 1164(c)(3) of title 38, United States Code, as added by subsection (a)(1).

SEC. 3. EXTENSION OF ROUNDING DOWN OF PERCENTAGE INCREASES OF RATES OF CERTAIN EDUCATIONAL ASSISTANCE.

(a) *MONTGOMERY GI BILL.*—Section 3015(h)(2) of title 38, United States Code, is amended—

(1) by striking “fiscal year 2014” and inserting “fiscal year 2019”; and

(2) by striking “fiscal year 2013” and inserting “fiscal year 2018”.

(b) *SURVIVORS’ AND DEPENDENTS’ EDUCATIONAL ASSISTANCE.*—Section 3564(b) of such title is amended—

(1) by striking “fiscal year 2014” and inserting “fiscal year 2019”; and

(2) by striking “fiscal year 2013” and inserting “fiscal year 2018”.

The SPEAKER pro tempore. Pursuant to the rule, the gentleman from Florida (Mr. MILLER) and the gentleman from Maine (Mr. MICHAUD) each will control 20 minutes.

The Chair recognizes the gentleman from Florida.

GENERAL LEAVE

Mr. MILLER of Florida. Mr. Speaker, I ask unanimous consent that all Members have 5 legislative days within which to revise and extend their remarks and add any extraneous material they may have on H.R. 671, as amended.

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

There was no objection.

Mr. MILLER of Florida. I yield myself such time as I might consume.

Mr. Speaker, H.R. 671, as amended, will demand that the Department of Veterans Affairs place an immediate and concerted focus upon updating and improving its regulations for processing claims based upon military sexual trauma, commonly known as MST.

Reported incidences of military sexual trauma have risen markedly in recent years, a disturbing trend affecting both women and men serving in the military. I have spoken with many servicemembers who have suffered MST, and one sentiment is commonly echoed—these servicemembers feel a sense of betrayal and lack of trust. They have said that they feel betrayed by their fellow military attacker; and, without proper handling of the crime, they also feel betrayed by their command and their service branch.

The Department of Defense must take the lead on this issue and must address military sexual assault and trauma throughout the ranks in the strongest possible terms. Additionally, our veterans who have suffered military sexual trauma who live with this sense of betrayal must be confident that they will not be further traumatized by the Department of Veterans Affairs when they seek necessary and proper assistance.

Survivors of MST must not be subjected to outdated and antiquated regulations of the Department.

□ 1240

VA’s approach to claims of MST and its processing thereof require immediate and thoughtful review, and that is the intent of H.R. 671, as amended.

I want to thank Congresswoman PINGREE for bringing this important bill to the committee. And I commend Subcommittee Chairman RUNYAN and Ranking Member TITUS for their bipartisan work on bringing this bill to the floor today.

With that, Mr. Speaker, I reserve the balance of my time.

Mr. MICHAUD. Mr. Speaker, I yield myself such time as I may consume.

I wholeheartedly support H.R. 671, the Ruth Moore Act of 2013. This bill was introduced by my colleague and good friend of mine from the State of Maine, Congresswoman CHELLIE PINGREE. It is named after a constituent of mine, Ruth Moore.

This important legislation seeks to better serve those men and women who have become victims of military sexual trauma. This legislation makes clear that we expect the VA to update its regulations in regards to military sexual trauma, which we believe are outdated and do not reflect the needs of those who are living through this awful experience. This bill would encourage the VA to update its regulations to ensure that military sexual trauma is specified as an in-service stressor and that those updated regulations also recognize the full range of physical and mental disabilities that may result.

Mr. Speaker, VA did the right thing by our Vietnam veterans exposed to Agent Orange by updating their regulations. We expect VA to also do the right thing by veterans who have been suffering from military sexual trauma.

H.R. 671, as amended, contains language to ensure VA follows through on the requirement to do better by those who have suffered military sexual trauma. It will dramatically increase the reporting requirements of VA in the event that these regulations are not updated within 15 months in an appropriate manner.

Let’s be clear: Congress disagrees with VA’s assessment that MST is being adjudicated effectively. We expect VA to take a good, hard look at this issue and update its regulations in a timely fashion. We will be watching, and we will be having oversight hearings to make sure that the reporting requirements are upheld.

I would urge my colleagues to support passage of H.R. 671, the Ruth Moore Act.

With that, I reserve the balance of my time.

Mr. MILLER of Florida. Mr. Speaker, at this time, I yield as much time as he might consume to the subcommittee chairman of Disability Assistance and Memorial Affairs, the gentleman from New Jersey (Mr. RUNYAN).

Mr. RUNYAN. Thank you, Chairman MILLER, for yielding me time.

Mr. Speaker, H.R. 671, as amended, is known as the Ruth Moore Act of 2013.

As chairman of the Subcommittee on Disability Assistance and Memorial Affairs, I am pleased once again that our subcommittee worked in a productive and bipartisan manner on this important bill for our Nation’s servicemembers. I also applaud the leadership shown by Ms. PINGREE in sponsoring this legislation.

Military sexual trauma is a terrible act, a betrayal of trust, and it is not to be tolerated. Furthermore, those veterans who were victimized by their fellow servicemembers are entitled to VA assistance, and they are entitled to a fair and thoughtful review of their claims.

Thus, H.R. 671, as amended, sets stringent reporting requirements and urges the Department of Veterans Affairs to make necessary changes to their regulations on military sexual trauma to ensure their fair review.

I strongly support H.R. 671, as amended, and I urge my colleagues to also support this bill.

Mr. MICHAUD. Mr. Speaker, at this time, I would like to yield 5 minutes to the author of the bill, the gentlewoman from my home State of Maine, Congresswoman CHELLIE PINGREE.

Ms. PINGREE of Maine. Mr. Speaker, first, I want to thank my colleague from Maine, Mr. MICHAUD, for his time, for his leadership on the Veterans’ Affairs Committee, and for sharing his brave constituent, Ruth Moore, with me.

I also want to thank Chairman MILLER for his bipartisan work on this bill, as well as subcommittee chair, Mr. RUNYAN, and Ms. TITUS, the ranking member, for their work on this issue as well. Thank you very much.

Mr. Speaker, lately it has been hard to escape the news about the crisis of sexual assault in the military. Senior military personnel charged with preventing sexual assault are themselves investigated or arrested for the very same thing.

A new Pentagon report showing 26,000 men and women were sexually assaulted in the military last year—up 35 percent. And only about one in 10 of those assaults were reported, and even fewer ended up with a prosecution. In fact, the Pentagon says that every week—every single week—400 sexual assaults go unreported.

But even though we’ve heard much more about this problem lately, in no way is it a new problem. Almost every day I hear from another veteran who is the survivor of sexual assault in the military. Men and women of all ages, from every branch of the service, from every era. I have heard from survivors of sexual assault from World War II, the war in Afghanistan, and every conflict and every era in between.

There is no question that we have to get to the root of the problem, that we have to reform the legal service and

change the culture so sexual assault in the military is no longer tolerated and is thoroughly prosecuted.

But the sad fact remains: even if sexual assault in the military ended today, even if a woman or man in uniform was never raped again, there would still be tens of thousands of veterans who survived a sexual assault and suffer a disability because of it, but still can't get veterans disability benefits that they are owed.

That's why we need this bill, the Ruth Moore Act. This bill doesn't create any new benefits for survivors of sexual assault. This bill doesn't give any special treatment to the survivors of sexual assault. This bill just levels the playing field and makes it easier for those survivors to get the benefits they are owed.

A few years ago, the Department of Veterans Affairs acknowledged that too many combat veterans were suffering from PTSD and they were being denied benefits because it was too difficult to document what happened to them on the battlefield. So the VA made a commonsense change. They said if you were in combat and a VA doctor gives you a diagnosis of PTSD, and if an examiner links that diagnosis to the combat you experienced, then you are eligible for benefits.

The Ruth Moore Act asks the VA to do the same thing for victims of military sexual assault. If a VA doctor gives a veteran a diagnosis of a mental health condition and there is a medical link to the sexual assault, then the VA will have to qualify the veteran for service-related disability benefits.

Currently, the VA requires "secondary markers" to show the sexual assault occurred. Those secondary markers—statements from relatives or friends or a supervisor—are often hard to come by, especially for veterans who suffered an assault years or even decades ago. In the case of combat-related PTSD, those secondary markers are no longer required and the sworn statement of a veteran is sufficient. The same reform should apply to survivors of sexual assault.

We named this bill after a very brave woman from Maine. Ruth Moore was in the Navy when she was 19, serving her country. At a base in the Azores she was raped. When she reported it, she was told to keep quiet, and then she was raped again. For 23 years she fought for the benefits she was owed. Her records were tampered with, she was diagnosed with mental illness, and her life fell apart. After decades of fighting, Ruth was finally given the benefits we owed her, and slowly she has put her life back together.

When I met her in my office in Maine 2 years ago, she could barely tell her story. Her friends, her neighbors, even many of her loved ones didn't know what had happened to her. But bit by bit, Ruth has rebuilt her trust of people in positions of responsibility to the point where she came here to Washington and testified before the Vet-

erans' Affairs Committee—a very brave woman.

But there are thousands and thousands of Ruth Moores out there who have been fighting for their benefits for years or even for decades. As survivors of sexual assault, they have suffered and sacrificed enough. We can make the process of getting the benefits they are owed a little bit simpler.

I urge my colleagues to support this important bill.

□ 1250

Mr. MILLER of Florida. I continue to reserve the balance of my time.

Mr. MICHAUD. At this time, I yield 3 minutes to the gentlewoman from California (Mrs. NEGRETE McLEOD).

Mrs. NEGRETE McLEOD. Thank you, Ranking Member MICHAUD.

Mr. Speaker, today, I rise in support of H.R. 671, the Ruth Moore Act of 2013.

This bill specifies military sexual trauma as a type of stressor for posttraumatic stress disorder. This is an important step forward in assuring that the VA gives full consideration for disability claims originating from sexual violence committed against military personnel while they serve our country.

As a cosponsor of H.R. 671 and as a member of the Military Sexual Assault Prevention Caucus, I believe we must support our veterans who may confront challenges upon returning to civilian life. This includes obtaining compensation for violence committed by a fellow servicemember.

Mr. MILLER of Florida. Mr. Speaker, we are ready to close if the ranking member is ready as well, so I continue to reserve the balance of my time.

Mr. MICHAUD. Mr. Speaker, I yield myself such time as I may consume.

In closing, today, we can take a meaningful step to ensure the VA better serves veterans who were subject to sexual trauma while serving in our military. These veterans' disabilities were not the result of fire from the enemy, and they were not the result of injury incurred during training. They were the result of the armed services' continual failure to systematically address the culture of sexual assault in the military.

This situation is unacceptable and unconscionable, and we must act. With this legislation, we hope to ensure that the VA helps these disabled veterans. We have a duty to make the lives of these men and women a little better. They never should have had to deal with these events in the service of our Nation anyway, so I encourage my colleagues to support this legislation.

I also want to thank the chairman of the full committee and the chairman of the subcommittee and their staffs for their hard work in bringing this bill before the floor for us to vote on today. I know the committee staffs on both sides of the aisle have worked very hard to amend this bill so that it's acceptable to both sides of the aisle. I thank the chairman for all his hard ef-

forts, not only on this legislation, but also on legislation as it affects veterans and their families throughout the country.

With that, Mr. Speaker, I have no further requests for time, and I yield back the balance of my time.

Mr. MILLER of Florida. Mr. Speaker, I think the words speak for themselves as well as the comments that have been made here on the floor. I would just close with this: that I urge all of my colleagues to support the Ruth Moore Act. I support H.R. 671, as amended, and I yield back the balance of my time.

Ms. BROWNLEY of California. Mr. Speaker, as Ranking Member of the House Veterans' Affairs Subcommittee on Health—and an original co-sponsor of the bill—I would like to express my wholehearted support for H.R. 671 and to urge my colleagues to vote in favor of this critical legislation.

I would also like to thank my colleague from Maine for introducing this important bill.

It is absolutely intolerable for any servicemember to be subjected to sexual assault while serving in our nation's armed forces.

It is also unacceptable that veterans are being denied treatment at the VA because they don't have adequate proof that the assault happened.

Under existing VA policies, a lack of military documentation and inconsistencies among VA regional offices have resulted in veterans, like Ruth Moore, being denied disability benefits.

For 23 years Ruth was told by the VA that she did not provide enough evidence proving the assault happened.

Instead of receiving the high quality VA care and benefits she had earned immediately upon separation, she had to fight and wait for over two decades for benefits.

Again, I urge my colleagues to vote for H.R. 671 to correct this injustice.

Mrs. KIRKPATRICK. Mr. Speaker, I submit this statement in support of H.R. 671, the Ruth Moore Act of 2013, introduced by Rep. CHELLIE PINGREE of Maine.

This legislation makes it easier for veterans to receive benefits for disabilities (PTSD) that stem from sexual assaults. The Pentagon reports that the number of sexual assaults in the military has grown from 19,000 to 26,000 since last year. One in 3 servicewomen report having been sexually assaulted, but an estimated 86 percent of assaults are never reported.

Our military is a source of great strength and national pride, and we should expect nothing less than the highest standards of conduct, from rank and file troops to the upper echelons of leadership.

We must eradicate the criminal, violent acts of sexual assault, and we must remove institutional barriers that allow perpetrators to go unpunished and victims to be revictimized.

I agree with the provision of H.R. 671, which asks the Department of Veterans Affairs to lower the burden of proof to receive benefits. Currently, servicewomen are required to provide secondary evidence to show that the trauma occurred—a burden not required for other combat-related claims.

Let's stand up for our brave servicewomen by building a better system—one that honors and affirms them as members of the mightiest military force on the globe.

Ms. BROWN of Florida. Mr. Speaker, I rise today in support of H.R. 671, Ruth Moore Act of 2013. This bill will right a wrong in our veterans' compensation process for those servicemembers suffering from military sexual trauma.

One of the problems we have when trying to help veterans victimized by their superiors is lack of information about how often it happens and how many veterans are victims.

This bill requires the VA to collect and report on many aspects of those who are suffering from MST, but are unable to get relief from the VA.

The VA will be required to provide on a monthly basis its progress with regards to military sexual trauma of every veteran that has applied for benefits or has been treated at a VA facility. This update shall include: The three most common reasons for denial, the average time for completion of these claims, the average time for processing MST claims and how MST compares to other PTSD claims.

We cannot know how to begin to treat and compensate victims of Military Sexual Trauma until we know more about this disability.

I fully support this legislation and urge its passage by the House.

The SPEAKER pro tempore. The question is on the motion offered by the gentleman from Florida (Mr. MILLER) that the House suspend the rules and pass the bill, H.R. 671, as amended.

The question was taken; and (two-thirds being in the affirmative) the rules were suspended and the bill, as amended, was passed.

The title was amended so as to read: "A bill to amend title 38, United States Code, to direct the Secretary of Veterans Affairs to submit to Congress an annual report on claims for disabilities incurred or aggravated by military sexual trauma, and for other purposes."

A motion to reconsider was laid on the table.

PROVIDING FOR CONSIDERATION OF H.R. 2216, MILITARY CONSTRUCTION AND VETERANS AFFAIRS, AND RELATED AGENCIES APPROPRIATIONS ACT, 2014; AND PROVIDING FOR CONSIDERATION OF H.R. 2217, DEPARTMENT OF HOMELAND SECURITY APPROPRIATIONS ACT, 2014

Mr. WEBSTER of Florida. Mr. Speaker, by direction of the Committee on Rules, I call up House Resolution 243 and ask for its immediate consideration.

The Clerk read the resolution, as follows:

H. RES. 243

Resolved, That at any time after the 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. 2216) making appropriations for military construction, the Department of Veterans Affairs, and related agencies for the fiscal year ending September 30, 2014, 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 one hour equally divided and controlled by the chair and ranking minority member of the Committee on Appropriations. After general debate the bill shall be considered for amendment under the five-minute rule. Points of order against provisions in the bill for failure to comply with clause 2 of rule XXI are waived. During consideration of the bill for amendment, the chair of the Committee of the Whole may accord priority in recognition on the basis of whether the Member offering an amendment has caused it to be printed in the portion of the Congressional Record designated for that purpose in clause 8 of rule XVIII. Amendments so printed shall be considered as read. When the committee rises and reports the bill back to the House with a recommendation that the bill do pass, the previous question shall be considered as ordered on the bill and amendments thereto to final passage without intervening motion except one motion to recommit with or without instructions.

SEC. 2. At any time after the 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. 2217) making appropriations for the Department of Homeland Security for the fiscal year ending September 30, 2014, 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 one hour equally divided and controlled by the chair and ranking minority member of the Committee on Appropriations. After general debate the bill shall be considered for amendment under the five-minute rule. Points of order against provisions in the bill for failure to comply with clause 2 of rule XXI are waived except for section 563. During consideration of the bill for amendment, the chair of the Committee of the Whole may accord priority in recognition on the basis of whether the Member offering an amendment has caused it to be printed in the portion of the Congressional Record designated for that purpose in clause 8 of rule XVIII. Amendments so printed shall be considered as read. When the committee rises and reports the bill back to the House with a recommendation that the bill do pass, the previous question shall be considered as ordered on the bill and amendments thereto to final passage without intervening motion except one motion to recommit with or without instructions.

SEC. 3. Pending the adoption of a concurrent resolution on the budget for fiscal year 2014, the provisions of House Concurrent Resolution 25, as adopted by the House, shall have force and effect in the House as though Congress has adopted such concurrent resolution, and the allocations of spending authority printed in Tables 11 and 12 of House Report 113-17 shall be considered for all purposes in the House to be the allocations under section 302(a) of the Congressional Budget Act of 1974.

The SPEAKER pro tempore. The gentleman from Florida is recognized for 1 hour.

□ 1300

Mr. WEBSTER of Florida. Mr. Speaker, for the purpose of debate only, I yield the customary 30 minutes to my friend and colleague, the gentleman from Florida (Mr. HASTINGS), pending which I yield myself such time as I may consume. During consideration of this resolution, all time yielded is for the purpose of debate only.

GENERAL LEAVE

Mr. WEBSTER of Florida. Mr. Speaker, I ask unanimous consent that all Members have 5 legislative days to revise and extend their remarks.

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

There was no objection.

Mr. WEBSTER of Florida. Mr. Speaker, I rise today in support of the rule and the two underlying bills.

House Resolution 243 provides for an open rule for consideration of H.R. 2216, the Military Construction and Veterans Affairs, and Related Agencies Appropriations Act of 2014, and H.R. 2217, the Department of Homeland Security Appropriations Act of 2014.

This rule provides ample opportunities for Members from both the minority and majority to participate in the debate, and it does not limit the number of amendments that may be considered, so long as the amendments comply with the rules of the House.

My colleagues from both sides of the aisle agree that these appropriation acts for fiscal year 2014 are the products of an open, collaborative, and bipartisan process.

They provide critical funding for military construction, housing, schools, and medical facilities for our servicemembers and their families, important veteran programs, the protection and security of our airports, seaports and national border, and disaster relief efforts. They also reduce duplication, improve oversight, encourage efficiency, and increase coordination of services.

Mr. Speaker, these bills address non-partisan issues that affect every one of us. The seamless operation of these agencies and programs and projects will benefit all Americans.

Let me first address H.R. 2216, the Military Construction and Veterans Affairs, and Related Agencies Appropriations Act of 2014.

This fiscally sound bill funds programs that are necessary to keep our promises to our veterans and to train, equip, house, and support the brave men and women in uniform, as well as their families.

This bill provides over \$73 billion in discretionary funding, which is \$1.4 billion above the enacted fiscal year 2013 level. It continues to provide advanced funding that was approved in fiscal year 2013 for veteran medical care and funds programs to reduce the staggering backlog which severely delayed the process of veteran benefits claims. This advance funding will ensure that our veterans have full access to medical care regardless of where we stand in the annual appropriation process.

H.R. 2216 funds military construction projects, including family housing, military medical facilities, and Department of Defense education facilities. It also funds critical VA medical services and provides for a unified electronic health record system to integrate Department of Defense and Veterans Affairs health records.