

the safe and efficient processing of passengers and cargo going through our airport.

As time passes by, this endemic problem has only proven to deteriorate. The Miami-Dade congressional delegation and MIA officials have long been focused on how to fix this problem while ensuring a safe and seamless travel experience for our local residents and our many, many visitors.

Earlier this week, I wrote a letter to Secretary Johnson of the Department of Homeland Security asking for his immediate action on alleviating the ongoing shortage of CBP officers, a deficiency that sets back efforts to make Florida competitive; and it hurts our travel and tourism, two vital engines to our Nation's economy.

The entire Miami-Dade congressional delegation, including our Senators, is united on this bipartisan, bicameral effort.

With a strategic location to handle connections between the Americas and Europe, MIA serves as the doorstep to the United States. In 2013, a record 40 million passengers passed through MIA's doors as they made their way to their final destinations. These people come to our port of entry either to visit south Florida or to make connections to other national and international destinations. We need to welcome them with the world-class airport that MIA can be and not with long lines, hassles, and congestion.

Under the leadership of Dr. Emilio Gonzalez, the director of the Miami-Dade Aviation Department, MIA has taken a number of steps to ease the lack of CBP officers. How have they done this? Installing automated passport control self-serve kiosks; also, increasing the Miami-Dade Aviation Department staffing, participating in a reimbursable fee agreement pilot program approved by Congress which allows for needed overtime, and by closing certain gateways in order to concentrate CBP officers in appropriate areas.

However, despite MIA's innovative approach, CBP's insufficient staffing levels continue to pose serious challenges to the airport's daily operations. With the growing number of passengers arriving or transitioning through MIA and with the World Cup in Brazil approaching, MIA will have an even busier summer. We need to be prepared. And that is why we ask for Secretary Johnson's assistance in providing much-needed CBP staffing and to remember that MIA's success is our Nation's success.

Mr. Speaker, I cannot stress enough the pressing need for Federal staffing at MIA, which will only allow for a further streamlining of long lines and will also help in the reduction of wait times for visitors and for residents, alike.

#### END HUNGER NOW

The SPEAKER pro tempore. The Chair recognizes the gentleman from

Massachusetts (Mr. MCGOVERN) for 5 minutes.

Mr. MCGOVERN. Mr. Speaker, this week, as part of my End Hunger Now series, I want to focus on one of the most important and successful Federal antihunger and nutrition programs, the WIC program. The Special Supplemental Nutrition Program for Women, Infants, and Children, commonly known as WIC is a fantastic program that is celebrating its 40th anniversary this year. It truly is an amazing program, one that has been a tremendous success for 40 years.

WIC is a short-term intervention program designed to influence nutrition and health behaviors in a targeted high-risk population. What does that mean? Well, Mr. Speaker, it means that it provides nutritious food and nutrition education, among other services, to pregnant women, infants, and young children.

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Specifically, WIC provides quality nutrition education and services, breast-feeding promotion and education, a monthly food prescription, and access to maternal, prenatal, and pediatric health care services.

Not only has WIC been around for 40 years, it has served millions of women and children over that time. For example, more than 10,000 clinics served 8.7 million women and children each month in 2013. That figure includes 853,000 pregnant women, 595,000 breast-feeding women, 598,000 postpartum, 2 million infants, and 4.6 million children. Those are monthly figures, Mr. Speaker.

Let's be clear: this is an important antipoverty program. It helps poor pregnant women, postpartum mothers, and their children receive both nutritious food and nutrition education. That's right, this program serves poor people—and does so successfully.

To qualify for WIC, participants' income level must be at or below 185 percent of the poverty level or they must be on Medicaid. That is about \$36,000 a year for a family of three. We are not talking about wealthy people here, Mr. Speaker. In fact, nearly three-fourths of all WIC participants live in families with incomes below the Federal poverty level. That means most families of three are making less than \$36,000. In fact, according to the latest data available, the average income of a participant was \$16,842 a year.

The services WIC provides are critically important, and they are based on sound science. For example, we know how important it is for women to breast-feed their children. Breast milk contains important nutrients infants need to grow and to develop. We know that breast-fed infants tend to be healthier because they receive antibodies from the breast milk, antibodies that protect these young kids against infection. Did you know that breast-feeding has also been proven to save money? That's right. If 90 percent of

U.S. mothers exclusively breast-fed their infants for 6 months, the U.S. would save \$13 billion annually in medical expenses and prevent 900 deaths a year.

Another important part of WIC that is based on science is the food package that is made available to each client. They are designed specifically for each person, whether you are a pregnant mother, nursing mother, or a child. The foods available are approved by the scientists and the researchers at the Institute of Medicine. That's right, not Members of Congress or non-science-based administrators in a Federal agency that approve or deny certain foods from the WIC package. We know that proper nutrition can make people healthier, reduce instances of illness and disease, and prevent or reduce hospital visits and stays. I guess my mother was right when she said, An apple a day keeps the doctor away.

That is why it is so maddening and so disappointing when special interests try to change the WIC food package just so they can see a little bit more money for their product. Proper nutrition can save money—something I think should be popular in this Congress—and ignoring science because special interests want to make a quick buck is just wrong.

That is why I am so proud of this program. A few years ago, there was an attempt in the House of Representatives to underfund WIC—to deny these important services to poor women and their children. The backlash was fierce. That funding was quickly restored, and we haven't seen an attempt to cut WIC since. I only wish that were true for other Federal antihunger programs.

You see, Mr. Speaker, this program is what is best about America. Ironically, it was a program that was born in the Nixon administration. In fact, it came from the first and only White House conference on hunger, something I wish this President, President Obama, would convene before his term is over.

For 40 years WIC has ensured that poor women and their children have access to nutritious food and nutrition education. It is just that simple. These women and children have a lifeline to making their lives healthier and better. It is safe to say that the millions of people served by WIC would be worse if it weren't for this program.

I am proud of this program. I am proud of the people who work at WIC clinics, and the administrators, and those who administer the program in every State. I am proud of the people who advocate and fight for this program. I look forward to the day when we don't need WIC because we have eradicated poverty once and for all. Until that day comes, I am proud that we have WIC to help make the lives of the women and children they serve just a little bit better.

## SUSTAINABLE GROWTH RATE FIX

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

Mr. DUFFY. Mr. Speaker, today I rise to discuss the issue of Medicare and Medicare reimbursement payments to doctors who provide health care for our seniors.

Currently, the reimbursement formula for our doctors who provide these services is one that has become so low that many doctors in America aren't providing services and care to our seniors.

It brings me to a bill that is coming up tomorrow in the House. It is the doc fix. It is a fix to the SGR. What that means is, there is on the horizon a 24 percent cut coming to Medicare reimbursements for our doctors who provide care for our seniors.

If that cut goes into effect, it is going to have a devastating impact on the care that our seniors can receive. So tomorrow we are going to have a fix on the floor that takes away the threat of the 24 percent cut, and we pay for it. What we do is we bring certainty to the doctors who provide this care for our seniors and stability to the payment system.

Now, this isn't the first time this issue has been brought up. This has been an ongoing problem, and so today, on throwback Thursday, we are going to take a trip down memory lane. Four years ago, during the ObamaCare debate, House Republicans brought up this very issue and said: Listen, let's not hold our seniors hostage. Let's actually come forward together and have a doc fix that is paid for to make sure our seniors don't get cut in regard to reimbursements. My colleagues across the aisle said "no" to this fix that was paid for, and in the end we have had to have short-term fixes that I think threaten the care for our seniors.

I hope all my colleagues tomorrow will stand with us to have a long-term fix to this program, to make sure our seniors aren't held vulnerable to potential inaction by Congress.

I also want to talk about what happened in regard to our seniors in the ObamaCare debate. Instead of fixing payment in Medicare to our doctors for our seniors, instead of shoring up a plan that helps our seniors, instead of doing that, what my friends across the aisle did in ObamaCare is they looked for a pay-for, and they saw a pot of money in Medicare, and they took almost a trillion dollars out of Medicare to use for ObamaCare.

News flash: the CBO, and the President, everybody acknowledges that Medicare is on a pathway to going broke. Twelve years from now it runs out of money. So instead of shoring up the fund, making sure that we meet the promise to our seniors, my friends across the aisle took almost a trillion dollars out of it, making it more vulnerable.

Then, a program that works well, especially for my seniors back in Wis-

consin, Medicare Advantage—taking money out of Medicare Advantage, a program that actually works, giving some choice and control to our seniors. I think our seniors deserve better than this. The war on the seniors should stop, and is going to stop hopefully tomorrow with a bipartisan effort that does what we should have done in the ObamaCare debate but fixes payments to doctors so they can continue to provide lifesaving health care to our seniors.

Let's stand together as a House. Let's stand with our seniors. Let's get this done tomorrow.

## WOMEN'S HISTORY MONTH

The SPEAKER pro tempore. The Chair recognizes the gentlewoman from Texas (Ms. JACKSON LEE) for 5 minutes.

Ms. JACKSON LEE. Mr. Speaker, this morning we are now in the midst of Women's History Month. I want to associate myself with the women's history Special Order that was on the floor last evening. I look forward through the rest of the month of March to continue or to acknowledge women from my own congressional district.

This morning, however, I wish to comment on a woman who has loomed large in our political eyes, and I thought out of fairness to give the record of former Secretary of State Hillary Clinton a fair shot. The reason I chose to do that, Mr. Speaker, is over the weekend, as many occurrences occur, political meetings abound in this Nation, and the Conservative Political Action Conference met.

Interestingly enough in the reporting, the newspaper noted that Hillary Rodham Clinton had a presence at the Nation's largest gathering of conservative activists. Interestingly enough, former Secretary Clinton was not there, obviously not invited. I think it is important to take note of some of the comments that were made that really require some kind of addressing.

One comment was that women should not be used. Another came from the former Speaker and charged that if Secretary Clinton decided to run for President, it would be like a prison guard for the past. Words I think that may be political rhetoric but really do a great disservice to a woman with a very strong historical record.

Early in her life, former Secretary Clinton met Dr. Martin Luther King, born in Chicago to parents whose political beliefs, or part of their political beliefs, were different from Secretary Clinton's today. She was an active young woman and through her church had the opportunity to meet Dr. Martin Luther King. You can imagine her thoughts a few years later when Dr. King was assassinated. It may have had a major impact on her belief in serving her country and helping America.

Hillary Clinton is a graduate of Wellesley College and Yale Law School. She worked on migrant worker issues for Walter Mondale's staff. Also,

she was on the law editorial board—I would suggest, at that time, certainly one of the pioneering women at Yale Law School.

Of course many of us know that she worked for the Children's Legal Defense Fund and really honed her skills of concern about making children our number one priority. I would offer to say that when I came to the United States Congress, former Secretary Clinton was First Lady. At that time I organized and founded the Congressional Children's Caucus. During the 1990s it was very clear that the First Lady at that time was very concerned still with children's issues and held one of the first conferences on 0 to 3 months, and how a baby could learn and how we should be nurturing that infant. It was a very major conference to focus our legislative agenda on that issue. It was during that time that Marian Wright Edelman continued to work with the former Secretary of State on the issues of dealing with the whole comprehensive child, what a child needs from 0 on to adulthood. Even today I would argue that we do not have a children's agenda.

I will soon be offering a briefing promoting a children's budget that came out of the efforts and collaboration with the former Secretary of State during her tenure in the White House as First Lady. As First Lady she traveled to emphasize the importance of freedom for women around the world. She was not yet Secretary. One of the first acts that we remember, among the acts that we remember, is her going to China and declaring that women's rights are human rights.

I would venture to say that the words at the CPAC convention do not in any way characterize the leadership of Hillary Rodham Clinton. Certainly she has gone on to many other successes, which include her leadership as Secretary of State, the constant work of freeing women, women's rights. I would say, Mr. Speaker, that she is a fine example of a mother, a wife, a leading national figure, a historic figure who represents Women's History Month.

## USA CAN'T POLICE THE WORLD

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

Mr. DUNCAN of Tennessee. Mr. Speaker, President Kennedy, in a 1961 speech at the University of Washington, said:

We must face the fact that the United States is neither omnipotent or omniscient—that we are only 6 percent of the world's population—that we cannot impose our will upon the other 94 percent of mankind—that we cannot right every wrong or reverse each adversity—and that therefore there cannot be an American solution to every world problem.

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The major difference now than when he spoke in 1961 is that we are only 4 percent of the world's population, and