

to the people there. They are suffering greatly. Now we have found cases in parts of Florida, including areas that my colleague, Congresswoman WILSON, represents, and areas around Miami Beach. More importantly, there are 2,000 Zika cases in the United States, 600-plus are pregnant women, babies not yet born; and 35 cases have been found to have been transmitted here in the United States—and yet fiddling is going on. Unnecessary riders are being included in something that should simply pass because it is an emergency.

Shame on those who would cloud legislation with preventing the health clinics that women need, run by Planned Parenthood, from getting money. Shame on those who would try to undermine the executive order about confederate flags in veterans cemeteries on official flagpoles. You have every right to put it at your personal grave, or the family does. How ridiculous, how undermining of our authority, our constitutional responsibility to govern this Nation.

I am saddened because the image that is being perceived is that we cannot do our job. We can. We have to be Americans united together, facing the emergency.

Many Americans are not focused on the Zika virus. I understand. It has been a time of summer and frolic and time with family. But most infectious disease doctors—the regional task force that I have organized: Dr. Hotez, an infectious disease doctor at Baylor who is well renowned; and Dr. Persse, a well renowned medical professional in public health; along with OB/GYN and State officials. I want to thank them for their work.

They are asking me: Where are the resources for mosquito control, for the research, for the vaccine?

Just so you know, the cost of a baby that has been impacted by this terrible disease is \$10 million.

IRS COMMISSIONER

Ms. JACKSON LEE. Mr. Speaker, and then on the question of our duties, why would there be any discussion to impeach or to suggest the impeachment of a public servant like the IRS commissioner, who I know has done nothing wrong, including the words of the inspector general who can find nothing wrong that this retired private citizen, who came to help turn the IRS around, who came way after the trouble was raised about targeting different groups—he had nothing to do with it. And yet someone is suggesting he should be impeached.

What are you going to do with Americans who sacrifice and say, I want to serve, and then you abuse them and abuse the power of this Congress and suggest some kind of an impeachment?

I have gone through impeachment proceedings. Read the Madison papers. There is no suggestion of misconduct or treason by this individual.

We can't impeach people because the IRS is some entity that most of us would find not a welcomed guest at our

dinner table. And then again, they do great work. They are a part of the structure of this government.

So I would ask the question: Why?

That is not oversight; that is abuse.

CELEBRATING THE RETURN OF THE CHIBOK SCHOOLGIRLS

Ms. JACKSON LEE. Mr. Speaker, I want to celebrate the return of the Chibok schoolgirls. Many of you know that 200-plus girls were taken back in 2014, in Nigeria, snatched out of their beds, snatched out of a boarding school, abused, and taken by Boko Haram. Boko Haram, of course, is an ISIS cousin.

I want to acknowledge that FREDERICA WILSON, LOIS FRANKEL, and myself, we went to Nigeria when they were taken. Mr. Speaker, I am delighted to celebrate those girls are back. But we are going to fight Boko Haram in every way that we can possibly fight.

Finally, congratulations to the University of Houston football team that beat Oklahoma.

MEDICARE PART B PROPOSED PLAN FOR DRUG REIMBURSEMENT

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

Mr. CARTER of Georgia. Mr. Speaker, I rise today on behalf of seniors in the First Congressional District of Georgia. Many seniors in the First Congressional District of Georgia and across the Nation battle medically complex diagnoses, including cancer, rheumatoid arthritis, severe immune deficiency, epilepsy, and macular degeneration. These Medicare patients face significant complexities in their care and treatment options.

This spring, I joined over 240 of my colleagues in sending a letter to CMS that expressed our deep concerns with a sweeping, nationwide experiment that the Center for Medicare & Medicaid Innovation has proposed.

Patients and physicians in my district told me with no uncertainty that the CMMI experiment with part B drug payment will have negative consequences for millions of Medicare patients who depend on access to life-saving treatments to live better lives. Under the part B drug experiment, in many cases, Medicare payment for certain drugs would be significantly below a physician's acquisition cost for the drug. This will put patients at tremendous risk, potentially forcing them to abandon treatments for other treatments that have shown less success. Ultimately, CMS will manipulate choice of treatment for Medicare patients using heavy-handed reimbursement techniques that undermine any efforts by medical professionals who have dedicated their lives to treating complex conditions like cancer.

To make matters worse, CMS sought little to no stakeholder input, and has provided little turnaround time before medication treatment will be based on

cost, rather than what is best for the patient.

As a lifelong pharmacist, I trust clinically trained medical professionals to determine the best treatment for patients, not an unaccountable bureaucrat. Adding to the outlandish nature of this part B drug pilot project, there is nearly no escaping it. CMMI proposes to force nearly 75 percent of the country to participate in this Medicare drug experiment. 75 percent of the country is not a pilot project. It is near full implementation of a new program.

Just last week, CMS responded to the letter we sent them and simply thanked us for sharing our opinion. Such a brief and dismissive response is indifferent to the risk posed to our Nation's sickest patients and to this congressional body.

For all these reasons, I applaud my colleague from Indiana, Dr. LARRY BUCSHON, for sponsoring H.R. 5122 to prohibit CMS from moving forward with this dangerous, misguided experiment with seniors' lives. I proudly join him in his effort as a cosponsor of H.R. 5122 and encourage my colleagues to support this legislation.

REMEMBERING GEORGE KOMELASKY

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

Mr. FITZPATRICK. Mr. Speaker, George Komelasky of Northampton Township, Bucks County, Pennsylvania, was a friend and political colleague. His passing last month at the age of 66 was a personal loss that also leaves a gap in the township government where he served for 31 years. He was first elected in 1985, and he successfully was reelected just last year to another 6-year term.

At all times, George viewed his responsibilities in elective office as public service and performed intelligently and honorably term after term. Those with whom he served know he was conscious of his responsibilities to the taxpayers while providing necessary services that enhanced the quality of life in his hometown.

He was a leader who left his partisanship at the door and was viewed as a role model and also a mentor. Most of all, our friend, George Komelasky, will be remembered for his good nature and the values that guided his public and his private life.

MARGARET R. GRUNDY MEMORIAL LIBRARY

Mr. FITZPATRICK. Mr. Speaker, as we recognize the 50th anniversary of the Margaret R. Grundy Memorial Library in the borough of Bristol, Bucks County, Pennsylvania, we also acknowledge the legacy of United States Senator Joseph R. Grundy, who established this beautiful library on the banks of the Delaware River in the name of his sister Margaret.

This remains a privately funded public library with an ongoing mission: