

record show that this woman deserves recognition for the incredible career she has made for herself, and the way her life has touched others.

**TESTIMONY OF ALEXIS DECECCHI
ON THE POSITIVE IMPACT OF
THE AFFORDABLE CARE ACT**

HON. ROSA L. DeLAURO

OF CONNECTICUT

IN THE HOUSE OF REPRESENTATIVES

Monday, March 20, 2017

Ms. DELAUBRO. Mr. Speaker, it is with great pride that I enter the powerful words of my constituent, Alexis Dececcchi, who supports the Affordable Care Act and the protections it provides our most vulnerable citizens.

“Hi, my name is Alexis Dececcchi. I want to thank Congresswoman DeLauro for taking the time out of her busy schedule to gather us here so we can tell our stories about the ACA. I would not be standing here today if it weren’t for the ACA. I think everyone who has developed a major health problem remembers ‘that day’—the day everything changed. For me, that day was December 28th, 2012. I refer to this as my second birthday.

During the night of the 28th, my body mounted an inflammatory autoimmune attack against my nervous system, causing me to suffer brain damage. When I awoke, portions of my memory, processing, and visual system had been compromised. Months of fearful confusion followed until the cause was discovered: I had a cellular immuno-deficiency affecting my natural killer cells. This caused me to be more susceptible to viral and fungal infections. This susceptibility also caused autoimmune inflammation in my nervous system and brain.

Without the protection of the ACA, I would be defined as having a pre-existing condition, and be subject to expensive, high-risk insurance pools, or potentially be uninsured. Without insurance, I would be unable to afford the experimental antivirals and the bi-weekly infusions of immunoglobulin that I need, which currently cost over \$8000 every month. A reinstatement of lifetime policy caps would also endanger my access to this treatment.

Since receiving my infusions, I have seen improvements in my condition. I have fewer seizures and cognitive issues, and I’ve regained some of my physical strength. This year, I was finally able to return to the workforce and hold down a part-time job. None of this would be possible for me without the ACA. Though I have improved, there is no cure for my condition, and I will require these treatments indefinitely. Without them, I would start to backslide physically and develop dementia-like symptoms.

The chronic illness and disability community is one of the country’s biggest minority groups, but one of the most overlooked. Because of the nature of our disabilities, it has been hard for us to organize, especially if each day is a fight for survival. We should have the equal rights and protections of other minority groups in this country. Right now, our current administration is fighting over policies and ideals, but what we are fighting for is survival. That is a very different type of struggle and one that we cannot afford to lose. The ACA was a step in the right direction for millions of Americans. We can’t take a step back. I want to continue to move forward in my life, and I want to do the same for other chronically ill individuals. We need to stand together, and stand

with, our representatives who understand that healthcare is a right, not a privilege.”

**THE COLUMBIA RIVER IN-LIEU
AND TREATY FISHING ACCESS
SITES IMPROVEMENT ACT**

HON. EARL BLUMENAUER

OF OREGON

IN THE HOUSE OF REPRESENTATIVES

Monday, March 20, 2017

Mr. BLUMENAUER. Mr. Speaker, today, I am reintroducing the Columbia River In-Lieu and Treaty Fishing Access Sites Improvement Act. For decades now, the federal government has forgone its obligations to the four Columbia River Treaty Tribes, after flooding tribal communities, houses, and traditional hunting and fishing sites with the construction of the Bonneville, The Dalles, and John Day dams.

This bill is just part of the work we are pursuing to improve the living conditions at these sites along the Columbia River. This issue deserves significant attention and investment from the federal government. The history of the 31 Columbia River In-Lieu and Treaty Fishing Access Sites dates back decades. Development that began in the 1930s displaced many members of the four Columbia River treaty tribes: the Warm Springs, Umatilla, Nez Perce, and Yakama Nation. Those tribes have a treaty-protected right to fish along the river at their usual and accustomed places that needs to be respected.

The tribes were also promised housing to replace what was inundated after the dams became operational and that promise has largely not been kept. I’m working with my colleagues and the U.S. Army Corps of Engineers (Corps), the Bureau of Indian Affairs (BIA), the Columbia River Inter-Tribal Fish Commission, and the effected tribes to address these unmet needs through the appropriations process and other legislation.

To address fishing access that was wiped out by the dams, the Corps constructed 31 small sites along the Columbia, designed primarily for daily, in-season fishing access and temporary camping. However, largely due to the lack of promised permanent housing and out of a desire to be closer to the Columbia River, their cultural heritage, and traditional fishing areas, many tribal members live in makeshift housing or shelters at these sites. Because they were not designed for longer-term or permanent use, the conditions at these sites are deeply distressing and unsafe, without proper electricity, sewers, or water. I have seen these conditions firsthand on multiple visits, and they have garnered attention from local and national media. The sites are in dire need of urgent upgrades to electrical, sewer, and other infrastructure, beyond their daily operations and maintenance needs.

This legislation calls for BIA to conduct a much-needed assessment of current conditions at the In-Lieu and Treaty Fishing Access sites under BIA ownership on both sides of the Columbia, in coordination with the tribes. It authorizes the BIA to improve existing federal structures and infrastructure, improve sanitation and safety conditions, and improve access to electricity, sewer, and water infrastructure. BIA may contract with tribes and tribal organizations to conduct this important work that will lay a critical foundation for the construction of permanent tribal housing.

This is a significant and meaningful step in improving the living conditions at these sites and should be passed by the House and Senate. Our efforts will not stop here. I will continue working with federal partners and tribal nations to see that the need for more permanent housing is fulfilled and tribal member’s treaty rights are respected.

**TRIBUTE TO THE BROOKLYN
CHINESE-AMERICAN ASSOCIATION**

HON. NYDIA M. VELÁZQUEZ

OF NEW YORK

IN THE HOUSE OF REPRESENTATIVES

Monday, March 20, 2017

Ms. VELÁZQUEZ. Mr. Speaker, I rise to congratulate the Brooklyn Chinese-American Association (BCA) as they celebrate the twelfth anniversary of their Sixth Avenue Senior Center.

The Sixth Avenue Center is one of nine locations throughout Brooklyn dedicated to the wellbeing and livelihood of seniors and the people who care about them.

After securing funding from The Aging in New York Fund (DFTA) in 2012, the Center now serves over 200 seniors every day. Whether providing hearty meals, medical screenings, or recreational events like birthday parties and field trips, the Center is an invaluable part of the greater community of Sixth Avenue in Brooklyn.

In the face of uncertain times and proposed budget cuts, creating and maintaining a warm and welcoming space for seniors is a testament to the hard work of the BCA staff. Their presence in the community helps some of our most vulnerable neighbors and makes Brooklyn and all of New York a better place to live.

Mr. Speaker, I thank the staff and all those involved with the Sixth Avenue Senior Center for their dedication to the seniors of Brooklyn. I ask my colleagues to join me in congratulating them on 12 years of service.

**TESTIMONY OF DOMENIQUE
THORNTON ON THE POSITIVE IM-
PACT OF THE AFFORDABLE
CARE ACT**

HON. ROSA L. DeLAURO

OF CONNECTICUT

IN THE HOUSE OF REPRESENTATIVES

Monday, March 20, 2017

Ms. DELAUBRO. Mr. Speaker, it is with great pride that I enter the powerful words of my constituent, Dominique Thornton, who supports the Affordable Care Act and the protections it provides our most vulnerable citizens.

“Thank you Congresswoman DeLauro for giving us this opportunity to tell you how essential the Affordable Care Act is in our lives and what a difference it has made for us not to be denied insurance coverage because of preexisting conditions. First of all I want to remind everyone that the full name of the law is the Patient Protection and Affordable Care Act. One of the most important protections it affords us is the protection not to be denied health insurance coverage due to preexisting conditions. Why would Members of Congress who represent the people of their districts ever seek to repeal patient protections?

I speak today as a mother of an adult daughter who wanted to be here personally to tell her story but could not be and gave me her permission to share her story. I have been an advocate for mental health for the last 10 years because I found out that my daughter suffers from PTSD, chronic anxiety and depression as well as other psychological conditions as a result of sexual assault and physical abuse. One in five women experience sexual assault in this country. One in four has experienced domestic violence. Incredibly being the victim of sexual assault or domestic violence and the resulting psychological disorders are considered preexisting conditions by insurance companies for which they will deny coverage and consequently needed treatment. If a woman is brave enough to report the trauma, she will be denied coverage and treatment for it the next time she changes insurance if the Patient Protection and Affordable Care Act is repealed. If a woman is struggling in the aftermath of trauma and seeks treatment she will be penalized by being denied coverage for the conditions she suffers as a result of trauma the next time she changes policies if the ACA is repealed. Her diagnosis will be a part of her permanent health record which insurance companies will use to determine what they will cover and what preexisting conditions will be denied.

Another patient protection that specifically protects women and which will also be eliminated if the ACA is repealed is equal cost for men and women. If the ACA is repealed insurance companies will again be able to charge women more money for the same coverage as policies sold to men. It is discriminatory that women earn only 80% of what men earn at most but it is worse that they will also be charged higher premiums than men for the same coverage through no fault of their own except the immutable characteristic that they were born female.

Women are thus pushed farther and farther into poverty and their only choice is to access the public health system in Medicaid. With State dollars stretched thin and the federal government considering further cuts to Medicaid women's health will be further adversely disproportionately impacted. The wealthy insurance companies who would be required to cover women regardless of preexisting conditions at the same cost will be off the hook and the taxpayers will have to cover the cost of care through our tax dollars. If we the taxpayers are already paying to care for the sick, why don't we have a public option and use the leverage of large numbers. There are 24 million people now covered by the ACA today which can negotiate the cost of health care and prescription drugs down to a more affordable cost. The answers are there to bring the costs of health care down. Will Congress have

the courage to stand up for what is right and seek solutions that are fair and equitable for the American people? Do not repeal the Patient Protection and Affordable Care Act. Make changes for the better such as using the buying power of large numbers to reduce costs."

SENATE COMMITTEE MEETINGS

Title IV of Senate Resolution 4, agreed to by the Senate of February 4, 1977, calls for establishment of a system for a computerized schedule of all meetings and hearings of Senate committees, subcommittees, joint committees, and committees of conference. This title requires all such committees to notify the Office of the Senate Daily Digest—designated by the Rules Committee—of the time, place and purpose of the meetings, when scheduled and any cancellations or changes in the meetings as they occur.

As an additional procedure along with the computerization of this information, the Office of the Senate Daily Digest will prepare this information for printing in the Extensions of Remarks section of the CONGRESSIONAL RECORD on Monday and Wednesday of each week.

Meetings scheduled for Tuesday, March 21, 2017 may be found in the Daily Digest of today's RECORD.

MEETINGS SCHEDULED

MARCH 22

9 a.m.

Committee on Health, Education, Labor, and Pensions
To hold hearings to examine the nomination of R. Alexander Acosta, of Florida, to be Secretary of Labor.

SD-430

10 a.m.

Committee on Commerce, Science, and Transportation
To hold hearings to examine the promises and perils of emerging technologies for cybersecurity.

SD-106

Committee on Foreign Relations
To hold hearings to examine the state of global humanitarian affairs.

SD-419

Committee on Homeland Security and Governmental Affairs
To hold hearings to examine perspectives from the DHS frontline, focusing on evaluating staffing resources and requirements.

SD-342

Committee on Veterans' Affairs
To hold a joint hearing with the House Committee on Veterans' Affairs to ex-

amine the legislative presentation of multiple veterans service organizations.

SD-G50

10:30 a.m.

Committee on Appropriations

Subcommittee on Department of Defense

To hold hearings to examine defense readiness and budget update.

SD-192

2:30 p.m.

Committee on Commerce, Science, and Transportation

Subcommittee on Oceans, Atmosphere, Fisheries, and Coast Guard

To hold hearings to examine the state of the Coast Guard, focusing on ensuring military, national security, and enforcement capability and readiness.

SR-253

Committee on Foreign Relations

Subcommittee on Africa and Global Health Policy

To hold hearings to examine a progress report on conflict minerals.

SD-419

3:30 p.m.

Committee on Armed Services

Subcommittee on Airland

To hold hearings to examine Army modernization.

SR-222

MARCH 23

9:30 a.m.

Committee on Armed Services

To hold hearings to examine United States European Command.

SD-G50

Committee on Banking, Housing, and Urban Affairs

To hold hearings to examine the nomination of Jay Clayton, of New York, to be a Member of the Securities and Exchange Commission.

SD-538

2:30 p.m.

Committee on Armed Services

Subcommittee on Personnel

To hold hearings to examine Department of Defense civilian personnel reform.

SR-232A

MARCH 29

2:30 p.m.

Committee on Homeland Security and Governmental Affairs

Subcommittee on Federal Spending Oversight and Emergency Management

To hold hearings to examine the effect of borrowing on Federal spending.

SD-342

3 p.m.

Committee on Small Business and Entrepreneurship

To hold hearings to examine how small businesses confront and shape regulations.

SR-428A