

and every minute after, the equivalent of an entire garbage truck full of plastic will be dumped into the oceans. That is about 8 million metric tons a year, endangering marine life.

Today is World Oceans Day, a good time to recommit to protect, conserve, maintain, and rebuild our oceans and our ocean resources.

The health of our oceans reflects the health of our planet. We have work to do. Oceans absorb CO₂ produced by human activities, and increasing carbon emissions are stressing the oceans and threatening the livelihood of coastal communities.

As oceans become more acidic, shellfish struggle to build shells. Oysters and clams are especially vulnerable. Harmful algal blooms produce acid that accumulates in shellfish, like Dungeness crab, and can be poisonous to humans.

We must invest in research to better understand the challenges to ocean health, like ocean acidification, harmful algal blooms, marine debris, and overfishing.

The ocean is resilient, but we cannot afford to wait. On World Oceans Day, I invite all of my colleagues to join the bipartisan Oceans Caucus. The time to take action is now.

HONORING ISRAEL'S 70TH ANNIVERSARY OF INDEPENDENCE

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

Mr. PALMER. Mr. Speaker, I rise today in honor of Israel's 70th anniversary of independence. The United States has no stronger ally in the Middle East than the State of Israel.

Our relationship is one rooted in shared values and a commitment to freedom and democracy. Israel's dedication to political and economic freedom, free and fair elections, and freedom of religion provides a stark contrast with other regimes in the region.

On this anniversary, I also want to recognize the important relationship between Israel and the State of Alabama.

Few people know that 5 years prior to Israel gaining independence, Alabama became the first and perhaps only State to call for the establishment of a Jewish state.

Seventy-five years ago, on June 10, 1943, in the midst of World War II, the Alabama legislature unanimously passed a joint resolution calling for a Jewish state, and for the Jewish people to have the right to self-government and self-determination.

Since that day, in acknowledgment and support of our mutual values, Alabama and Israel have maintained a special friendship. Indeed, Alabama and the United States are proud to call Israel our ally, and look forward to our continued support of Israel and our continued friendship.

□ 0915

LET'S WORK TOGETHER TO HELP AMERICAN FAMILIES HAVE HEALTHCARE

(Mr. KILMER asked and was given permission to address the House for 1 minute.)

Mr. KILMER. Mr. Speaker, first, do no harm. That is rule number one for every doctor, and it should be rule number one for this President and this Congress as well. But because of the harmful, partisan healthcare politics in Washington, D.C., next year, a quarter million people in Washington State will have to spend 19 percent more per month on their health insurance.

That adds up for a lot of folks. It will add up to the difference between being able to afford healthcare or not. Families in Washington State will have less money in their pockets because of the choices to do harm by this Congress and this administration.

It is a choice to cut, as this administration did, the Federal payments that make healthcare cheaper for families. It is a choice to obsessively try to dismantle the Affordable Care Act, as this House and this administration have done, creating uncertainty and driving up costs.

Listen, the Affordable Care Act was not perfect, but it meant cheaper healthcare and more people with insurance. Let's fix it rather than harm people.

Rather than partisan attacks that do harm to the healthcare system and harm to family budgets, let's first do no harm, and then let's work together to actually help American families have healthcare.

JUNE 11 WILL BE THE FIRST DAY WITHOUT NET NEUTRALITY PROTECTIONS

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

Ms. ESHOO. Mr. Speaker, Monday, June 11, will be the first day without net neutrality protections, thanks to the Trump administration.

For the last decade and a half, the internet has become the biggest driver of our economy, of education, access to information, and the conduct of commerce. It all happened under net neutrality, because each of us had the freedom to go where we wanted to go, see what we wanted to see, and read what we wanted to read.

On Monday, the rules to protect an open internet will cease to exist. Consumers will no longer be guaranteed that they can choose to go where they want to go or do what they want to do online. Businesses can be made to pay tolls to reach their customers. The huge internet service providers can reign with impunity over the most important tool in our economy and our democracy.

Over all the years I have represented my Silicon Valley district, I have

never had a constituent or a company ask me to turn total control of the internet over to the ISPs.

Congress can act to prevent this takeover. That is why I am a cosponsor of the Congressional Review Act, a bill to disable the administration's giveaway of the internet. Mr. Chair, I urge my colleagues to stand on the right side of history with millions of Americans and do the same.

ENERGY AND WATER DEVELOPMENT AND RELATED AGENCIES APPROPRIATIONS ACT, 2019

GENERAL LEAVE

Mr. CARTER of Texas. Mr. Speaker, I ask unanimous consent that all Members have 5 legislative days in which to revise and extend their remarks and include extraneous material in the further consideration of H.R. 5895, and that I may include tabular material on the same.

The SPEAKER pro tempore (Mr. NEWHOUSE). Is there objection to the request of the gentleman from Texas?

There was no objection.

The SPEAKER pro tempore. Pursuant to House Resolution 923 and rule XVIII, the Chair declares the House in the Committee of the Whole on the state of the Union for the further consideration of the bill, H.R. 5895.

Will the gentleman from Kansas (Mr. MARSHALL) kindly take the chair.

□ 0919

IN THE COMMITTEE OF THE WHOLE

Accordingly, the House resolved itself into the Committee of the Whole House on the state of the Union for the further consideration of the bill (H.R. 5895) making appropriations for energy and water development and related agencies for the fiscal year ending September 30, 2019, and for other purposes, with Mr. MARSHALL (Acting Chair) in the chair.

The Clerk read the title of the bill.

The Acting CHAIR. When the Committee of the Whole rose on Thursday, June 7, 2018, amendment No. 27 printed in part B of House Report 115-712 offered by the gentleman from Kentucky (Mr. BARR) had been disposed of.

AMENDMENT NO. 28 OFFERED BY MR. CARBAJAL. The Acting CHAIR. It is now in order to consider amendment No. 28 printed in part B of House Report 115-712.

Mr. CARBAJAL. Mr. Chairman, I have an amendment at the desk.

The Acting CHAIR. The Clerk will designate the amendment.

The text of the amendment is as follows:

Page 131, line 7, after the dollar amount, insert "(increased by \$8,000,000)".

Page 132, line 10, after the dollar amount, insert "(reduced by \$8,000,000)".

The Acting CHAIR. Pursuant to House Resolution 923, the gentleman from California (Mr. CARBAJAL) and a Member opposed each will control 5 minutes.

The Chair recognizes the gentleman from California.

Mr. CARBAJAL. Mr. Chairman, my amendment seeks to provide additional funding for the Veterans Transportation Program, which would provide additional resources for the Highly Rural Transportation Grants, Beneficiary Travel, and Veterans Transportation Service.

A major challenge facing veterans across the Nation, including the central coast of California, is the lack of access to transportation when trying to get their medical appointments. This is especially prevalent in districts like mine, where veterans don't live in close proximity to a major VA medical center.

Available local transportation to health appointments at the local community-based outpatient clinic is a constant challenge, as there are an insufficient number of buses and drivers. Currently, there is only one bus serving my district, and this one bus must make six stops before reaching the VA hospital in Los Angeles. Once there, veterans only have a short window of time to attend to all their appointments before needing to rush back to the bus to catch their transportation home.

In many cases, with these time constraints, veterans are unable to fit all of their necessary appointments into one day, and must again struggle with transportation to get back to the hospital.

Passage of this amendment would provide more transportation solutions for our veterans, allowing them to get to their medical appointments on time and receive proper medical care without the fear of being left behind, unable to get back home.

Mr. Chair, I urge my colleagues to support this amendment, and I reserve the balance of my time.

Mr. CARTER of Texas. Mr. Chairman, I claim the time in opposition to the amendment, even though I am not opposed to it.

The Acting CHAIR. Without objection, the gentleman from Texas is recognized for 5 minutes.

There was no objection.

Mr. CARTER of Texas. Mr. Chair, we understand the gentleman's concerns, and we certainly will keep them in mind during conference.

Mr. Chair, I yield such time as she may consume to the gentlewoman from Florida (Ms. WASSERMAN SCHULTZ).

Ms. WASSERMAN SCHULTZ. Mr. Chair, I thank the gentleman for yielding.

Mr. Chairman, in 2017, the VTP program transported a total of 557,331 veterans, of which 103,704 were disabled veterans.

The VTP office is the authoritative source for all veteran-related travel initiatives. Its core mission is to assist in the improvements of access to care and assist veterans in overcoming transportation barriers to accessing VHA services.

VTS has established a network of transportation options for veterans

through joint efforts with VA's Office of Rural Health and veterans service organizations.

This is a valuable program that has clearly been recognized and highlighted by the gentleman from California, that helps veterans who are visually impaired, elderly, or immobilized due to disease or disability, and particularly those living in remote and rural areas, to get to their medical appointments.

At a time with the VA where we are struggling to make sure both in terms of time that veterans have to wait to get an appointment and the difficulty in getting through a long distance to get that service, this is an important amendment.

Mr. Chair, I appreciate the gentleman from California's contribution and I strongly support it.

Mr. CARTER of Texas. Mr. Chair, I yield back the balance of my time.

Mr. CARBAJAL. Mr. Chair, I would just appeal to my colleagues that "thank you for your service" is just not enough anymore for our veterans. We need to step up. We need to make sure that they know we are here and we have their back when they need the services at the end of their tenure in the armed services.

Mr. Chair, this is an important amendment. I urge my colleagues to support it.

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

The Acting CHAIR. The question is on the amendment offered by the gentleman from California (Mr. CARBAJAL).

The amendment was agreed to.

AMENDMENT NO. 29 OFFERED BY MR. KEATING

The Acting CHAIR. It is now in order to consider amendment No. 29 printed in part B of House Report 115-712.

Mr. KEATING. Mr. Chairman, I have an amendment at the desk.

The Acting CHAIR. The Clerk will designate the amendment.

The text of the amendment is as follows:

Page 132, line 25, after the dollar amount, insert "(reduced by \$5,000,000) (increased by \$5,000,000)".

The Acting CHAIR. Pursuant to House Resolution 923, the gentleman from Massachusetts (Mr. KEATING) and a Member opposed each will control 5 minutes.

The Chair recognizes the gentleman from Massachusetts.

Mr. KEATING. Mr. Chairman, I rise today to offer an amendment that would direct the VA to establish an opioid abuse kit for community healthcare providers.

We are fortunate to live in a time when, because of medical advancements, members of the military are surviving combat injuries at unprecedented rates. However, our duty of care for military veterans does not stop there.

As our Nation welcomes home thousands of veterans from missions all over the world, we must be better pre-

pared to provide those who suffer from chronic pain with the help that they need. It is the responsibility of this Congress to do our part to ensure they are receiving the level of healthcare they deserve.

According to VA data, despite the number of opioid prescriptions at the VA declining—and that is the good news—since 2012, the number of veterans with opioid use disorders has spiked 55 percent between 2011 and 2016.

Additionally, the American Public Health Association found that veterans are twice as likely to overdose on prescription opioids as the general population.

The Veterans Health Administration has taken initial steps to combat the growing opioid crisis by rolling out its Opioid Safety Initiative for VA health settings, and the VA has also begun to publish toolkits for its community health providers so they better understand why veterans are looking to them for help.

My amendment provides the resources for the VA to take their efforts a step further. It would direct the VA to utilize the opioid safety resources already available at the VA and create a similar opioid toolkit for healthcare providers at civilian facilities who help veterans with opioid use disorders. This is even more important, Mr. Chairman, because of the establishment of the Veterans Choice Program.

The toolkit will provide safe prescribing practices provide additional resources for effective pain management, and it will ultimately save lives.

Mr. Chair, I urge my colleagues to join with me in support of this.

Mr. Chair, I yield 1 minute to the gentlewoman from Florida (Ms. WASSERMAN SCHULTZ).

Ms. WASSERMAN SCHULTZ. Mr. Chair, I thank the gentleman for yielding.

I support the efforts by the gentleman from Massachusetts to combat opioid abuse, which really has been a scourge in every region of this country and has left almost no region in this Nation untouched.

The rates of prescription opioid misuse and overdose continue to increase sharply, and prescription opioids are now a leading cause of death in the United States. In fact, Mr. Chairman, we are about to reach the third year in a row that life expectancy in the United States will have gone down. That is the first time that has happened since all the way back to World War I, and it can be directly attributed to opioid abuse and the resulting deaths that has caused.

So I agree with my friend from Massachusetts that the VA should have a toolkit similar to the mental health toolkit and that it could save lives. I support the amendment.

Mr. KEATING. Mr. Chair, I thank the gentlewoman for her comments, and I reserve the balance of my time.

Mr. CARTER of Texas. Mr. Chairman, I claim the time in opposition to

the amendment, even though I am not opposed to it.

The Acting CHAIR. Without objection, the gentleman is recognized for 5 minutes.

There was no objection.

Mr. CARTER of Texas. Mr. Chair, this bill includes \$387 million for opioid treatment and prevention efforts. We understand the gentleman's concern, and we will keep them in mind during conference.

May I say, having been a criminal trial judge for many years, dealing with prescription drug abuse and treating prescription drug abuse is one of the hardest things we have to deal with in criminal law. There is something about the mental attitude towards a prescription that causes people to think it is safe.

□ 0930

This abuse that is going on in this country, we have to do something about it, so I commend the gentleman.

I yield back the balance of my time.

Mr. KEATING. Mr. Chairman, I know the gentleman from Texas and I will work together on this going forward and, hopefully, this amendment will move us in that direction further.

I yield back the balance of my time.

The Acting CHAIR. The question is on the amendment offered by the gentleman from Massachusetts (Mr. KEATING).

The amendment was agreed to.

AMENDMENT NO. 30 OFFERED BY MR. KEATING

The Acting CHAIR. It is now in order to consider amendment No. 30 printed in part B of House Report 115-712.

Mr. KEATING. Mr. Chairman, I have an amendment at the desk.

The Acting CHAIR. The Clerk will designate the amendment.

The text of the amendment is as follows:

Page 132, line 25, after the dollar amount, insert "(reduced by \$1,500,000) (increased by \$1,500,000)".

The Acting CHAIR. Pursuant to House Resolution 923, the gentleman from Massachusetts (Mr. KEATING) and a Member opposed each will control 5 minutes.

The Chair recognizes the gentleman from Massachusetts.

Mr. KEATING. Mr. Chairman, I rise to offer an amendment that would direct healthcare providers with VA affiliation to continue their efforts at continuing education courses in specific areas to manage pain, opioids, and substance abuse disorders.

Nationally, about 30 percent of Americans have some form of chronic pain. However, the percentage of veterans who report chronic pain is significantly higher. Over 50 percent of elderly veterans report chronic pain, as do 60 percent of veterans returning from current conflicts. In fact, chronic pain is the most common medical problem experienced by returning combat veterans over the last decade.

Of course, pain is not a standalone problem. We are increasingly aware of

the mental health, the hidden wounds consequences stemming from time in combat. Veterans with post-traumatic stress disorder or brain trauma are more likely to report physical pain and, in turn, are more likely to receive a prescription for opioids. Likewise, approximately one out of every three veterans seeking treatment for a substance use disorder also have PTSD.

My amendment addresses this challenge by helping those who provide healthcare services to veterans to learn the latest pain management techniques, understand safe prescribing practices, and spot the signs of potential behavioral health conflicts and challenges, including substance abuse disorders.

Further, my amendment recognizes that VA healthcare providers already need continuing education credits to maintain their State-issued professional licenses. The amendment does not add to the total number of credits that prescribers already have to take. It simply makes sure that appropriate time is spent learning about this important issue.

My constituents are fortunate in Massachusetts because we have State laws that deal with this and require that kind of continuing education on this matter. However, in the other part of my district, in the southwestern portion, most of the veterans in that area go to the Rhode Island veterans center and, in Rhode Island, this is not covered by the State.

Healthcare professionals in Providence, Rhode Island, already have pain management education available, but there is no guarantee that they are taken. There is a recommendation, but no guarantee. My amendment simply makes sure that our veterans get that guarantee. I urge my colleagues to join in support of this amendment.

Ms. WASSERMAN SCHULTZ. Will the gentleman yield?

Mr. KEATING. I yield to the gentlewoman from Florida (Ms. WASSERMAN SCHULTZ).

Ms. WASSERMAN SCHULTZ. Mr. Chairman, pain management education for the prescription of opioids in the VA could help with opioid abuse; that is clear. The VA already has guidelines regarding the management of opioid therapy for chronic pain and provides clear and comprehensive, evidence-based recommendations incorporating current information and practices for practitioners throughout the DOD and the VA healthcare systems.

Mr. Chairman, these guidelines are provided to minimize harm and increase patient safety in patients who require opioid therapy, but these guidelines only work if the prescriber is adequately trained. And that is why the gentleman from Massachusetts' amendment would be so helpful, because we all know that the key to making sure that we can reach people and maximize the effectiveness of the program is to ensure that the appropriate and significant training is done

so that we can achieve those goals. So I support this amendment.

Mr. KEATING. Mr. Chairman, I reserve the balance of my time.

Mr. CARTER of Texas. Mr. Chairman, I claim the time in opposition, although I will not oppose this amendment.

The Acting CHAIR. Without objection, the gentleman is recognized for 5 minutes.

There was no objection.

Mr. CARTER of Texas. I understand the gentleman's concerns, and I will keep them in mind during conference.

I yield back the balance of my time.

Mr. KEATING. Mr. Chairman, it is another area where we can keep working together to help veterans, and this amendment will bring us forward in that task.

I yield back the balance of my time.

The Acting CHAIR. The question is on the amendment offered by the gentleman from Massachusetts (Mr. KEATING).

The amendment was agreed to.

AMENDMENT NO. 31 OFFERED BY MS. EDDIE BERNICE JOHNSON OF TEXAS

The Acting CHAIR. It is now in order to consider amendment No. 31 printed in part B of House Report 115-712.

Ms. EDDIE BERNICE JOHNSON of Texas. Mr. Chairman, I have an amendment at the desk.

The Acting CHAIR. The Clerk will designate the amendment.

The text of the amendment is as follows:

Page 135, line 12, after the dollar amount, insert "(reduced by \$1,000,000) (increased by \$1,000,000)".

The Acting CHAIR. Pursuant to House Resolution 923, the gentlewoman from Texas (Ms. EDDIE BERNICE JOHNSON) and a Member opposed each will control 5 minutes.

The Chair recognizes the gentlewoman from Texas.

Ms. EDDIE BERNICE JOHNSON of Texas. Mr. Chairman, I want to thank the ranking member for her help on this issue.

I appreciate the opportunity to speak about an issue that is very important to my constituents and, of course, to me. I began my career as a nurse, where I provided hands-on patient care for 15 years at the Dallas Veterans Administration Hospital. I actually opened the psychiatric service.

I rise today regarding an issue that is prevalent in my district and, more likely, is coming around the country: the Department of Veterans Affairs delaying, sometimes for years, payments for services that have been authorized by the VA and performed subject to their requirements.

Small business vendors depend on timely payments in order to pay for their services, pay their employees, and conduct business that they have agreed to perform for the price the VA has agreed to pay.

Veterans and their care are very important to me, and one thing I have noticed in my career, both at the VA and

here in Congress, is that it is important that getting the payment, whatever and wherever it is owed, and whether that is the veteran, a physician, or a contractor, is important.

I could talk about a number of things about the VA, but one of the things that is really hurting veterans is the delay of payment of vendors that render service.

The other week, one of the small vendors came into my office and said he was still waiting for payment from 2015. These vendors, for the most part, offer services to the veterans away from the hospital. It should not take that long for them to be paid.

It is ruining the home healthcare program because they cannot continue, year after year, to deliver this care without getting paid; and many of the small vendors have stopped servicing the veterans because they never see payment in sight. So that is a major issue which I came to speak about today.

Fee-basis care is preapproved by the VA, and the veteran, VA facility, and provider are all aware of the costs of the care being performed. There should not be a delay in delivering payment for essential services provided to the veteran.

Many of these small businesses have to file lawsuits and get attorneys to retrieve their money. Many of them have been put out of business and made up their mind they cannot service veterans because they cannot get paid in a timely manner. Two or 3 years late for payment is a long time for small businesses.

My concern is this slow-walking of claim payments is endemic throughout the VA, and veterans are being held responsible for the delay. Not all contractors are as savvy as my constituent and might not know what the next step should be to resolve these issues.

My amendment is designed to encourage the VA to report on the number of vendors who are being held hostage to slow payment around the country and how much money is being tied up in these delays. These small vendors cannot survive these long delays in getting paid.

We need to know how big the problem is and how we can figure out how to fix it.

Mr. Chairman, I reserve the balance of my time.

Ms. WASSERMAN SCHULTZ. Mr. Chairman, I claim the time in opposition, even though I am not opposed to the amendment.

The Acting CHAIR. Without objection, the gentlewoman from Florida is recognized for 5 minutes.

There was no objection.

Ms. WASSERMAN SCHULTZ. Mr. Chairman, the gentlewoman from Texas has identified a very important issue, one that was brought to my attention in sharp relief by my own hospital association just yesterday.

In Florida, we are now the third-largest State in the Union, and the hos-

pitals in my home State are owed at least \$134 million in payments that have not been paid by the VA.

I mean, I don't care how big your operation is, that is a tremendous amount of money, and prompt payment is a critical issue because we need to make sure that the resources that are appropriated to our healthcare system and the revenue that we need generated to contribute to our economy and the care that we need provided is done so promptly.

What we don't want to have happen is healthcare providers deciding not to provide services outside the VA to VA patients. And my discussion with them yesterday was that there are healthcare providers in our State that are starting to decide not to take VA patients anymore, and that would be a travesty.

The gentlewoman is absolutely correct. Waiting 2 or 3 years for payment—that is the kind of length of time we are talking about here—can have a devastating impact, particularly on small business.

It is not a new issue at the VA. For example, former Secretary David Shulkin started rapid response teams whose goal was to settle the most substantial outstanding bills as quickly as possible.

Mr. Chairman, the issue of prompt payments must be addressed as more veterans seek services outside of the VA. It is a tremendous problem, and I am really pleased that the gentlewoman has brought it to our attention, raised the issue, because we need to know the full scope of VA delinquent payments. So I support this amendment, and I yield back the balance of my time.

Ms. EDDIE BERNICE JOHNSON of Texas. Mr. Chairman, I really appreciate the comments of the ranking member, Ms. WASSERMAN SCHULTZ, and Chairman DENT agreeing to look into this issue.

I yield back the balance of my time.

The Acting CHAIR. The question is on the amendment offered by the gentlewoman from Texas (Ms. EDDIE BERNICE JOHNSON).

The amendment was agreed to.

AMENDMENT NO. 32 OFFERED BY MR. CONNOLLY
The Acting CHAIR. It is now in order to consider amendment No. 32 printed in part B of House Report 115-712.

Mr. CONNOLLY. Mr. Chairman, I have an amendment at the desk.

The Acting CHAIR. The Clerk will designate the amendment.

The text of the amendment is as follows:

Page 138, line 13, after the dollar amount, insert “(reduced by \$1,000,000) (increased by \$1,000,000)”.

The Acting CHAIR. Pursuant to House Resolution 923, the gentleman from Virginia (Mr. CONNOLLY) and a Member opposed each will control 5 minutes.

The Chair recognizes the gentleman from Virginia.

Mr. CONNOLLY. Mr. Chairman, I yield myself such time as I may consume.

Mr. Chairman, this simple amendment to H.R. 5895 would ensure sufficient funds for the Veterans Affairs Office of the Inspector General to provide rigorous oversight of the Washington, D.C., Veterans Affairs Medical Center, a center that has been plagued with management problems, many of which have been described in previous amendments here this morning.

The inspector general recently concluded a year-long investigation into the critical deficiencies at that center. In its final report, issued on March 7 of this year, the IG highlighted that leadership failures and pervasive understaffing underpinned widespread issues in inventory management, sterile processing, and patient safety itself. These are our veterans we are talking about.

The IG found continual mismanagement of protected information and significant government resources, putting them at risk for fraud, waste, and abuse. The report makes clear these failures have persisted for the better part of a decade. Entrenched problems like these will not be resolved overnight.

□ 0945

Following the final report's release, officials from the U.S. Department of Veterans Affairs briefed House Veterans Affairs' Committee staff that delays in patient care and supply shortages were no longer occurring as of January 2018.

Yet recent reports show, contrary to that, that seven procedures were canceled due to supply shortages in February and March of this year, contrary to the Department's own claims. The VA inspector general has played a vital role in covering that crisis at the D.C. VA Medical Center, and we must ensure that the VA IG has adequate resources to carry out its essential mandate.

The bill before us today meets the President's 2019 budget request of \$172 million. However, the VA inspector general, Michael Missal, recently wrote that \$172 million will not be sufficient for the IG to fully meet its mission of effective oversight of the programs and operations of the Veterans Administration.

Furthermore, the IG said that an FY19 appropriation of \$172 million would actually likely require a decrease of about 28 OIG staff. This could not be a worse time to have that happen, and I know the chairman and the ranking member share in that view.

Across the inspector general community, the IG staffing at the VA is among the smallest ratio of oversight staff to agency staff, and the OIG budget represents less than 0.1 percent of the total Veterans Administration budget.

This week, the Senate Appropriations Committee voted to fund the IG at a level of \$192 million for FY 2019, and I hope my colleagues will support that higher funding level when this bill gets to conference.

We have a sacred obligation to ensure that the men and women, who sacrificed so much to defend our freedom, receive the highest quality care they can possibly receive. The IG's yearlong investigation revealed that the D.C. VA Medical Center has, at times, fallen far below that standard. We owe it to our veterans not only to address these problems, but also to understand how they were allowed to arise in the first place.

Mr. Chair, I urge my colleagues to support this amendment to this bill and to ensure the highest quality for our veterans who fought for their country, and I reserve the balance of my time.

Ms. WASSERMAN SCHULTZ. Mr. Chair, I claim the time in opposition, even though I am not in opposition to the amendment.

The Acting CHAIR. Without objection, the gentlewoman from Florida is recognized for 5 minutes.

There was no objection.

Ms. WASSERMAN SCHULTZ. Mr. Chairman, you just can't make this stuff up. The committee members have been to the D.C. VA Medical Center, and they put on a nice show when I first became ranking member. They leave a good impression. But the documented issues at the D.C. VA Medical Center are well known, and I want to just walk our colleagues through a few of them because this is how egregious it is. The gentleman's suggestion through this amendment to make sure that the IG takes a very close look at what is going on at this medical center is critical.

The D.C. VA Medical Center was found to have paid exorbitant amounts for supplies and equipment, including \$300 per speculum, which could have been purchased for \$122 each, and \$900 each for a special needle that was available for \$250. In one case, the medical center rented in-home hospital beds for three patients for 3 years at a total cost of \$877,000. The medical center could have bought the three beds for \$21,000.

A review of 124 veteran patient records found problems with supplies or instruments in 74 of the cases between 2014 and 2017.

One surgery was canceled after the patient was already under anesthesia because a retractor was unavailable because it had not been sterilized since its previous use a week earlier.

A surgeon had to improvise when a tool used to prepare a skin graft was broken and the graft failed. A surgical staff member had to run to a private sector hospital across the street to borrow mesh to repair a hernia midprocedure.

Investigators received more than 1,300 boxes of unsecured records from two warehouses, the hospital basement, and a large trash dumpster in April 2017. Of those records, 81 percent contained confidential patient information, including medical scans and records dating back to the 1970s. This

facility is failing the veterans in the Metro D.C. area who deserve better.

This is an important amendment, and making sure that the VA takes care of its patients and is not negligent or derelict in its duties at every single place that those veterans are serviced is critical.

Mr. Chair, I reserve the balance of my time.

Mr. CONNOLLY. Mr. Chairman, I would conclude simply by thanking my friend from Florida for detailing that horror story. Unfortunately, these aren't isolated incidents. This is a pattern of shoddy care for our veterans at this center, and we need the IG to be doing his work over time to make sure that these deficiencies are corrected, and corrected as soon as possible. That is the intent of this amendment.

Again, I thank my friend from Texas, but I especially thank my good friend DEBBIE WASSERMAN SCHULTZ from Florida for their support on this amendment.

I include in the RECORD two letters from the Department of Veterans Affairs inspector general.

DEPARTMENT OF VETERANS AFFAIRS,
INSPECTOR GENERAL,
Washington DC, March 23, 2018.

Hon. PHIL ROE, M.D.,
Chairman, Committee on Veterans' Affairs,
House of Representatives, Washington, DC.

DEAR MR. CHAIRMAN: Enclosed is a response from the Office of Inspector General (OIG) to a question for the record received from Congressman Mike Bost following the February 15th hearing before the Committee on the U.S. Department of Veterans Affairs Budget Request for Fiscal Year 2019. We request that it be added to the hearing record.

Thank you for your interest in the OIG.

Sincerely,

MICHAEL J. MISSAL.

Enclosure.
OFFICE OF INSPECTOR GENERAL, DEPARTMENT OF VETERANS AFFAIRS RESPONSE TO QUESTIONS FOR THE RECORD FROM HOUSE COMMITTEE ON VETERANS' AFFAIRS HEARING ON U.S. DEPARTMENT OF VETERANS AFFAIRS BUDGET REQUEST FOR FISCAL YEAR 2019

65. The budget includes a request for \$172 million for the Office of Inspector General to strengthen accountability. Will this level of funding be sufficient to properly enforce accountability throughout the VA?

VA Office of Inspector General Response: The budget request for the Office of Inspector General (OIG) for fiscal year (FY) 2019 of \$172 million will not be sufficient for the OIG to fully meet its mission of effective oversight of the programs and operations of VA. While that amount would represent an increase over the OIG's funding of \$164 million for FY 2018, it falls short of even the OIG's actual FY 2018 operating budget of \$175.5 million (which includes \$15.9 million of carryover due to a late hiring cycle that was out of synch with the budget cycle).

There will not be a carryover of that size for FY 2019 as those funds will have been expended led primarily on new hires to conduct our oversight work. In addition, we are now funding our Office of Contract Review approximately \$5 million that was previously paid by VA through a reimbursable agreement, and there are other increased costs in FY 2019. Consequently, an FY 2019 appropriation of \$172 million would require a decrease of about 28 OIG staff. This would result in a likely curtailment of some of our oversight

priorities if OIG staffing and resources decrease at a time when VA is experiencing growth, including large and complex projects such as VA's new electronic health records initiative, improving VA's financial systems, enhancing and consolidating VA's IT systems, and expansion of community care programs. The OIG will need additional funds to not only conduct oversight of these costly programs, but also to expand our investigations of other high-risk VA programs, such as construction, procurement, education benefits, and the delivery of timely and quality healthcare. The VA OIG's staffing is among the smallest ratio of oversight staff to agency staff across the Inspector General community. Moreover, the OIG budget represents less than .1 percent of VA's overall budget, which again is less than a significant number of OIGs at other cabinet level agencies. An FY2019 appropriation of \$172 million will undermine progress achieved to "right size" the OIG oversight capacity to the growth and demands of VA's new initiatives.

DEPARTMENT OF VETERANS AFFAIRS,
INSPECTOR GENERAL,
Washington, DC, April 3 2018.

Hon. PATTY MURRAY,
U.S. Senate,
Washington, DC.

DEAR SENATOR MURRAY: Your question regarding the VA Office of Inspector General's (OIG) budget for fiscal year (FY) 2019 was referred to the OIG for a response. We appreciate your interest and are grateful for your support.

The budget request for the OIG FY 2019 of \$172 million will not be sufficient for the OIG to fully meet its mission of effective oversight of the programs and operations of VA. While that amount would represent an increase over the OIG's funding of \$164 million for FY 2018, it falls short of even the OIG's actual FY 2018 operating budget of \$179.9 million (which includes \$15.9 million of carryover due to a late hiring cycle that was out of synch with the budget cycle).

There will not be a carryover of that size for FY 2019 as those funds will have been expended primarily on new hires to conduct our oversight work. In addition, we are now funding our Office of Contract Review approximately \$5 million that was previously paid by VA through a reimbursable agreement, and there are other increased costs in FY 2019. Consequently, a FY 2019 appropriation of \$172 million would likely require a decrease of about 28 OIG staff. This would inevitably result in a curtailment of some of our oversight activities at a time when VA is experiencing growth, including large and complex projects such as VA's new electronic health records initiative, improving VA's financial systems, enhancing and consolidating VA's IT systems, and expansion of community care programs. The OIG will need additional funds to not only conduct oversight of these costly programs, but also to expand our investigations of other high-risk VA programs, such as construction, procurement, education benefits, and the delivery of timely and quality healthcare. The VA OIG's staffing is among the smallest ratio of oversight staff to agency staff across the Inspector General community. Moreover, the OIG budget represents less than .1 percent of VA's overall budget, which again is less than a significant number of OIGs at other cabinet level agencies. A FY 2019 appropriation of \$172 million will undermine progress achieved to "right size" the OIG oversight capacity to match the growth and demands of VA's new initiatives.

We will provide a copy of this letter to Chairman Isakson and request that it be made part of the hearing record.

Again, thank you for interest and support of the OIG.

Sincerely,

MICHAEL J. MISSAL.

Mr. CONNOLLY. Mr. Chair, I yield back the balance of my time.

Ms. WASSERMAN SCHULTZ. Mr. Chair, the gentleman deserves credit for bringing this to the House's attention. The outrage at this medical center speaks for itself, and I look forward to making sure that the IG has the resources that are needed to be able to get to the bottom to help fix this problem.

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

The Acting CHAIR. The question is on the amendment offered by the gentleman from Virginia (Mr. CONNOLLY).

The amendment was agreed to.

AMENDMENT NO. 33 OFFERED BY MS. JACKSON LEE

The Acting CHAIR. It is now in order to consider amendment No. 33 printed in part B of House Report 115-712.

Ms. JACKSON LEE. Mr. Chair, I have an amendment at the desk.

The Acting CHAIR. The Clerk will designate the amendment.

The text of the amendment is as follows:

At the end of division C (before the short title), insert the following:

SEC. ____ None of the funds made available by this Act may be used by the Secretary of Veterans Affairs in contravention of subchapter III of chapter 20 of title 38, United States Code.

The Acting CHAIR. Pursuant to House Resolution 923, the gentlewoman from Texas (Ms. JACKSON LEE) and a Member opposed each will control 5 minutes.

The Chair recognizes the gentlewoman from Texas.

Ms. JACKSON LEE. Mr. Chairman, my first order of business is to thank both Judge CARTER and Congresswoman WASSERMAN SCHULTZ for their leadership and, as well, for their shepherding this bill that is based and focused on help for our veterans.

This past month and coming into the Fourth of July and Veterans Day in November may be just one or two or three of the times that we acknowledge those who have fallen as well as our veterans, but it really is a responsibility of this country and this Congress to acknowledge and work on behalf of our veterans every single day.

I hold up a picture of and will include in the RECORD an article about Army Veteran Vivian Unce, Navy veteran Victoria Lewis, and Navy veteran Veronica Vernon. They met each other in a homeless shelter. They have come to know each other, and I would say to Mr. Chairman there are homeless veterans every night across this country.

[Wed., July 20, 2011]

MICHAEL E. DEBAKEY VA MEDICAL CENTER—HOUSTON, TEXAS GRANT PROVIDES MORE THAN \$666K FOR PERMANENT HOUSING FOR HOMELESS VETERANS

HOUSTON.—The Department of Veterans Affairs has announced the award of \$666,765 to the Harris County Housing Authority to

increase permanent housing and case management for area Veterans.

"This initiative will strengthen our ongoing efforts to eliminate Veteran homelessness and improve quality of life for Veterans," said Adam C. Walmus, M.H.A., M.A., F.A.C.H.E., director of the Michael E. DeBakey VA Medical Center. "Working with our partners at HUD, we continue to make good progress to reduce Veteran homelessness, though much work remains. VA is committed to providing Veterans and their families with access to affordable housing and medical services that will help them get back on their feet."

The funding, from Housing and Urban Development's Veterans Affairs Supportive Housing program (HUD-VASH), is a coordinated effort by HUD, VA, and local housing agencies to provide permanent housing for homeless Veterans.

Homeless Veterans are referred to the Harris County Housing Authority for "Housing Choice" Section 8 vouchers to assist with rent payment. With this latest grant, the Harris County Housing Authority will receive 125 additional housing vouchers.

Eligible homeless Veterans receive VA-provided case management, and services to support stability and recovery from physical and mental health, substance use, and functional concerns contributing to or resulting from homelessness.

Veterans participating in the HUD-VASH program rent privately owned housing and generally contribute no more than 30 percent of their income toward rent. VA offers eligible homeless Veterans clinical and supportive services through the Michael E. DeBakey VA Medical Center.

About one-third of the adult homeless population has served their country in the Armed Services.

Current population estimates suggest that about 107,000 Veterans (male and female) are homeless on any given night and perhaps twice as many experience homelessness at some point during the course of a year.

Many other Veterans are considered near homeless or at risk because of their poverty, lack of support from family and friends, and dismal living conditions in cheap hotels or in overcrowded or substandard housing.

If you know a Veteran who needs assistance, please call 1-877-4AID VET (877-424-3838) or the Health Care for Homeless Veterans Program at 713-794-7848. More information about VA's homeless programs is available online at <http://www.va.gov/homeless>.

Ms. JACKSON LEE. Mr. Chair, my amendment is an amendment to ensure that we will focus the VA on its obligation to provide our veterans the assistance needed to avoid homelessness. It will help to ensure the rate of homelessness among veterans in the United States does not increase, because I believe in reducing and eliminating homelessness among veterans. Those who risked their lives to protect our freedom should also be one of the Nation's highest priorities.

I am grateful that this particular legislation, likewise, recognizes the importance of dealing with homelessness and working with the VA and its public housing assistance. That is where these individuals were able to find housing, through the grant for the permanent housing for homeless veterans.

It is important to recognize that perhaps twice as many, 200,000, experience homelessness at some point during the course of the year. Today, in our coun-

try, there are approximately 107,000 veterans, male and female, who are homeless on any given night, even though communities are working very hard.

I know in my hometown of Houston, we work hard to reduce the numbers of homeless veterans. Many of us work with homeless veterans, attend what we call stand down, where we provide them with the maximum support on the street. We want them to get off the street, but we want to bring the services to them. In 2012 alone, 35,905 veterans lived in public housing provided by the VASH program.

So I want to continue this focus, and this amendment is to suggest that no matters in this bill, no language in this bill will be in contravention of our programs that deal with our homeless veterans.

Let me also make the point that Michael E. DeBakey VA Medical Center has been involved in changing lives in a mighty way by providing veterans and their families with access to affordable housing and medical services that would help to get them back on their feet.

I had the privilege of knowing Dr. Michael E. DeBakey and naming the hospital after him. His whole value and his whole purpose as he continued to do magical surgery was to remind us, as he created the MASH unit in World War II, that our veterans yesterday, today, and tomorrow should be our priority.

Mr. Chair, I ask my colleagues to support this amendment.

Mr. Chair, I have an amendment at the desk, it is Jackson Lee Amendment No. 33, which simply provides that:

"None of the funds made available by this Act for the Department of Veteran Affairs—Benefits for Homeless Veterans and Training and Outreach Programs may be used in contravention of the title 38, Part II, Chapter 20, Subchapter II and III of the U.S. Code.

This amendment will help ensure that the rate of homelessness among veterans in the United States does not increase.

I thank Subcommittee Chairman CALVERT and Ranking Member WASSERMAN SCHULTZ for their hard work in shepherding this important legislation to the floor.

I offer Jackson Lee Amendment No. 33 because I believe reducing and eliminating homelessness among veterans, those who risked their lives to protect our freedom, should also be one of the nation's highest priorities.

Homelessness among the American veteran population is on the rise in the United States and we must be proactive in giving back to those who have given so much to us.

Jackson Lee Amendment No. 33 will help focus the VA on its obligation to provide our veterans the assistance needed to avoid homelessness, which includes adequately funding for programs Veterans Administration Supportive Housing (VASH) that provide case-management services, adequate housing facilities, mental health support, and address other areas that contribute to veteran homelessness.

VASH is a jointly-administered permanent supportive housing program for disabled Veterans experiencing homelessness in which VA

medical Centers provide referrals and case management while Public Housing Agencies (PHAs) administer the Section 8 housing vouchers.

Mr. Chair, our veterans deserve the best services available, and I believe that we could be doing much more for them.

Today, in our country, there are approximately 107,000 veterans (male and female) who are homeless on any given night.

And perhaps twice as many (200,000) experience homelessness at some point during the course of a year.

Many other veterans are considered near homeless or at risk because of their poverty, lack of support from family and friends, and dismal living conditions in cheap hotels or in overcrowded or substandard housing.

While significant progress has been made, ending homelessness among veterans remains a big challenge.

In my hometown of Houston for example, between the years 2010 and 2017, the number of homeless veterans increased from 771 to 1,162.

We must remain vigilant and continue to fight for those who put on the uniform and fought for us.

Providing a home for veterans to come home to every night is the very least we can do.

Mr. Chair, programs like VASH have succeeded in changing lives.

In 2012 alone, 35,905 veterans lived in the public housing provided by VASH.

I have seen the impact of such grants in my home state of Texas, and within my congressional district in Houston, and I am sure that this funding has positively impacted many communities across this country.

In Texas, there are committed groups in Houston, working to eradicate the issue of homelessness.

For example, the Michael E. DeBaKey VA Medical Center has been involved in changing veterans' lives in a mighty way by providing Veterans and their families with access to affordable housing and medical services that will help them get back on their feet.

Mr. Chair, we cannot let this issue of homelessness continue.

I urge my colleagues to support Jackson Lee Amendment No. 33 and commit ourselves to the hard but necessary work of ending veteran homelessness in America.

Mr. Chair, I reserve the balance of my time.

Mr. CARTER of Texas. Mr. Chairman, I claim the time in opposition, although I don't intend to oppose this amendment.

The Acting CHAIR. Without objection, the gentleman is recognized for 5 minutes.

There was no objection.

Mr. CARTER of Texas. Mr. Chair, we understand and commend the gentlewoman's concern about safeguarding the homeless programs. Looking at what we have done, we have gotten in this bill \$7.4 billion in homeless veterans' treatment services, housing, and job training, and we certainly are going to keep in mind, when we go to conference, what the gentlewoman has presented us here today.

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

Ms. JACKSON LEE. Mr. Chairman, let me again express my appreciation.

As I indicated, there is a very solid and strong stand on this bill regarding providing for our homeless veterans. It is something that we contend with in our city of Houston, but we are grateful that the local officials are very concerned about it.

I want to make sure as we go to conference that our focus will continue to be on making sure that maybe in our lifetime we extinguish this concept of homeless veterans and homelessness among veterans by providing them with a pathway to opportunity and success.

So I ask my colleagues to support my amendment, and I yield back the balance of my time.

The Acting CHAIR. The question is on the amendment offered by the gentlewoman from Texas (Ms. JACKSON LEE).

The amendment was agreed to.

AMENDMENT NO. 34 OFFERED BY MS. JACKSON LEE

The Acting CHAIR. It is now in order to consider amendment No. 34 printed in part B of House Report 115-712.

Ms. JACKSON LEE. Mr. Chair, I have an amendment at the desk.

The Acting CHAIR. The Clerk will designate the amendment.

The text of the amendment is as follows:

At the end of division C (before the short title), insert the following:

SEC. ____ . The amounts otherwise provided by this Act are revised by reducing the amount made available for "Department of Veterans Affairs—Departmental Administration—Information Technology Systems" (and the amount specified under such heading for operations and maintenance), and by increasing the amount made available in fiscal year 2019 for "Veterans Health Administration—Medical Services", by \$2,500,000 and \$2,000,000, respectively.

The Acting CHAIR. Pursuant to House Resolution 923, the gentlewoman from Texas (Ms. JACKSON LEE) and a Member opposed each will control 5 minutes.

The Chair recognizes the gentlewoman from Texas.

Ms. JACKSON LEE. Mr. Chairman, let me explain the Jackson Lee amendment, which makes a modest but important improvement to the bill by increasing the amount of funding for the supportive services for veterans' families account by \$2 million, offset by a certain amount to the \$4 billion allocated to the VA's information technology systems.

Let me read a story that talks about Liz, who is an Army veteran and a single mom:

After losing her job, she struggled to pay the rent and provide for her daughter. Liz's landlord said she had always been an excellent tenant, but his patience was wearing thin as her recent rent arrears continued to increase. Disheartened with a fruitless job search and unsure where else to turn, Liz came to the Veterans Outreach Center. She was immediately connected with a case manager, an employment specialist, and an accredited State benefits counselor, and the

Supportive Services for Veteran Families team.

I include in the RECORD an article about Liz.

"HEROISM KNOWS NO GENDER"

Liz is an Army Veteran and a single mom. After losing her job, she struggled to pay the rent and provide for her daughter. Liz's landlord said she had always been an excellent tenant but his patience was wearing thin as her rent arrears continued to increase. Disheartened with a fruitless job search and unsure of where else to turn, Liz came to the Veterans Outreach Center (VOC). She was immediately connected with a Case Manager, an Employment Specialist, an Accredited State Veterans Benefits Counselor, and the SSVF team.

In order to avoid the immediate crisis of homelessness, the Services To Enable Positive Solutions (S.T.E.P.S) program at the VOC paid Liz's rent arrears, which had escalated to an amount that was insurmountable. Within a few short days of connecting with the team at VOC, Liz had a job interview that resulted in full-time, meaningful employment. In less than a week, she had a benefits review with an on-site counselor from the New York State Division of Veterans Affairs during which she applied for an increase in disability compensation. The payment of Liz's back rent allowed her and her daughter to keep a roof over their head. With a roof over their heads and their living situation stabilized, Liz was able to focus on her employment and securing her benefits, which are both components of an Individual Development Plan (IDP) that will help Liz sustain permanent housing in the future.

The VOC was able to stabilize Liz and her daughter while concurrently providing the supportive services necessary for her to maintain permanent housing. The temporary financial assistance was delivered to the landlord in a timely, efficient manner with the help of a S.T.E.P.S collaborative partner. Through coordinated case management, the aforementioned supportive services were provided quickly and effectively. The longterm result of this effort is yet to be determined, but at the 90-day benchmark, Liz has retained both her job and her home. She has realized this goal independently, without requesting any additional financial assistance. Consequently, the VOC was able to better the lives of a mom (a Veteran) and her child immeasurably through SSVF funding.

Ms. JACKSON LEE. This is a very conspicuous and daily occurrence that happens where our veterans are able to go to a supportive team that understands their service, appreciates their plight, and works to help them so that they do not go into the cycle of homelessness.

I think it is particularly important when we think about veterans and their families. They are many times single parents, many times disabled or with family concerns, mental health needs, and these services that are provided include healthcare, daily living, legal services, fiduciary and payee services, personal financial planning, childcare, transportation, and housing counseling.

Veterans like the Air Force veteran who, hoping to utilize the skills he learned in the service, instead bounced from job to job after being discharged, found himself sleeping at night on the cold cement under a bridge in Chicago. But, of course, he was able to get the

support from our veterans support services.

This is, again, a valuable statement made by this legislation, and I ask my colleagues to continue to support the services given by this particular program.

Again, I hope that we will see the end of homelessness among our veterans and the increase in support services to help them in their pathway to success.

Mr. Chair, I ask my colleagues to support my amendment, and I reserve the balance of my time.

Mr. CARTER of Texas. Mr. Chairman, I rise in opposition to the amendment, although I do not oppose the amendment.

The Acting CHAIR. Without objection, the gentleman is recognized for 5 minutes.

There was no objection.

□ 1000

Mr. CARTER of Texas. Mr. Chairman, our bill includes \$340 million for the Supportive Services for Veteran Family Program, which is \$20 million above the President's budget request. But we understand the gentlewoman's concerns and we will certainly keep them in mind in conference.

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

Ms. JACKSON LEE. Mr. Chairman, let me close by acknowledging and thanking the chairman and ranking member again for their leadership on this bill and to remind my colleagues that there are a series of stories of veterans who really needed these services.

Katie, an SSVF caseworker at the Salvation Army Bismarck, received a call from a veteran named Cherie. Cherie was referred by the family assistance adviser at the military service center in Bismarck. According to Cherie, she didn't know the Salvation Army had the veterans program until she inquired for help.

Cherie approached them. She had suffered a head injury resulting in a 3-inch blood clot, skull fracture, severe concussion. In short, she suffered traumatic brain injury. While on unpaid medical leave via physician's orders, she was terminated from her employer.

This is the kind of devastating news that will be heard from veterans who will seek and receive this kind of help.

Mr. Chairman, I include in the RECORD articles explaining the plight of a veteran in Bismarck:

HOW THE SALVATION ARMY HELPED A MOTHER AND HER CHILDREN KEEP THEIR HOME

On December 20, 2011, Katie, an SSVF Caseworker at the Salvation Army Bismarck Corps, received a call from a Veteran named Cherié. Cherié was referred by the Family Assistance Advisor at the Military Service Center in Bismarck, ND. According to Cherié, she "didn't know the Salvation Army had the Veterans program until [she] required help." Cherié approached the SSVF program because on November 19th, she suffered a head injury resulting in a 3-inch blood clot, skull fracture and a severe concussion; in short, she suffered a traumatic brain injury (TBI). While on unpaid medical

leave via physician's orders, she was terminated from her employer. A single mother of two, her biggest concern was maintaining her current residency.

On December 21st, when Cherié met with Katie, she was very emotional and had difficulty processing her thoughts. She was extremely overwhelmed with how to pay for her rent and utilities and provide for her children while unemployed. Katie provided emotional support as well as resources for a food box, an application for food stamps through the county, contact information for a Veterans employment team representative and lastly, information about a support group for women Veterans in the Bismarck community. In Cherié's own words, "The SSVF assistance provided peace of mind and helped keep me on my feet, especially with having kids. Katie has been such a calming influence, good about following up and very supportive."

Since Cherié has been involved with the Salvation Army, she has been able to focus on recovering from her TBI, has found temporary full-time employment for which permanent placement is promising, and is able to provide for her children and keep a roof over their heads. She's also spreading the word to fellow Veterans throughout the state about the SSVF program.

Ms. JACKSON LEE. I ask my colleagues to support the program overall and my amendment.

Mr. Chair, thank you for this opportunity to briefly explain Jackson Lee Amendment No. 34.

Before I begin, let me express my appreciation and thanks to good friends, Chairman CALVERT and Ranking Member WASSERMAN SCHULTZ, for their hard and constructive work in shepherding this legislation to the floor.

Chairman CALVERT and I have worked together constructively for many years and he has always distinguished himself as one of the more bipartisan members of the House.

And Ranking Member WASSERMAN SCHULTZ has for years been one of the ablest Members of this body; I thank them both for their commitment to the important work of ensuring that our veterans receive the care and support they have earned from a grateful nation.

Jackson Lee Amendment No. 34 makes a modest but important improvement to the bill by increasing the amount of funding for the "Supportive Services for Veterans' Families" account by \$2 million, offset by a reduction of \$2.5 million to the \$4 billion allocated to the VA's "Information Technology Systems" account.

Today, in our country, there are approximately 107,000 veterans (male and female) who are homeless on any given night.

Any perhaps twice as many (200,000) experience homelessness at some point during the course of a year.

The VA's "Supportive Services for Veterans' Families" Program helps veterans, and their families, who may have fallen on hard times or hit a rough patch in life and need a little help from the country they selflessly risked their life to defend.

Homeless veterans or veterans facing homelessness who have minor age children are in need of special programs that allow housing that welcomes children.

Jackson Lee Amendment No. 34 will enable this vital program to serve more veterans' families in need of help by provide a bit more funding for grants to private non-profit organizations and consumer cooperatives that pro-

vide supportive services to very low-income veteran families living in or transitioning to permanent housing.

The SSVF Program ensures that eligible veteran families receive the outreach, case management, and assistance in obtaining VA and other benefits.

These services may include health care, daily living, legal services, fiduciary and payee services, personal financial planning, child care, transportation, housing counseling.

The SSVF Program enables VA staff and local homeless service providers to work together to effectively address the unique challenges that make it difficult for some veterans and their families to remain stably housed.

Many homeless veterans, including in my own state of Texas, lack housing because they lost their job or could no longer afford rent; many suffer from an untreated mental illness that keeps them from working.

Every day the SSVF program makes a real difference in the lives of real people.

Veterans like the Air Force veteran who, hoping to utilize the skills he learned in the service, instead bounced from job to job after being discharged and found himself sleeping at night on the cold cement under a bridge in Chicago.

Through the Thresholds Veterans Project, funded through the SSVF, this hero received steady community service support and eventually was placed in his own studio apartment.

He now says, in his own words: I have a home. I enjoy bein' inside."

Veterans like the one in Texas who because he lost his job at a manufacturing plant and was unable to pay the bills, was forced to seek shelter for himself and his family at a homeless shelter.

Fortunately, the homeless shelter was a SSVF grantee and was able to assist the veteran obtain employment and his family in securing affordable low-cost housing.

There are thousands of similar success stories made possible by the SSVF Program that I could share but all of them share a common theme: they involve veterans who served their country proudly, fell down on their luck, picked themselves back up, and found affordable and sustainable housing for their families because of the assistance and support made possible by the SSVF program.

Ensuring that veterans have a place of their own to call home is the very least we can do.

I urge my colleagues to support the Jackson Lee Amendment and commit ourselves to the hard but necessary work of ending veteran homelessness in America.

I urge my colleagues to support Jackson Lee Amendment No. 34.

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

The Acting CHAIR. The question is on the amendment offered by the gentlewoman from Texas (Ms. JACKSON LEE).

The amendment was agreed to.

AMENDMENT NO. 35 OFFERED BY MR. WALBERG

The Acting CHAIR. It is now in order to consider amendment No. 35 printed in part B of House Report 115-712.

Mr. WALBERG. Mr. Chairman, I have an amendment at the desk.

The Acting CHAIR. The Clerk will designate the amendment.

The text of the amendment is as follows:

At the end of division C (before the short title), insert the following:

SEC. ____ None of the funds made available by this Act may be used by the Secretary of Veterans Affairs to implement, administer, or enforce section 17.3240 of title 38, Code of Federal Regulations, as proposed in 82 Fed. Reg. 48018 (October 16, 2017).

The Acting CHAIR. Pursuant to House Resolution 923, the gentleman from Michigan (Mr. WALBERG) and a Member opposed each will control 5 minutes.

The Chair recognizes the gentleman from Michigan.

Mr. WALBERG. Mr. Chairman, I rise today in support of my commonsense amendment to ensure our Nation's injured and amputee veterans will continue to have the ability to choose the orthotist or prosthetist that best meets his or her healthcare needs, whether that practitioner is a VA employee or a VA-contracted provider.

The VA currently is proposing a rule that I fear will reverse a decades-old policy of allowing injured and amputee veterans to choose who provides their artificial limbs and orthotic braces. The VA would have the sole authority to make what they describe as this "administrative business decision."

But choice of provider is a clinical decision and an important patient protection. These men and women have sacrificed greatly for our country and it is imperative we do everything we can to make sure they receive the timely and patient-centered healthcare they have earned and deserve.

O&P care is very intimate and specialized, and the correct practitioner for that veteran makes all the difference in the lifestyle the veteran leads. We should do everything we can do in our power to make the often difficult and frustrating transition from service to civilian life as easy as possible, especially when veterans have incurred a disabling condition.

This has been a very important issue to me, and I would like to take the time to thank my colleague, Representative RUTHERFORD, for working with me on this amendment.

Mr. Chairman, I would also like to thank both the Appropriations Committee and the Veterans' Affairs Committee for working with me on this important and timely issue.

Mr. Chairman, I encourage my colleagues to vote "yes" and empower our veterans in making their personal healthcare decisions, and I reserve the balance of my time.

Mr. CARTER of Texas. Mr. Chairman, I rise in opposition to the amendment, although I do not oppose the amendment.

The Acting CHAIR. Without objection, the gentleman is recognized for 5 minutes.

There was no objection.

Mr. CARTER of Texas. Mr. Chairman, we understand that to allay concerns regarding this proposed rule, the VA is planning to propose a supplemental rule to amend it. But we will monitor the situation. As we move to

conference with the Senate, we will keep this in mind and be glad to work the gentleman.

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

Mr. WALBERG. Mr. Chairman, I thank the chairman for his commitment and I certainly respect his position and that he will carry that out. I have legislation to do this, but this is the opportunity to at least make the point and give some certainty to our veterans that their care has and will be taken in deep and grateful consideration.

Mr. Chairman, I encourage my colleagues to support this amendment and empower our veterans in making their personal healthcare decisions, and I yield back the balance of my time.

The Acting CHAIR. The question is on the amendment offered by the gentleman from Michigan (Mr. WALBERG).

The amendment was agreed to.

AMENDMENT NO. 36 OFFERED BY MS. ESHOO

The Acting CHAIR. It is now in order to consider amendment No. 36 printed in part B of House Report 115-712.

Ms. ESHOO. Mr. Chairman, I have an amendment at the desk.

The Acting CHAIR. The Clerk will designate the amendment.

The text of the amendment is as follows:

At the end of division C (before the short title) insert the following new section:

SEC. ____ None of the funds appropriated or otherwise made available by this division may be used to convey the 17.1 acres of land and the 126 existing housing units known as Shenandoah Square and located in Mountain View, California.

The Acting CHAIR. Pursuant to House Resolution 923, the gentlewoman from California (Ms. ESHOO) and a Member opposed each will control 5 minutes.

The Chair recognizes the gentlewoman from California.

Ms. ESHOO. Mr. Chairman, this amendment will prevent the Army from moving forward with its plan to sell 17 acres of Federal land and 126 military housing units known as Shenandoah Square in the heart of my congressional district.

Shenandoah Square is located next to Moffett Federal Airfield in Mountain View, California, and houses 108 military and civilian families serving in the Air National Guard, the Army National Guard, the U.S. Navy, the U.S. Coast Guard, and the U.S. Marine Corps.

Established in 2004, Shenandoah Square is part of the California Military Communities privatized military housing entity, which consists of 2,900 homes located at Fort Irwin, Camp Parks, Moffett Federal Airfield, and Shenandoah Square.

This entity is overleveraged and is in hundreds of millions of dollars in debt because of the Army's decision to overinvest in housing at Fort Irwin that assumed greater than realized gains in the Basic Housing Allowance provided to servicemembers.

Now the Army is justifying its sale of Shenandoah Square on the grounds that there is declining demand for military housing in the bay area, but this is hardly the case. In fact, it is absurd.

I have met with the families and servicemembers living at Shenandoah Square who serve in the region with the Air Force, Army, Marine Corps, Navy, and the Coast Guard. The residents have consistently raised concerns that the property management company contracted by the Army has been working to drive out the remaining military personnel living in the Shenandoah complex to artificially depress military demand for housing to justify its decision to sell the land.

My Silicon Valley district is facing one of the most severe housing crises in the country, and the 17 acres of land that Shenandoah sits on is some of the most valuable in our entire country. Clearly, the Army is selling Shenandoah Square to pay down the debt it created and keep the California Military Communities entity from going bankrupt. This is really wrong and does a huge disservice to the military families living in this housing.

This House is already on record expressing concerns about the Army's plans to sell Shenandoah Square. I offered an amendment to the National Defense Authorization Act for 2019 expressing the sense of Congress that the Army should explore all possible alternatives to a sale, including subleasing the property to an entity that can better develop affordable housing on the property, and the amendment was adopted by a voice vote.

The Army can pursue a win-win situation by subleasing this land to one of the many willing partners in Silicon Valley seeking to develop housing and generate a regular stream of income to make this LLC whole again, but they refuse to.

Mr. Chairman, I want to make something very clear. I would support new housing for our military families if they included our military families. They are offering housing for 8 families, when we have 109. I think that this is really unacceptable.

We can't allow military families to be left without housing as they serve our country in one of the most expensive housing markets in the country. That is why I urge my colleagues to do the right thing and support this amendment.

Mr. Chairman, I reserve the balance of my time.

Mr. CARTER of Texas. Mr. Chairman, I claim the time in opposition, although I will not oppose the amendment.

The Acting CHAIR (Mr. BYRNE). Without objection, the gentleman is recognized for 5 minutes.

There was no objection.

Mr. CARTER of Texas. Mr. Chairman, the FY2018 omnibus included report language asking the Army to look at alternatives for conveying this property. We have yet to receive this report. This amendment has no effect, as

the underlying bill does not include any funding for the conveyance of this property.

Mr. Chairman, for that reason, I will not oppose the amendment, and I yield back the balance of my time.

Ms. ESHOO. Mr. Chairman, I thank the chairman. I urge my colleagues to support my amendment, and I yield back the balance of my time.

The Acting CHAIR. The question is on the amendment offered by the gentlewoman from California (Ms. ESHOO).

The amendment was agreed to.

AMENDMENT NO. 37 OFFERED BY MR. PETERS

The Acting CHAIR. It is now in order to consider amendment No. 37 printed in part B of House Report 115-712.

Mr. PETERS. Mr. Chairman, I have an amendment at the desk.

The Acting CHAIR. The Clerk will designate the amendment.

The text of the amendment is as follows:

At the end of division C (before the short title), insert the following:

SEC. ____ None of the funds made available by this Act may be used by the Secretary of Veterans Affairs to transfer funds made available for the following programs:

(1) The Homeless Providers Grant and Per Diem program.

(2) The Domiciliary Care for Homeless Veterans program.

(3) The Supportive Services for Veteran Families program.

(4) The Department of Housing and Urban Development Department of Veterans Affairs Supported Housing (HUD-VASH) programs.

The Acting CHAIR. Pursuant to House Resolution 923, the gentleman from California (Mr. PETERS) and a Member opposed each will control 5 minutes.

The Chair recognizes the gentleman from California.

Mr. PETERS. Mr. Chairman, I rise today to offer an amendment to division C of the Appropriations bill related to the Department of Veterans Affairs.

In September 2017, the VA issued a plan to shift funding away from programs that helped homeless veterans. After national outcry, the proposal was tabled, but that attempt is the reason for my amendment.

Its goal is simple: It prohibits taking funding from VA programs that provide services to homeless veterans, including the Homeless Providers Grant and Per Diem program, a clinical rehabilitation and treatment program, the Supportive Services for Veteran Families Program, and HUD-VASH housing vouchers.

Congress has made money available in a bipartisan way to reduce homelessness for veterans. It is unconscionable that the VA would use funds specifically intended for that purpose on another purpose.

San Diego County has the third-largest veterans population nationwide, behind Los Angeles and Maricopa Counties. This is why, since being elected, I have worked with my colleagues to provide more funding and services to

veterans who are homeless or at risk of becoming homeless. I have furthered this work over the last year and a half as a member of the House Committee on Veterans' Affairs.

These vets took an oath to protect our country, and now America must keep its promise to take care of them. They should not be struggling, and they most certainly should not be living on the streets.

San Diego has achieved some progress in getting vets off the streets and into housing in recent years. Other cities, like Salt Lake City, New Orleans, and Houston, have reached functional zero, which means that homelessness among veterans is rare, brief, and nonrecurring. But across the country, the problem is still far too prevalent.

I ask my colleagues to support this amendment that will help protect valuable resources that our veterans desperately need, and I look forward to working with my colleagues on both sides of the aisle to fund veterans homelessness programs and to make sure that Federal dollars committed to that purpose are used for that important need.

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

Ms. WASSERMAN SCHULTZ. Mr. Chairman, I claim the time in opposition, although I do not oppose the amendment.

The Acting CHAIR. Without objection, the gentlewoman from Florida is recognized for 5 minutes.

There was no objection.

Ms. WASSERMAN SCHULTZ. Mr. Chairman, the committee opposed the Department's tentative decision last fall to convert almost a billion dollars of funding for homeless programs from special purpose funding to general purpose funding.

This action would have been a fundamental change to the manner in which medical care funding is allocated to the field, and I support giving more local flexibility to Veterans Integrated Service Networks and medical center directors.

□ 1015

However, I strongly support transparency when it comes to changing the levels that Congress sets for VA programs.

We are the appropriations institution. We are the ones that make those decisions. The proposed realignment by VA would have potentially risked funding for essential programs such as the Supportive Services for Veteran Families Program.

Thankfully, after numerous discussions with the committee and public outrage, the Department decided not to move forward with its proposal in FY18. We fully expect for the VA to comply with the levels that we set for programs; and if the levels need to be adjusted, then the VA must consult with Congress before making changes.

I thank the gentleman from California for his amendment, and I believe

it sends a strong message to the Department that it must respect congressional priorities.

I urge all Members to support the gentleman's amendment, and I yield back the balance of my time.

The Acting CHAIR. The question is on the amendment offered by the gentleman from California (Mr. PETERS).

The amendment was agreed to.

AMENDMENT NO. 38 OFFERED BY MR. RATCLIFFE

The Acting CHAIR. It is now in order to consider amendment No. 38 printed in part B of House Report 115-712.

Mr. RATCLIFFE. Mr. Chair, I have an amendment at the desk.

The Acting CHAIR. The Clerk will designate the amendment.

The text of the amendment is as follows:

At the end of division C (before the short title) insert the following:

SEC. ____ None of the funds made available by this Act may be used to propose, plan for, or execute a new or additional Base Realignment and Closure (BRAC) round.

The Acting CHAIR. Pursuant to House Resolution 923, the gentleman from Texas (Mr. RATCLIFFE) and a Member opposed each will control 5 minutes.

The Chair recognizes the gentleman from Texas.

Mr. RATCLIFFE. Mr. Chair, I would like to thank Chairman CARTER and Ranking Member WASSERMAN SCHULTZ for their hard work on behalf of the 63,000 veterans in my district, as well as servicemembers and veterans across the country.

Mr. Chairman, I am grateful to once again have the opportunity to offer this important amendment, which would simply prohibit any funds made available in this act from being used to propose, to plan for, or to execute a new or additional round of BRAC.

Mr. Chairman, I am privileged to represent the Fourth Congressional District of Texas, which is home to the Red River Army Depot. The Depot has supported the warfighter since 1941; and although the Depot community has weathered a lot of changes over the years, its commitment to mission has remained the same. On the placards inside of every vehicle are the words "We build it as if our lives depend on it. Theirs do."

The Depot is a vital job creator in northeast Texas, and it is a critical component, Mr. Chairman, of our national defense. In this fiscal environment, we have to be careful stewards of taxpayer dollars and focus our limited resources on addressing critical national security objectives and our military readiness. Having another round of BRAC simply won't help us achieve this goal.

To that point, the Government Accountability Office said that the last round of BRAC back in 2005 cost the American taxpayers over \$35 billion, which was 67 percent more than the original cost estimate.

Starting another round of BRAC would weaken our capabilities while

increasing our vulnerabilities in the face of critical threats facing our Nation right now.

I would like to thank my colleagues who have supported this important amendment for the past 3 years, and I look forward to having this amendment included in the MILCON-VA appropriations bill.

Mr. Chair, I reserve the balance of my time.

Ms. WASSERMAN SCHULTZ. Mr. Chair, I claim the time in opposition to the amendment.

The Acting CHAIR. The gentlewoman from Florida is recognized for 5 minutes.

Ms. WASSERMAN SCHULTZ. Mr. Chair, I do oppose this amendment. I, like many Members, have concerns and share the gentleman's concerns about another round of BRAC. I realize that this is a complex issue for all Members of Congress, especially those with military facilities in their district.

I know that previous rounds of BRAC have ended up being far more expensive and expansive than we were initially led to believe. However, I have concerns about maintaining the infrastructure that the Department of Defense doesn't need. For example, the estimate of excess capacity for the Army is 22 percent. The Air Force's estimate of excess capacity is roughly 30 percent.

I can tell you that, since I became the ranking member of this subcommittee, when I have traveled around the world, almost to a person, when we have spoken to a leader on a military base, they raise the issue of needing to go through another round of BRAC. Both the Army and the Air Force are strong supporters of another BRAC round.

While this amendment has no real effect, it does send a message that Congress is unwilling to tackle a tough issue. This amendment is an abdication of our duties as Members of this House to ensure taxpayer resources are being used in a wise and fiscally responsible way. Therefore, I urge my colleagues to oppose this amendment and have a serious conversation about another BRAC round.

While I am not suggesting that we support another BRAC round, we should not be tying our hands by taking it off the table.

Mr. Chair, I urge Members to oppose the amendment, and I reserve the balance of my time.

Mr. RATCLIFFE. Mr. Chair, I yield to my colleague from Texas, Chairman CARTER.

Mr. CARTER of Texas. Mr. Chairman, I rise in support of the gentleman's amendment. I want to reassure my fellow Texans that this subcommittee is committed to protecting the installations in the great State of Texas, and I will be on top of that.

Mr. RATCLIFFE. Mr. Chair, I yield back the balance of my time.

Ms. WASSERMAN SCHULTZ. Mr. Chair, just to reiterate, we shouldn't be

taking any method that gives us an opportunity to be fiscally responsible and save money off the table.

Our friends on the other side of the aisle consistently talk a good game about being fiscally responsible, blow holes in the deficit by passing massive tax scam legislation of a \$1.5 trillion deficit expansion, and include amendments like this one that prevent the military, who have asked repeatedly to be able to at least engage in a discussion about another BRAC round, to save millions of dollars and close facilities that are no longer needed. Yet, the last several years, the majority has refused to make the tough decisions and at least have a discussion about this.

It is not responsible. Certainly not fiscally responsible. Mr. Chair, I urge my colleagues to oppose the amendment, and I yield back the balance of my time.

The Acting CHAIR. The question is on the amendment offered by the gentleman from Texas (Mr. RATCLIFFE).

The amendment was agreed to.

Mr. FRELINGHUYSEN. Mr. Chair, I move to strike the last word.

The Acting CHAIR. The gentleman from New Jersey is recognized for 5 minutes.

Mr. FRELINGHUYSEN. Mr. Chairman, as we complete debate on these three bills and these amendments, I would like to say a few words in closing.

I know I join my ranking member, Mrs. LOWEY, in thanking our colleagues for the very constructive and civil debate over the last couple of days. I thank the chairman, certainly Judge CARTER, as well as Ms. WASSERMAN SCHULTZ and their counterparts for the other two bills, for being involved in work products that have been part of an open and collaborative process.

The Appropriations Committee received over 57,000 Member requests to our database and through our Member Day hearings, the majority of which are reflected in the bills that have been discussed over the last couple of days.

Secondly, now Members have the opportunity to further make their mark through the amendment process on the floor. The result, after two days here, is that we have legislation that truly represents the priorities of the American people. These priorities include caring for our veterans, our troops, and their families; rebuilding our Armed Forces; sustaining our national defense; and investing in essential infrastructure that grows our economy and creates jobs.

I urge all of my colleagues, both Republicans and Democrats, to support these bills. These are bills that fund Federal programs that all Americans, especially our veterans and our troops, rely on to keep themselves safe, protect their lives and livelihoods, and preserve our Nation's ideals. These are programs that all of us can support.

H.R. 5895 begins the 2019 appropriations process on a strong footing and

fulfills our commitment to the American people that we will get our work done on their behalf, and I urge my colleagues to pass the bill as we go ahead to vote in the near future.

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

The Acting CHAIR. The Chair understands that amendment No. 39 will not be offered.

Ms. WASSERMAN SCHULTZ. Mr. Chair, as the designee of Ranking Member LOWEY, I move to strike the last word.

The Acting CHAIR. The gentlewoman from Florida is recognized for 5 minutes.

Ms. WASSERMAN SCHULTZ. Mr. Chairman, I want to thank the chairman of the full committee and our ranking member, Mrs. LOWEY, for the incredible work that they have done to get us to this point.

While in the minority we have had some concerns about the process, the opportunity to work closely side by side with our colleagues, the opportunity that I had to work with Chairman DENT and looking forward to working with Chairman CARTER, is really an example of how we should be working together throughout the entire legislative process.

I want to thank our staff for doing a remarkable job on this work product, and I look forward to continuing to conference.

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

Ms. PELOSI. Mr. Chair, as the designee of Ranking Member LOWEY, I move to strike the last word.

The Acting CHAIR. The gentlewoman from California is recognized for 5 minutes.

Ms. PELOSI. Mr. Chair, I acknowledge the work of the appropriators. As an appropriator myself, I have great respect for the work that they do. But I have concerns about the bill that is before us on the floor today.

Mr. Chair, as you know, a budget should be a statement of our national values. What is important to us as a Nation should be how we allocate our resources in that budget, and its manifestations in terms of appropriations bills should not be doing harm. This is really a partisan spending bill that tramples over some of our American values, gutting smart investments in our economy, hurting Americans' health, and endangering families.

The Republicans are pushing forward a minibus appropriations bill that fails to protect the interests of the American people.

Many of us have been attracted to the political process—as moms, as parents—to effect public policy to promote the well-being of our children in ways that are beyond our own control. We can give them all the love, attention, and care, but we cannot guarantee the quality of air that they breathe, the cleanliness of the water that they drink, and the world in which they live in terms of the environment.

So I have very serious concerns about the danger posed in the Energy and Water portion of this bill. It cuts vital clean energy initiatives, even as gas prices surge because of the President's reckless policies. It attacks job-creating investments in transformational energy technologies and slashes funding for critical nuclear nonproliferation priorities.

In terms of the children of whom I spoke earlier, this GOP bill also includes unacceptable poison pill riders that permit deadly firearms to be carried on public land, assaults the clean water our children drink, encourages pollution of our oceans, and pushes our Nation's already endangered species toward extinction.

This bad bill is a first step in the Republicans' plan to choke off funding—and this is really the critical part of it for me—for vital Democratic priorities for America's families later in the appropriations process. It paves the way for their plan to starve key investments in health, education, and good-paying jobs for communities across the country.

Mr. Chairman, the Republicans are wasting everyone's time when we should be focused on meeting the urgent needs of the American people. The majority has spent this entire Congress stacking the deck for special interests, as they do in these poison pills in this bill, while undermining the interests of families.

The Democrats are focusing on what matters in the lives of the American people. We are committed to giving the American people A Better Deal: Better Jobs, Better Pay, Better Future; and for our children, not to promote air pollution, which is what this bill would do, but to eliminate it.

I urge my colleagues to join in voting "no" on this bill for our economy. You know what the sad part of it is: it is so close to doing a better job for the American people. The poison pills take it in a bad direction. The process under which it was put forth is harmful to other priorities that I know we share in a bipartisan way across the aisle.

Hopefully we can work more closely as we go forward in a bipartisan way. That is the tradition of the Appropriations Committee.

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

Mr. FRELINGHUYSEN. Mr. Chair, I move to strike the last word.

The Acting CHAIR. The gentleman from New Jersey is recognized for 5 minutes.

Mr. FRELINGHUYSEN. Mr. Chair, with all due respect to the minority leader, the process has been collaborative, Republicans and Democrats. These are the three bills that have historically received both Republican and Democratic support. They embody American values.

What could be more important than looking after our veterans and their families? Energy and water, infrastructure. We are enormously proud of the

work of both the chairs and ranking members. I urge Members, both Republicans and Democrats, to support these bills, as they historically have done, and look after the interests of the American people, especially those who serve in our military today and those who have paid the supreme sacrifice.

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

□ 1030

Mr. FRELINGHUYSEN. Mr. Chairman, I move that the Committee do now rise.

The motion was agreed to. Accordingly, the Committee rose; and the Speaker pro tempore (Mr. ZELDIN) having assumed the chair, Mr. BYRNE, Acting Chair of the Committee of the Whole House on the state of the Union, reported that that Committee, having had under consideration the bill (H.R. 5895) making appropriations for energy and water development and related agencies for the fiscal year ending September 30, 2019, and for other purposes, had come to no resolution thereon.

RECESS

The SPEAKER pro tempore. Pursuant to clause 12(a) of rule I, the Chair declares the House in recess for a period of less than 15 minutes.

Accordingly (at 10 o'clock and 31 minutes a.m.), the House stood in recess.

□ 1045

AFTER RECESS

The recess having expired, the House was called to order by the Speaker pro tempore (Mr. BYRNE) at 10 o'clock and 45 minutes a.m.

ENERGY AND WATER DEVELOPMENT AND RELATED AGENCIES APPROPRIATIONS ACT, 2019

The SPEAKER pro tempore. Pursuant to House Resolution 923 and rule XVIII, the Chair declares the House on the state of the Union for the further consideration of the bill, H.R. 5895.

Will the gentleman from Iowa (Mr. YOUNG) kindly take the chair.

□ 1046

IN THE COMMITTEE OF THE WHOLE

Accordingly, the House resolved itself into the Committee of the Whole House on the state of the Union for the further consideration of the bill (H.R. 5895) making appropriations for energy and water development and related agencies for the fiscal year ending September 30, 2019, and for other purposes, with Mr. YOUNG of Iowa (Acting Chair) in the chair.

The Clerk read the title of the bill. The Acting CHAIR. When the Committee of the Whole rose earlier today, amendment No. 38 printed in part B of

House Report 115-712 offered by the gentleman from Texas (Mr. RATCLIFFE) had been disposed of.

ANNOUNCEMENT BY THE ACTING CHAIR

The Acting CHAIR. Pursuant to clause 6 of rule XVIII, proceedings will now resume on those amendments printed in part B of House Report 115-712 on which further proceedings were postponed, in the following order:

Amendment No. 10 by Mr. GOHMERT of Texas.

Amendment No. 15 by Mr. MEADOWS of North Carolina.

Amendment No. 16 by Mr. TAKANO of California.

The Chair will reduce to 2 minutes the time for any electronic vote after the first vote in this series.

AMENDMENT NO. 10 OFFERED BY MR. GOHMERT

The Acting CHAIR (Mr. BYRNE). The unfinished business is the demand for a recorded vote on the amendment offered by the gentleman from Texas (Mr. GOHMERT) on which further proceedings were postponed and on which the ayes prevailed by voice vote.

The Clerk will redesignate the amendment.

The Clerk redesignated the amendment.

RECORDED VOTE

The Acting CHAIR. A recorded vote has been demanded.

A recorded vote was ordered.

The vote was taken by electronic device, and there were—ayes 212, noes 201, not voting 14, as follows:

[Roll No. 253]

AYES—212

Abraham	Denham	Hultgren
Aderholt	DeSantis	Hunter
Allen	DesJarlais	Hurd
Amash	Donovan	Issa
Arrington	Duffy	Jenkins (KS)
Babin	Duncan (SC)	Jenkins (WV)
Bacon	Duncan (TN)	Johnson (LA)
Banks (IN)	Dunn	Johnson (OH)
Barletta	Emmer	Johnson, Sam
Barr	Estes (KS)	Jones
Barton	Ferguson	Jordan
Biggs	Fleischmann	Joyce (OH)
Bilirakis	Flores	Katko
Bishop (MI)	Fortenberry	Kelly (MS)
Bishop (UT)	Fox	Kelly (PA)
Black	Frelinghuysen	King (IA)
Blackburn	Gaetz	King (NY)
Blum	Gallagher	Kinzinger
Bost	Garrett	Knight
Brat	Gianforte	Kustoff (TN)
Brooks (AL)	Gibbs	Labrador
Brooks (IN)	Gohmert	LaHood
Buchanan	Gonzalez (TX)	LaMalfa
Buck	Goodlatte	Lamborn
Bucshon	Gosar	Latta
Budd	Gowdy	Lesko
Burgess	Granger	Lewis (MN)
Byrne	Graves (GA)	LoBiondo
Calvert	Graves (LA)	Long
Carter (GA)	Graves (MO)	Loudermilk
Carter (TX)	Griffith	Love
Chabot	Grothman	Lucas
Cole	Guthrie	Luetkemeyer
Collins (GA)	Handel	MacArthur
Collins (NY)	Harper	Marchant
Comer	Harris	Marino
Comstock	Hartzler	Marshall
Conaway	Hensarling	Massie
Cook	Herrera Beutler	McCarthy
Cramer	Hice, Jody B.	McCaul
Crawford	Higgins (LA)	McClintock
Cuellar	Hill	McHenry
Culberson	Holding	McKinley
Curtis	Hollingsworth	McMorris
Davidson	Hudson	Rodgers
Davis, Rodney	Huizenga	McSally