

## 21ST CENTURY CURES ACT

SPEECH OF

**HON. JOSEPH R. PITTS**

OF PENNSYLVANIA

IN THE HOUSE OF REPRESENTATIVES

*Thursday, July 9, 2015*

The House in Committee of the Whole House on the state of the Union had under consideration the bill (H.R. 6) to accelerate the discovery, development, and delivery of 21st century cures, and for other purposes:

Mr. PITTS. Mr. Chair, I rise in strong support for H.R. 6, the 21st Century Cures Act which will help advance the discovery, development, and delivery of new treatments and cures for patients and will foster private sector innovation here in the U.S.

Arriving here today has been a long journey—full of lots of steps and some twists and turns along the way. I especially want to thank Legislative Counsel for their tireless efforts in helping translate our legislative aims into legislative language. They worked nights and weekends and were consummate professionals throughout the process. Specifically, I want to thank the following: Warren Burke, Ed Grossman, Jessica Shapiro, Michelle Vanek, and Jesse Cross.

I also want to thank the health care staff of the Congressional Budget Office for all their help in recent months. In addition to their role in estimating the budgetary effects of numerous policies in the bill, they were instrumental in helping us shape a number of proposals the Committee considered. I specifically want to thank Holly Harvey, Tom Bradley, Chad Chirico, and all their colleagues for their diligence and assistance through the process.

And I would be remiss if I did not again thank the outstanding team on Energy and Commerce, and most especially the Health team, led by Chief Health Counsel, Clay Alspach, supported by Josh Trent, Paul Edattel, John Stone, Robert Horne, Carly McWilliams, Michelle Rosenberg, Katie Novaria, Adrianna Simonelli, Traci Vitek and Graham Pittman—without whose expertise, wisdom and counsel, this legislative work would not be possible.

H.R. 6 was reported from Energy and Commerce Committee by a vote of 51–0 and advances conservative fiscal and regulatory reforms. Every dollar of advanced appropriations in the bill (which will sunset at the end of FY 2020) is offset with other permanent reforms—including billions of dollars in mandatory entitlement savings in Medicare and Medicaid.

But this is no ordinary mandatory spending—like the kind we usually see in entitlement spending such as Social Security, Medicare, Medicaid and Obamacare. This mandatory spending is for five years only and then stops or sunsets. This mandatory spending is fully paid for with mandatory spending cuts elsewhere that will not stop in five years, but are permanent reforms resulting in real savings. By comparison, the Ryan-Murray budget deal for health care savings yielded much less.

This innovative hybrid approach allows us to cut mandatory spending (entitlement spending) and use the savings to fund what would otherwise be a discretionary project—but in this case is 5-year dedicated spending on medical research.

Congressional Budget Office determined that H.R. 6 will reduce the deficit by \$500 mil-

lion over the first ten years, and at least another \$7 billion over the second decade.

The funds provided to the National Institutes for Health (NIH) and Food and Drug Administration (FDA) will be subject to explicit review and reprogramming through the annual appropriations process. Congress can review the dedicated funding and allocate it for specific initiatives.

Additionally, all the important policy riders that accompany federal funding through appropriations will be included—such as the Hyde Amendment and the Dickey-Wicker Amendment.

This bill also includes a policy that excludes authorized generics from Average Manufacturers' Price. This is a commonsense policy from the President's budget proposal, intended to ensure the appropriate calculation of Medicaid brand name rebates paid by manufacturers. The policy is not intended to effect Medicaid programs' pharmacy reimbursements. Instead, the provision, which many states support, will result in an increase in manufacturer rebates under Medicaid and thus save money for states and the federal government.

H.R. 6 will help America to innovate its way out of our entitlement crisis. The regulatory reforms included in H.R. 6 will accelerate the pace of discovery, development and delivery of new treatments and cures, thereby providing significant health care savings to the federal budget that will only grow over time.

By modernizing clinical trials, eliminating duplicative administrative requirements, and perhaps most importantly, making FDA less bureaucratic by advancing the voice and needs of patients in the drug and device approval process—H.R. 6 will make lasting, positive changes to the entire ecosystem of Cures. Over 250 patient groups have enthusiastically said "yes" and endorsed Cures.

I urge all of my colleagues to think of the patients and vote "AYE" in support of H.R. 6.

PROVIDING FOR CONSIDERATION  
OF H.R. 6, 21ST CENTURY CURES  
ACT

SPEECH OF

**HON. LOUISE McINTOSH SLAUGHTER**

OF NEW YORK

IN THE HOUSE OF REPRESENTATIVES

*Thursday, July 9, 2015*

Ms. SLAUGHTER. Mr. Speaker, I am the Ranking Member of the Rules Committee. Rules, as you know, is the process committee.

Whether you are a majority or a minority member, you have rights, but they have been trampled on and abused with increasing regularity under this majority, and we have two glaring examples of that just today.

Mr. Speaker, this bill is important to all of us, and we all agree on the importance of putting more money into major research in the United States, we are falling behind other countries in finding the cures and the innovation for which we have been known for centuries. This is an important step that we are taking. This is a critically important bill, but process matters.

Mr. Speaker, after the Energy and Commerce Committee had voted out this bill unanimously, major changes were made with no committee input at all. They include a reduction of the amount of money that the com-

mittee had said would be put into the National Institutes of Health by \$1.250 billion, a very substantial sum.

They added some policy riders that literally made no sense. Why in the world would you put an abortion rider on a bill for medical research? As far as I know, the NIH and most medical universities doing this research do not perform abortion procedures. It was simply a way, again, to mollify members and make them vote for this bill.

Mr. Speaker, despite the importance of this bill, despite the fact that it came out of committee unanimously, despite the fact that so many people have worked on it, and despite the fact that good things were in it, the process was completely changed after it was over by rewriting major portions of it. That doesn't appear anywhere in the rules of the House.

Now, let's also think about what happened here last night during the debate on the Interior bill, which was considered under an open rule. After the Ranking Member, BETTY MCCOLLUM of Minnesota, had yielded back her time, a new amendment was offered at the request of Republican leadership in order to pick up enough votes to ensure final passage. This new amendment sought to undo two already adopted amendments that would restrict the display of the Confederate flags in National Park Service cemeteries. These amendments were initially noncontroversial—as they should have remained. In fact, they were adopted by voice vote. However, following a revolt by Members of the Republican Conference, Republican leadership offered this new amendment without any warning in order to gain more votes. In the end, the Majority pulled the entire bill in order to avoid taking a vote on their effort to place Confederate flags in U.S. cemeteries.

Mr. Speaker, and then this morning the Majority chose to send Leader PELOS's resolution to committee in order to avoid taking a vote on it. Her resolution would have required the removal of state flags containing the Confederate battle flag from the House wing of the Capitol, unless the flag is flown by an individual Member. Mr. MCGOVERN stated quite precisely that the resolution will die in committee—we will never see that one again. Unfortunately, that's what happens here, but Mr. Speaker, it is time it was stopped.

I was born in a border State, in Kentucky. I lived there most of my life. I was educated there. I never saw a Confederate flag in all those years. These battle flags that they are putting up appeared in the South after the civil rights legislation. They were the products of Strom Thurmond and the Dixiecrats. That is when they started to bloom all over. It is a symbol of pure hate or fear. It needs to go.

RECOGNIZING THE 2015 OFFICERS  
OF THE OCCOQUAN WOODBRIDGE  
LORTON VOLUNTEER FIRE DE-  
PARTMENT

**HON. GERALD E. CONNOLLY**

OF VIRGINIA

IN THE HOUSE OF REPRESENTATIVES

*Monday, July 13, 2015*

Mr. CONNOLLY. Mr. Speaker, I rise to recognize the 2015 Officers of the Occoquan Woodbridge Lorton Volunteer Fire Department. The 2015 officers and members of the

board of directors are taking leadership roles in one of Northern Virginia's longest standing volunteer fire departments. The O.W.L. Volunteer Fire Department was created to address the need for organized fire response capabilities in the growing suburbs of Northern Virginia. Organized in 1938 and chartered in 1940, the Department officially formed to become the only fire department between Fredericksburg and Alexandria. In the subsequent decades O.W.L. has expanded to staff three stations and provide emergency medical services.

The members of O.W.L. are dedicated community volunteers, and the 2015 officers and directors will be diligent stewards of this tradition of service. The 250 active O.W.L. members answer 14,000 calls and serve 60,000 people each year. Their job is demanding and the hours are long, but these brave men and women are driven by their dedication to public safety and the communities that they serve. We would all do well to follow their example.

I congratulate and commend the following 2015 incoming officers:

Department Chief: James F. McAllister

Fire Assistant Chiefs: Kurt Bolland, Michael Clark, Steve Godin, Wayne Haight, and Dave Williams

EMS Assistant Chief: Edward A. Craig

Fire Captains: Jonathan Baldwin, Joshua Culp, Tony Carroll, Tim LeClercq, Ryan Williams, and Justin Witt

EMS Captain: Diana Ondra

Fire Lieutenants: Lindsey Blasius, Jesus Castro, Mark Chandler, Jon Colpitts, Jonathan Holland, Billy Moore, Kody Perry, and Stewart Young

EMS Lieutenants: Chad Fritz, Tammy Hill, Aaron Hope, Cynthia Thackwray, and Sandra Williams

Mr. Speaker, I ask that my colleagues join me in congratulating these remarkable volunteers on their new leadership positions, and in thanking all the members of the Occoquan Woodbridge Lorton Volunteer Fire Department for the vital service they provide to the Prince William County community.

100TH ANNIVERSARY OF THE  
ANSAR SHRINERS OF SPRINGFIELD, ILLINOIS

**HON. RODNEY DAVIS**

OF ILLINOIS

IN THE HOUSE OF REPRESENTATIVES

*Monday, July 13, 2015*

Mr. RODNEY DAVIS of Illinois. Mr. Speaker, I rise today to congratulate the Ansar Shriners of Springfield, Illinois on their 100th anniversary. To date, they are the seventeenth largest chapter of over two hundred Shriner chapters worldwide. The Shriners are a fraternity that believes in brotherhood, family, leadership, and giving back. They are dedicated to providing assistance to those in need.

Their philanthropic efforts enable the Shriner hospital network, containing nineteen children hospitals and three burn institutes, to provide care at no cost to their patients. The Shriner hospital network has cared for over one million children since its inception, providing expert pediatric specialty care regardless of their ability to pay.

The Ansar Shriners of Springfield exemplify the importance and power of community serv-

ice. I thank them for their continued support of the less fortunate and congratulate them on their 100th anniversary.

INTRODUCTION OF THE RECOVER ACT (REDUCING THE EFFECTS OF THE CYBERATTACK ON OPM VICTIMS EMERGENCY RESPONSE ACT OF 2015)

**HON. ELEANOR HOLMES NORTON**

OF THE DISTRICT OF COLUMBIA

IN THE HOUSE OF REPRESENTATIVES

*Monday, July 13, 2015*

Ms. NORTON. Mr. Speaker, I rise to introduce the Reducing the Effects of the Cyberattack on OPM Victims Emergency Response Act of 2015 (the RECOVER Act), a bill to require the Office of Personnel Management (OPM) to provide complimentary and comprehensive identity protection coverage to all individuals whose personally identifiable information was compromised during recent OPM data breaches. Senator BEN CARDIN (D-MD) has introduced the companion bill in the Senate. Yesterday, OPM reported that more than 21.5 million current and former federal employees have had their personal information compromised in a second OPM data breach, five times more than the 4.2 million already reported, for a grand total of 25.7 million federal employees and retirees. OPM said that the 21.5 million individuals whose background check records were compromised would receive only three years of credit monitoring and identity theft protection services and \$1 million in loss coverage, while the other 4.2 million individuals whose personnel records were compromised would receive 18 months of credit monitoring and \$1 million in loss coverage. In light of the scope of OPM's data breach and the limited protection that is proposed, I, along with my House colleagues CHRIS VAN HOLLEN, DON BEYER, DONNA EDWARDS, C.A. DUTCH RUPPERSBERGER, ELIJAH CUMMINGS, GERALD CONNOLLY, and JOHN DELANEY introduce a bill that would provide free lifetime identity theft protection coverage that includes identity theft insurance for losses up to \$5 million. This protection is particularly necessary since the breach was discovered a year after hackers had already infiltrated OPM's system.

OPM's proposed protection would not protect current and former federal workers if hackers simply waited for a period of years before exploiting the stolen identities. However, our bill would give current and former federal employees some peace of mind.

The RECOVER Act is necessary to reduce the angst of our dedicated public servants resulting from this entire ordeal. OPM failed to protect our current and former federal employees. It follows that the government must do the right thing to make up for its mistake.

21ST CENTURY CURES ACT

SPEECH OF

**HON. SHEILA JACKSON LEE**

OF TEXAS

IN THE HOUSE OF REPRESENTATIVES

*Thursday, July 9, 2015*

The House in Committee of the Whole House on the state of the Union had under

consideration the bill (H.R. 6) to accelerate the discovery, development, and delivery of 21st century cures, and for other purposes:

Ms. JACKSON LEE. Mr. Chair, I rise in support of H.R. 6, the 21st Century Cures Act, a bipartisan piece of legislation that is vital to the future and health of our Nation's citizens and ecosystem.

This thoughtful legislation is the culmination of the hard work of my dedicated colleagues who have sought out and engaged in public conversations with patients, innovators, providers, regulators and researchers about how to move advances in science and medicine into new therapies.

This outreach has garnered the critical input and support of more than 370 patient and physician groups, state and local organizations, cancer centers, and research and life sciences.

I'm proud to be one of the cosponsors of H.R. 6, which represents a new national effort to find treatment and cures for thousands of unknown and rare diseases.

Looking to the various policies this legislation aims to address, it is important to highlight the commendable objectives and that will not only accelerate the discovery, development and delivery of new treatments and cures for thousands of serious and rare diseases, but it will also open the doors of innovation and the growth of health care system by enhancing and enriching the medical field for all Americans.

The most ambitious action calls for \$10 billion in mandatory funding to be delivered over the next five years to the National Institutes of Health (NIH).

NIH is part of our nation's top ranked educational research institutions in the world.

In order to maintain our global competitiveness in the biomedical field, we must invest in the industries that guarantee economic prosperity for our current and future economies.

It has been estimated that every \$1 of NIH funding generates about \$2.21 in local economic growth, and, in 2012, NIH funded research supported an estimated 402,000 jobs all across the U.S.

The bill's funding for NIH would provide for an annual 3% increases in the NIH budget, which has been stagnant for the past few years and which desperately needs more funding to capitalize on emerging scientific insights.

This increased funding not only aims to continue the sustainability of our economy but it also supports our President's initiative to provide more resources to the biomedical field.

The 21st Century Cure Act supports the President's Precision Medicine Initiative, which would advance a new model of participant-centered research to accelerate biomedical discoveries and provide clinicians with new tools and therapies tailored to individual patients' needs.

The Obama Administration believes they can build on their progress in improving the drug development and approval process by: incorporating patients' voices into the Food and Drug Administration (FDA) decision-making; encouraging the development and qualification of reliable biomarkers to accelerate work on important new therapies; and reducing barriers to initiating medical device trials.

In furtherance of this initiative, H.R. 6 allows for the creation of an "Innovation Fund" through the National Institute of Health.