

and telling the Elks: welcome back to Corpus Christi, Texas.

CONSTITUTION WEEK

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

Mr. THOMPSON of Pennsylvania. Mr. Speaker, I rise in recognition of Constitution Week.

I especially want to honor the efforts of the Daughters of the American Revolution, who initiated the observance of Constitution Week in 1955, in order to encourage the study of the events that led to the framing of the Constitution in 1787; to inform the citizens of the United States of America that the Constitution is the basis of America's heritage and our way of life; and to reinforce our responsibility to protect, defend, and preserve this great document.

Over this past weekend, the Colonel Hugh White-Colonel John Chatham Daughters of the American Revolution chapter in Lock Haven, located in Pennsylvania's Fifth Congressional District, organized a display of the Constitution and the Declaration of Independence at the community's library.

I want to thank the members of the Daughters of the American Revolution in Lock Haven and the members of the DAR all over Pennsylvania's Fifth Congressional District for everything they do to make sure that we never forget the work of our Nation's Founders and the tremendous importance of our Constitution.

HONORING THE LIFE OF CHARLES EVANS HUGHES

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

Ms. STEFANIK. Mr. Speaker, I rise today to honor a remarkable man from my district who dedicated his life to serving our country.

Charles Evans Hughes was born in Glens Falls, New York, where his first home still stands on Center Street. Mr. Hughes began his storied career in public service when he was elected Governor of New York in 1906. He was later appointed to the Supreme Court by President William Howard Taft, where he served 6 years, before resigning in 1916 to run for President.

While his run for President would be unsuccessful, Mr. Hughes continued his life of public service by serving as Secretary of State for Presidents Warren G. Harding and Calvin Coolidge. Later, Charles Evans Hughes was appointed Chief Justice of the Supreme Court by President Herbert Hoover.

In Glens Falls, we are proud of his amazing legacy of public service, and we will gather on October 15 to celebrate the 100th anniversary of his run for President.

CHILDHOOD CANCER AWARENESS MONTH

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

Mr. ROSKAM. Mr. Speaker, I rise today in observance of Childhood Cancer Awareness Month.

Sixteen thousand children in the U.S. are diagnosed with cancer every year. Only one in five will survive.

I have a very special constituent, Chase Ewoldt, of Wheaton, Illinois. This is Chase with his mom and dad. He was diagnosed at the age of 2, in July 2012, with a very rare aggressive brain and spinal cancer. He withstood a grueling 14 months of treatment, spending more time in the hospital than he had at home. He survived. He is not out of the woods yet though.

Chase is the nationwide ambassador for St. Baldrick's Foundation, and his mother wrote a book called "Chase Away Cancer."

This is an incredible example of resiliency, tenacity, and faithfulness in the course of a very difficult season, and I just want to pause and bring attention to Chase and to his family as we recognize Childhood Cancer Awareness Month.

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, September 20, 2016.

Hon. PAUL D. RYAN,
The Speaker, 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 September 20, 2016 at 9:29 a.m.:

That the Senate passed without amendment H.R. 5985.

That the Senate passed without amendment H.R. 5936.

That the Senate passed with an amendment H.R. 1475.

Appointment:
John F. Kennedy Centennial Commission.

With best wishes, I am

Sincerely,

KAREN L. HAAS.

□ 1415

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 motions 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.

Record votes on postponed questions will be taken later.

SPECIAL NEEDS TRUST FAIRNESS AND MEDICAID IMPROVEMENT ACT

Mr. GUTHRIE. Mr. Speaker, I move to suspend the rules and pass the bill (H.R. 670) to amend title XIX of the Social Security Act to extend the Medicaid rules regarding supplemental needs trusts for Medicaid beneficiaries to trusts established by those beneficiaries, and for other purposes, as amended.

The Clerk read the title of the bill.

The text of the bill is as follows:

H.R. 670

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

SECTION 1. SHORT TITLE; TABLE OF CONTENTS.

(a) *SHORT TITLE.*—This Act may be cited as the "Special Needs Trust Fairness and Medicaid Improvement Act".

(b) *TABLE OF CONTENTS.*—The table of contents of this Act is as follows:

Sec. 1. Short title; table of contents.

Sec. 2. Fairness in Medicaid supplemental needs trusts.

Sec. 3. Medicaid coverage of tobacco cessation services for mothers of newborns.

Sec. 4. Eliminating Federal financial participation with respect to expenditures under Medicaid for agents used for cosmetic purposes or hair growth.

Sec. 5. Medicaid Improvement Fund.

SEC. 2. FAIRNESS IN MEDICAID SUPPLEMENTAL NEEDS TRUSTS.

(a) *IN GENERAL.*—Section 1917(d)(4)(A) of the Social Security Act (42 U.S.C. 1396p(d)(4)(A)) is amended by inserting "the individual," after "for the benefit of such individual by".

(b) *EFFECTIVE DATE.*—The amendment made by subsection (a) shall apply to trusts established on or after the date of the enactment of this Act.

SEC. 3. MEDICAID COVERAGE OF TOBACCO CESSATION SERVICES FOR MOTHERS OF NEWBORNS.

(a) *IN GENERAL.*—Section 1905(bb) of the Social Security Act (42 U.S.C. 1396d(bb)) is amended by adding at the end the following new paragraph:

"(4) A woman shall continue to be treated as described in this subsection as a pregnant woman through the end of the 1-year period beginning on the date of the birth of a child of the woman."

(b) *CONFORMING AMENDMENTS.*—

(1) Subsections (a)(2)(B) and (b)(2)(B) of section 1916 of the Social Security Act (42 U.S.C. 1396o) are each amended by inserting "(and women described in section 1905(bb) as pregnant women pursuant to paragraph (4) of such section)" after "tobacco cessation by pregnant women".

(2) Section 1927(d)(2)(F) of the Social Security Act (42 U.S.C. 1396r-8(d)(2)(F)) is amended by inserting "(and women described in section 1905(bb) as pregnant women pursuant to paragraph (4) of such section)" after "pregnant women".

(c) *EFFECTIVE DATE.*—

(1) *IN GENERAL.*—Subject to paragraph (2), the amendments made by this section shall apply with respect to items and services furnished on or after the date that is two years after the date of the enactment of this Act.

(2) *EXCEPTION FOR STATE LEGISLATION.*—In the case of a State plan under title XIX of the Social Security Act, which the Secretary of Health and Human Services determines requires State legislation in order for the plan to meet any requirement imposed by amendments made by this section, the plan shall not be regarded as

failing to comply with the requirements of such title solely on the basis of its failure to meet such an additional requirement before the first day of the first calendar quarter beginning after the close of the first regular session of the State legislature that begins after the effective date specified in paragraph (1). For purposes of the previous sentence, in the case of a State that has a 2-year legislative session, each year of the session shall be considered to be a separate regular session of the State legislature.

(d) **REPORT.**—Not later than two years after the date of the enactment of this Act, the Inspector General of the Department of Health and Human Services shall submit to Congress a report that assesses the use of the tobacco cessation service benefit under the Medicaid program. Such report shall include an assessment of—

(1) the extent that States are encouraging the use of such benefit, such as through promotion of beneficiary and provider awareness of such benefit; and

(2) gaps in the delivery of such benefit.

SEC. 4. ELIMINATING FEDERAL FINANCIAL PARTICIPATION WITH RESPECT TO EXPENDITURES UNDER MEDICAID FOR AGENTS USED FOR COSMETIC PURPOSES OR HAIR GROWTH.

(a) **IN GENERAL.**—Section 1903(i)(21) of the Social Security Act (42 U.S.C. 1396b(i)(21)) is amended by inserting “section 1927(d)(2)(C) (relating to drugs when used for cosmetic purposes or hair growth), except where medically necessary, and” after “drugs described in”.

(b) **EFFECTIVE DATE.**—The amendment made by subsection (a) shall apply with respect to calendar quarters beginning on or after the date of the enactment of this Act.

SEC. 5. MEDICAID IMPROVEMENT FUND.

Section 1941(b) of the Social Security Act (42 U.S.C. 1396w–1(b)) is amended—

(1) in paragraph (2)—

(A) by striking “under paragraph (1)” and inserting “under this subsection”; and

(B) by redesignating such paragraph as paragraph (3); and

(2) by inserting after paragraph (1) the following new paragraph:

“(2) **ADDITIONAL FUNDING.**—In addition to any funds otherwise made available to the Fund, there shall be available to the Fund, for expenditures from the Fund—

“(A) for fiscal year 2021, \$10,000,000, to remain available until expended; and

“(B) for fiscal year 2022, \$14,000,000, to remain available until expended.”.

The SPEAKER pro tempore. Pursuant to the rule, the gentleman from Kentucky (Mr. GUTHRIE) and the gentleman from New Jersey (Mr. PALLONE) each will control 20 minutes.

The Chair recognizes the gentleman from Kentucky.

GENERAL LEAVE

Mr. GUTHRIE. Mr. Speaker, I ask unanimous consent that all Members have 5 legislative days in which to revise and extend their remarks and insert extraneous material in the RECORD on the bill.

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

There was no objection.

Mr. GUTHRIE. Mr. Speaker, I yield 5 minutes to the gentleman from Pennsylvania (Mr. THOMPSON).

Mr. THOMPSON of Pennsylvania. Mr. Speaker, I thank the gentleman for yielding.

Mr. Speaker, I rise today in strong support of H.R. 670, the Special Needs Trust Fairness and Medicaid Improve-

ment Act, a bipartisan measure that will remove arbitrary legal barriers for individuals with disabilities to independently create their own special needs trust.

Special needs trusts are valuable tools that enable assets to be saved on behalf of individuals with disabilities, while protecting their eligibility for means-tested benefits. Under current law, individuals who are or become disabled must have a parent, a guardian, or a court-appointed special needs trust regardless of the individual's capacity to do so on their own.

Mr. Speaker, not only does this requirement place an undue burden on individuals who seek a better financial future and want to live with dignity, it runs counter to the precedent set by Congress with the creation of pooled trust accounts in 1993 and the passage of the ABLE Act in 2014. Both provide disabled individuals and their families unencumbered access to mechanisms for savings.

My drive to correct this legal inequity stems from my experience as a certified recreational therapist, a hospital manager, a rehabilitation services manager, and a licensed nursing home administrator. In these roles, I worked with many people who set out on challenging journeys towards rehabilitation and future independence. As a result, I found it difficult to ignore the fact that current law is working to further complicate anyone's path to becoming more self-reliant and independent.

Mr. Speaker, I would like to take this time to share the personal narrative of Rana McMurray Arnold, co-founder and director of the Sight-Loss Support Group of Central Pennsylvania and a constituent of mine. As an individual who is living with blindness, Rana helped form a remarkable non-profit to assist others with sight loss by providing peer counseling, vision rehabilitation referral services, and direct accessibility support for local events. Despite challenges she has been faced with, Rana has led a very fulfilling and successful life, running a successful service organization for 30 years and raising a family. However, under the current law, Rana would be deemed unfit to establish her own special needs trust.

It is on Rana's behalf and on behalf of the millions of Americans living with disabilities that I introduced H.R. 670, and I am grateful for its consideration this afternoon on the House floor.

I would also like to thank another constituent of mine, Amos Goodall, who has worked as an elder law attorney in State College, Pennsylvania. Mr. Goodall originally brought this issue to my attention and has been a tireless advocate for this bill. I would also like to thank Katie Brown of my staff, whose work on this bill has gotten us to this point today.

Mr. Speaker, I urge my colleagues to join me in seizing this opportunity to

correct a legal inequity and safeguard the rights of Americans living with disabilities to secure their own future financial stability.

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

Mr. Speaker, I strongly support this bipartisan legislation, H.R. 670, the Special Needs Trust Fairness and Medicaid Improvement Act. This legislation, which I have championed for multiple Congresses with my Republican colleague, Representative GLENN THOMPSON, would allow individuals with disabilities to set up special needs trusts for themselves without a court petition.

I thank Representative THOMPSON of Pennsylvania for his continued leadership on this issue.

A special needs trust is a special kind of trust that is designed to provide support for certain expenses for disabled individuals to supplement Medicaid benefits. Currently, these types of trusts generally must be established by parents, grandparents, legal guardians, or a court on behalf of the disabled individual. People can only set up a special needs trust for themselves after petitioning a court. Oftentimes, this process can take several months and can incur significant legal fees during the process.

This is just not right. Individuals with disabilities can and should have the ability to set up a special needs trust for themselves, and this legislation fixes that basic inequity. This is a commonsense but very meaningful fix in the lives of those living with a disability.

I would like to also note that H.R. 670 was amended in the Energy and Commerce Committee by adding an additional provision to require States to extend tobacco cessation coverage to pregnant women through the first year postpartum. This is also good policy. Tobacco cessation is absolutely critical to both saving dollars and saving lives, and particularly so for pregnant and postpartum women.

When we invest in helping people to quit smoking, the benefit is not only clear to the health of our communities, but also to our economy. My own home State of New Jersey is currently piloting a project in our Medicaid program specifically aimed at cutting costs and improving birth outcomes through targeted, evidence-based efforts to help pregnant women to quit smoking.

In addition, these policies are fully offset by clarifying that the Federal match for hair growth and cosmetic products is available when those products are medically necessary, which is the current policy of most States already. The remaining savings are put in a Medicaid improvement fund as a downpayment on more positive improvements to the Medicaid program in the future.

So I am very proud, Mr. Speaker, that we were able to work together on these policies. This is an example of the type of work that we should do

more often in the Medicaid program: working together to pass policies that remove barriers for beneficiaries, strengthen benefits, and support the long-term health of the program overall.

Mr. Speaker, I urge my colleagues to support H.R. 670. I hope that the Senate will consider this new version so it can swiftly become law.

Mr. Speaker, I yield back the balance of my time.

Mr. GUTHRIE. Mr. Speaker, I just want to commend my friend from Pennsylvania who has spent so much effort on this. We had testimony in the Energy and Commerce Committee, families coming before us who were in situations that are difficult and gives them the opportunity to provide for their loved one, the original intent of the bill. This one allows the individual himself or herself to set up and provide. I think that is the right thing to do. I encourage my colleagues to vote for this bill.

Mr. Speaker, I yield back the balance of my time.

The SPEAKER pro tempore. The question is on the motion offered by the gentleman from Kentucky (Mr. GUTHRIE) that the House suspend the rules and pass the bill, H.R. 670, as amended.

The question was taken.

The SPEAKER pro tempore. In the opinion of the Chair, two-thirds being in the affirmative, the yeas have it.

Mr. HUELSKAMP. Mr. Speaker, on that I demand the yeas and nays.

The yeas and nays were ordered.

The SPEAKER pro tempore. Pursuant to clause 8 of rule XX, further proceedings on this motion will be postponed.

SUPPORTING YOUTH OPPORTUNITY AND PREVENTING DELINQUENCY ACT OF 2016

Mr. CURBELO of Florida. Mr. Speaker, I move to suspend the rules and pass the bill (H.R. 5963) to reauthorize and improve the Juvenile Justice and Delinquency Prevention Act of 1974, and for other purposes, as amended.

The Clerk read the title of the bill.

The text of the bill is as follows:

H.R. 5963

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 “Supporting Youth Opportunity and Preventing Delinquency Act of 2016”.

SEC. 2. TABLE OF CONTENTS.

The table of contents for this Act is as follows:

Sec. 1. Short title.

Sec. 2. Table of contents.

TITLE I—DECLARATION OF FINDINGS, PURPOSE, AND DEFINITIONS

Sec. 101. Findings.

Sec. 102. Purposes.

Sec. 103. Definitions.

TITLE II—JUVENILE JUSTICE AND DELINQUENCY PREVENTION

Sec. 201. Concentration of Federal efforts.

Sec. 202. Coordinating Council on Juvenile Justice and Delinquency Prevention.

Sec. 203. Annual report.

Sec. 204. Allocation of funds.

Sec. 205. State plans.

Sec. 206. Repeal of juvenile delinquency prevention block grant program.

Sec. 207. Research and evaluation; statistical analyses; information dissemination.

Sec. 208. Training and technical assistance.

Sec. 209. Authorization of appropriations.

Sec. 210. Administrative authority.

TITLE III—INCENTIVE GRANTS FOR LOCAL DELINQUENCY PREVENTION PROGRAMS

Sec. 301. Short Title.

Sec. 302. Definitions.

Sec. 303. Duties and functions of the administrator.

Sec. 304. Grants for delinquency prevention programs.

Sec. 305. Grants for tribal delinquency prevention and response programs.

Sec. 306. Authorization of appropriations.

Sec. 307. Technical amendment.

TITLE IV—MISCELLANEOUS PROVISIONS

Sec. 401. Evaluation by Government Accountability Office.

Sec. 402. Accountability and oversight.

TITLE I—DECLARATION OF FINDINGS, PURPOSE, AND DEFINITIONS

SEC. 101. FINDINGS.

Section 101(a)(9) of the Juvenile Justice and Delinquency Prevention Act of 1974 (42 U.S.C. 5601(a)(9)) is amended by inserting “, including offenders who enter the juvenile justice system as the result of sexual abuse, exploitation, and trauma,” after “young juvenile offenders”.

SEC. 102. PURPOSES.

Section 102 of the Juvenile Justice and Delinquency Prevention Act of 1974 (42 U.S.C. 5602) is amended—

(1) in paragraph (1), by inserting “, tribal,” after “State”;

(2) in paragraph (2)—

(A) by inserting “, tribal,” after “State”; and

(B) by striking “and” at the end;

(3) by amending paragraph (3) to read as follows:

“(3) to assist State, tribal, and local governments in addressing juvenile crime through the provision of technical assistance, research, training, evaluation, and the dissemination of current and relevant information on effective and evidence-based programs and practices for combating juvenile delinquency; and”;

(4) by adding at the end the following:

“(4) to support a continuum of evidence-based or promising programs (including delinquency prevention, intervention, mental health, behavioral health and substance abuse treatment, family services, and services for children exposed to violence) that are trauma informed, reflect the science of adolescent development, and are designed to meet the needs of at-risk youth and youth who come into contact with the justice system.”.

SEC. 103. DEFINITIONS.

Section 103 of the Juvenile Justice and Delinquency Prevention Act of 1974 (42 U.S.C. 5603) is amended—

(1) in paragraph (8)—

(A) in subparagraph (B)(ii), by adding “or” at the end;

(B) by striking subparagraph (C); and

(C) by redesignating subparagraph (D) as subparagraph (C);

(2) in paragraph (18) by adding at the end the following:

“that has a law enforcement function, as determined by the Secretary of the Interior in consultation with the Attorney General;”.

(3) by amending paragraph (22) to read as follows:

“(22) the term ‘jail or lockup for adults’ means a secure facility that is used by a State, unit of local government, or law enforcement authority to detain or confine adult inmates;”;

(4) by amending paragraph (25) to read as follows:

“(25) the term ‘sight or sound contact’ means any physical, clear visual, or verbal contact that is not brief and inadvertent;”;

(5) by amending paragraph (26) to read as follows:

“(26) the term ‘adult inmate’—

“(A) means an individual who—

“(i) has reached the age of full criminal responsibility under applicable State law; and

“(ii) has been arrested and is in custody for or awaiting trial on a criminal charge, or is convicted of a criminal offense; and

“(B) does not include an individual who—

“(i) at the time of the time of the offense, was younger than the maximum age at which a youth can be held in a juvenile facility under applicable State law; and

“(ii) was committed to the care and custody or supervision, including post-placement or parole supervision, of a juvenile correctional agency by a court of competent jurisdiction or by operation of applicable State law;”;

(6) in paragraph (28), by striking “and” at the end;

(7) in paragraph (29), by striking the period at the end and inserting a semicolon; and

(8) by adding at the end the following:

“(30) the term ‘core requirements’—

“(A) means the requirements described in paragraphs (11), (12), (13), and (15) of section 223(a); and

“(B) does not include the data collection requirements described in subparagraphs (A) through (K) of section 207(1);

“(31) the term ‘chemical agent’ means a spray or injection used to temporarily incapacitate a person, including oleoresin capicum spray, tear gas, and 2-chlorobenzalmalononitrile gas;

“(32) the term ‘isolation’—

“(A) means any instance in which a youth is confined alone for more than 10 minutes in a room or cell; and

“(B) does not include—

“(i) confinement during regularly scheduled sleeping hours;

“(ii) separation based on a treatment program approved by a licensed medical or mental health professional;

“(iii) confinement or separation that is requested by the youth; or

“(iv) the separation of the youth from a group in a nonlocked setting for the limited purpose of calming;

“(33) the term ‘restraints’ has the meaning given that term in section 591 of the Public Health Service Act (42 U.S.C. 290ii);

“(34) the term ‘evidence-based’ means a program or practice that—

“(A) is demonstrated to be effective when implemented with fidelity;

“(B) is based on a clearly articulated and empirically supported theory;

“(C) has measurable outcomes relevant to juvenile justice, including a detailed description of the outcomes produced in a particular population, whether urban or rural; and

“(D) has been scientifically tested and proven effective through randomized control studies or comparison group studies and with the ability to replicate and scale;

“(35) the term ‘promising’ means a program or practice that—

“(A) is demonstrated to be effective based on positive outcomes relevant to juvenile justice from 1 or more objective, independent, and scientifically valid evaluations,