

He served the people there well. He has been a friend in his 10 years of service as sheriff-coroner of Siskiyou County. He will be, indeed, retiring later this week.

He has been an excellent leader in the north State, leading the other sheriffs; keeping the peace in the area; eradicating illegal marijuana growth on public lands, something that is a widespread problem up that way; and staying tough on crime.

Most recently, Sheriff Lopey has been tasked with evacuating Happy Camp, California, with the tragic fire that has occurred there very recently. It just partly destroyed the whole town by what is known as the Slater fire currently burning in Siskiyou County.

Although never an easy task, I sincerely appreciate his dedication to providing the very best safety and service to his citizens. As a constitutional sheriff, he is always looking out for all of our rights.

Mr. Speaker, I wish Sheriff Lopey and his wife, Maxine, the best during his retirement and happy trails.

MIDDLE EAST PEACE

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

Mr. YOHO. Mr. Speaker, in this time of great chaos, uncertainty, and fear, today's Abraham Accords provide us with a clear path to the normalization of relations between the State of Israel and her regional neighbors, Bahrain and the UAE.

Not only was this peace achieved without abandoning or weakening our Israeli ally, but it is a peace that recognizes the ever-present and growing threat posed by militant extremists, including the Islamic Republic of Iran, to all regional neighbors. No longer will Iran take advantage of a region divided against itself. Instead, an increasing number of Arab nations are choosing to join a united front against terror led by the United States and Israel.

I was honored to be present for this historic signing ceremony at the White House, and I pray that we can use this unifying moment to recognize that no matter the danger before us, peace will prevail. It is a good illustration of why President Trump is being recognized and considered for the Nobel Peace Prize.

TRAGEDY IN COFFEE COUNTY, TENNESSEE

(Mr. JOHN W. ROSE of Tennessee asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. JOHN W. ROSE of Tennessee. Mr. Speaker, I rise tonight deeply saddened by the tragedy that took place this past weekend in Coffee County, Tennessee, where two innocent lives were taken and others injured in a heinous kidnapping and carjacking.

Our prayers are with the victims and their families, including Tennessean Philip Jordan Stevens, who are now reeling from this tragedy.

As Tennesseans, we have not and will not accept this kind of disgusting violence in our communities.

I would like to thank our State and local law enforcement for swiftly and dutifully responding to this appalling attack. At a time when police forces around the Nation are themselves under attack, I want our law enforcement officers to know that I will continue to support the thin blue line.

As our community pushes forward, I believe now more than ever that we must stand together as Americans unified in prayer for our State and Nation.

RECOGNIZING CALEB SCHUMACHER

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

Mr. VAN DREW. Mr. Speaker, I would like to recognize Caleb Schumacher on the enormous feat of making Eagle Scout. I was proud to join Caleb and his family this past weekend in Ocean City.

Caleb's Eagle Scout project was a flag drop box so that flags can be disposed of properly. Caleb's grandfather, who served as a sergeant in the Army in the Korean war, was the inspiration for this project. Caleb plans to become a computer engineer, and I know his intelligence and his drive will push him to accomplish anything he puts to his mind.

Mr. Speaker, I am so very proud of Caleb. I know his mom, dad, and sisters are proud of him as well. His leadership skills and work ethic will serve him well, and I know he is destined for great things in life.

Some folks look to movie stars or, heaven forbid, politicians as their idols. I always look to people like Caleb. He inspires me.

Caleb, God bless you and your family, and God bless America.

CONGRATULATING DOTSON LEWIS OF CORPUS CHRISTI, TEXAS

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

Mr. CLOUD. Mr. Speaker, I rise today to congratulate Mr. Dotson Lewis of Corpus Christi, Texas, on being given the Sam Brown Award by the Texas Association of Sports Officials. This is the most prestigious award from the TASO Football Division, and Mr. Lewis is only the third recipient.

The award honors him for his many years of service, and I can think of no one more deserving than Mr. Lewis.

Before retiring 2 years ago, Dotson Lewis served our community as a referee in both football and basketball for

71 years. In 1977, he was the first executive director of the newly created Southwest Officials Association, now known as the TASO. He has also facilitated numerous exchanges between officials in Texas and in Japan, earning him the title Ambassador of American Football Officiating to Japan.

Even after retirement, he continues to devote himself to service by teaching a class on sports officiating, but his heart of service extends beyond the athletic arena.

For 21 years, he served with our U.S. Army. Following his service, he dedicated himself to serving our veterans. He started and facilitates a weekly coffee group for veterans to connect with each other and share their experiences and also to connect them with vital resources in the area.

His guidance and leadership have benefited many in Texas, the United States, and others around the world. It is my privilege to recognize him and his outstanding achievements today.

□ 1745

PROTECTING ACCESS TO COVID-19 HEALTHCARE TELEMEDICINE

The SPEAKER pro tempore (Mr. CASE). Under the Speaker's announced policy of January 3, 2019, the gentleman from Arizona (Mr. SCHWEIKERT) is recognized for 60 minutes as the designee of the minority leader.

Mr. SCHWEIKERT. Mr. Speaker, I wanted to do something this evening in light of the angst which is election time. You hear somewhat sort of the hyperbolic language. I am actually hearing many of our friends on the left almost sound like it was 5 years ago, talking about preexisting conditions, ObamaCare. We have all come to a consensus, I believe, as a political body and as a Nation, we are covering preexisting conditions.

So one of the things I want to share and I am going to tie this in to what we are going through in the pandemic and an opportunity to go beyond what is the debate of the Republican alternative from a couple years ago on healthcare or the ACA and how I believe we have changed it.

Remember, the ACA was a financing mechanism. It functionally said who got subsidized, who had to pay. Our Republican alternative, functionally, was a financing mechanism. It was who had to pay and who got subsidized.

What I am begging us all around here to think about is what we pay. Why isn't this body coming together and moving creative, technology-driven ideas to change the price of healthcare? Because when we are doing the financing mechanisms, we are not saving our country.

Remember, the single greatest driver of U.S. debt over the next 30 years—and it is really difficult politically to talk about—is Medicare.

Well, if you are like I am, where you believe we have a moral obligation to

protect Medicare and Social Security, we have a moral, ethical obligation, we also need to be honest about the debt. And I have spent the previous couple of years coming here and showing the charts of what was going on. And it was like silence from my brothers and sisters here because it is so uncomfortable to talk about.

So what I am coming to the floor tonight to do is, I just want to start the inking of there are solutions. They are not perfect. They are going to have glitches, but they start to head us in a direction where we can change the price of healthcare and by doing that, you save Medicare. But you also save the country from the crushing debt that is coming. So this is a moment of optimism.

I am going to grab this board, and this is just part of the thought experiment I want to engage with. This one we picked up today. This is brand new.

We understand the next generation of Apple Watch is coming with an oxygen sensor.

Why is that part of the disruption that helps save the country? I need you to think creatively with me.

It turns out that there is a study going on that basically looks at the concept of if we can know your oxygen, your blood oxygen calculations, we can see your heart rhythm, and those things. But also, your body temperature, we can calculate if you have a virus, if you are getting sick.

Now, obviously, the statisticians—the experts—need to build the model and prove it, but what would happen if the thing you have on your wrist is functionally a traveling medical lab with you, monitoring your health all the time, producing the data, using the algorithm and telling you, Hey, guess what? We believe you have this because we are monitoring these things.

Is that hopeful?

Is that futuristic?

Is it here?

Because this watch, I guess, is out in the next few months.

But it turns out that type of data coming off the technology we are able to have on our bodies, this body has not stepped up and gotten laws, the rules, the regulations, the reimbursements to the point where technology can help us change the price of healthcare.

So can we stop having just the darn stupid debates around here where we debate for hours on who is going to get subsidized and who has to pay? Can we start having honest conversations of what to pay? What can we as a body do to promote the technology, to promote optionality, to promote convenience?

So part of my argument here is, we are actually living part of the disruption right now. A handful of Democrats, and a number of us on the Republican side, I have had—we have had—some telemedicine bills around here for years. And no one would hear them. We would do lip service. We would talk about, well, we are going to

allow some telemedicine, maybe with the VA, but the concept that we were going to have CMS for Medicare/Medicaid patients—particularly Medicare—allowed the use of telemedicine. We know we have an army of lobbyists around here that were very uncomfortable.

If I had one more staffer, lobbyist, even brothers and sisters who are Members of Congress look at me and say, “David, we need to do this slowly. We need to do it incrementally.” Well, what happened a few months ago? The pandemic.

And we grabbed some of the language that we have had now for years and put it into one of the first coronavirus packages. And now telemedicine is reimbursable to our seniors.

And what’s happened?

We have had—and this one goes back to April—it’s my understanding the numbers have gotten dramatically more, but we haven’t been able to vet it—the use of telemedicine with seniors has skyrocketed. Satisfaction is off the charts. They are happy. The doctors we have been meeting with and talking to are actually happy and actually will tell you they are spending more time with their patients, being able to have a conversation, that patients are willing to share more. We have the living example of the disruption happening right now. And all those who kept saying, “David, let’s go slow, let’s do it incrementally,” it didn’t happen that way.

We dove in, and it is working. We need to make it better. We need to make it permanent. Because a lot of folks don’t understand, when the pandemic is declared over, so does this telemedicine. It’s over. The reimbursements, the access, the availability we have given to our seniors—who we are telling to stay home, to stay healthy—to rural America, so you don’t have to drive, it goes away. We need to make it permanent.

But I am asking us to now think even broader. Instead of just doing what I am hoping—we have legislation to do this—to extend telemedicine, as we have made it available during this time of the pandemic. Why don’t we do that? Let’s extend it but let’s actually think broader. What can we do to make healthcare more accessible?

I mean, how many speeches have happened on this floor talking about accessibility for healthcare, for our poor, for those trapped in certain urban islands, those trapped in rural America, those trapped at home.

I want us to get comfortable with the fact that the disruption is here, the technology is here. There are items like this where it is functionally a doctor’s visit in your medicine cabinet. And it has the potential for changing the cost of healthcare.

Mr. Speaker, let’s go through some of these. We want to protect the access to telemedicine, so our first piece of legislation is—I am asking every Member of Congress to think this through. Talk to

your constituents, talk to your medical experts. What has their experience been like? And are you prepared to take this away from every senior and American who has had this optionality? Are you ready to take this away the day the pandemic is declared over?

And then when you have the discussion, the debate with people like me that actually believe in that technology, we can actually expand the definition of telemedicine. So it is more than just talking to a doctor on your phone or doing FaceTime with that medical professional, but it is also the sensors and the data.

You saw the very first board where we talked about a future watch that is actually coming in a few months that will be an oxygen sensor, a pulse rate sensor, a temperature sensor that you will have on your wrist that can actually do linear conversions because it will have multiple samples from you. And the algorithm can help tell you if something is happening to your body.

But also, we need to move pieces of legislation so we can keep this, keep the reimbursement, keep it legal, keep it with us.

Let’s actually take this to what we are experiencing right now.

How many Americans are seniors? We have asked them to stay home. We have asked them to limit their contacts. We have asked them to be careful. We have given them telemedicine, but we need to take it to the next level.

There are now products that are on the market, that are out there today—we need to start reimbursing them and taking care of them—where you can actually do your COVID test at home. You can get on that telemedicine, that phone call, talk to the medical professional, do the COVID test right there with him on the phone—there are multiple providers of this—and get your results in a couple of days. This is instead of asking my father, who is in his mid-eighties, to get in the car and go wait in line at one of the drive-through testing sites, or someone else to go wait at a doctor’s office or an urgent care office, or wherever they’re doing this; this exists today.

Why aren’t we reimbursing them?

Why aren’t we making this available today?

If we say we love and care for our most vulnerable populations, why aren’t we thinking of the future?

Why aren’t we thinking of the convenience?

Why aren’t we thinking of the technology?

We need to do things like this and not be afraid of it.

Yes, it is a disruption for a lot of business models out there that wants the person coming in to test, to come into their center. But this is the future. And if we do this right, we can expand access. We can expand availability, and we can actually change the price curve.

We can make access to healthcare less expensive. And is this a Republican goal or Democrat goal? I think it just needs to be an American goal.

So as we move forward, the impact—and there is a lot of—it is hard to read this slide, but I guess what I am trying to say here is: As you look at this, we went from basically only about—oh, excuse me. I had it wrong.

In 2019, only about 11 percent used any type of telemedicine option. You called the medical professional, you told them your symptoms, you got some sort of diagnosis. We have had an explosion since then.

In 2020, now, our numbers, we think, are already old because we wrote this slide about a month-and-a-half ago on the data we had then. It went from 11 percent to 46 percent. We are hearing stories that it is substantially higher than that today.

For those that were arguing for the incremental adoption of the technology, we hit a pandemic, we got to bathe in the fire, and it worked. Yeah, there are glitches, but it has worked. Asking people not to get in their car, not to actually go wait in the waiting room, not sit—it is here.

How do we expand it?

How do we make it even more accessible?

And how do we broaden the definition of what is telemedicine?

And my argument in many ways here is more than just the simple adoption of technology. Moving away from the skepticism that, Oh, seniors aren't going to know how to use it or like to use it. We have already removed that. We have demonstrated seniors figured it out very quickly. That sort of cynicism that was out there.

But can we, as a Congress—when we get beyond this election cycle, where we are busy knifing each other for things that we know are just rhetorically stale—start giving a damn about the future of this country, about the availability of healthcare and what we are going to do to actually do something elegant, where we change the cost curve and we raise the accessibility? I would think this would make both sides giddy. We just have to make it legal.

And why I explained that is, a few months ago I was on the floor—and I have done this multiple times—we were showing some of the technology that is coming. And one was something that looked like a big kazoo. You blow into it and it would almost instantly tell you you had the flu. And the professor who had been working on this, in some of her writings, she talked about it saying, Then the algorithm could bang off your medical records, right off your phone, encrypted so it is nice and safe, and order your antivirals.

Would that make society healthier?

Would it increase accessibility?

Would it lower the price of healthcare?

Of course, it would.

□ 1800

Anyone else know the problem with this technology? It is functionally illegal today.

The way we reimburse, the way we allow prescriptions to be written, it is a tough discussion because there are lots of special interest groups that we need to work with and respect their talents.

But if we know the greatest fragility of future debt in our society is actually healthcare costs, why wouldn't we embrace something that at least we haven't completely made partisan yet? That is healthcare technology and the access and availability it brings to us.

So, my discussion tonight is a very simple one. We have just lived the experience of COVID, of having so much of our population trapped at home, fearful to go out. As part of our legislation, we allowed access and reimbursement to telemedicine. It has been adopted broadly.

Is this one of those moments we are going to take the success we have had and keep it permanent by not forcing it to expire when the pandemic is declared over? Are we going to actually be a little bit of futurists in saying we saw this experiment work for our society—for our country, for our communities, for our seniors? Could we take the positive part of this experience and go further?

That going further, what would happen if we do it the right way where it actually starts to help lower the cost of healthcare and increase accessibility? It is before us.

So many of us have been heartbroken with what we have gone through the last few months. We have ached when we have seen people lose their jobs, hearing of family members who have lost their lives. Are we going to find some things positive that we have learned over these last few very difficult months and carry those things forward?

I am going to beg of the body to think this through, that is, the adoption of technology as part of individual access to healthcare. Maybe we have to change the name because when we say telemedicine, we instantly think of looking at my phone and doing FaceTime and not realizing it also can be the data coming off your watch, the oxygen patch. Well, now we are about to have an oxygen sensor in the phone.

But how do we make it that telemedicine is the use of technology to keep us healthy and also to find a financial benefit of lowering the cost and increasing the accessibility?

This is going to be one of my passions over the next few months and, if I am blessed to be reelected, over the coming couple of years. We need to make it permanent. We need to open up the definition.

Things like the home testing, I really am begging the body to think about that if we do move another COVID bill, that we turn this into being reimbursable because this is a combination of

home COVID tests that you tie into your telemedicine appointment, and you can get a result in, I think, one of them, within 48 hours.

This is good stuff. They are out there today. There is a debate about whether they can be reimbursed. We need to fix this because we all get behind these microphones, and we wax eloquently of what we think, but it turns out there are actual solutions around us.

So, that is my pitch. It is not a particularly complicated one. But with a couple of pieces of legislation that I am blessed to be sponsoring, and with some of our friends here—and I have some Democrats who are sponsoring with us, too—I think we are seeing a vision. We can actually deliver solutions instead of just political rhetoric.

Mr. Speaker, I think I was supposed to have a friend from Louisiana coming in. We were going to talk a little bit about the environment of what was about to just happen in Louisiana. Until he gets here, I did want to do one story, and let's see if I can tell this without setting too many people on fire.

I am blessed to be the dad of a little girl that is not even 5 years old yet. She will be in a couple of weeks. She started kindergarten, but the starting of her kindergarten was sitting behind a Chromebook laptop completely isolated, whether it be at home for the first week or two, and then the second week or two sitting in an empty gym separated from anyone.

I mean, the picture will rip your heart out. She is sitting behind a laptop with cardboard walls on the side of her. She would come home and say: Daddy, please don't make me go. Daddy, I don't like this. Daddy, please let me go with you.

It was ripping my little girl apart.

Then, this last week, my school district allowed children to be in the classroom with their teacher. They have taken lots of safety precautions. I am blessed that, in my area, the statistics have all fallen within the protocols, the numbers, that it was safe. We only want schools to open if it is safe.

Overnight, it was as if I have a different little girl. She was happy. She was joyful. "Daddy, I have friends." The second day, I am a little disturbed. "Daddy, I have a boyfriend." As the father of a soon-to-be 5-year-old, that was stressing.

I am wondering how many other Americans have seen this with their kids, their grandkids? How many young people have we done such violence to not only their education but their emotional well-being, their ability to get services?

I desperately ask everyone—because I know in so many school districts and the country, and even in my community, the issue of opening schools has become political. It is not science. It is political.

We see some of the protests from our teachers unions in some spots. Now, we have protests from our parents.

We all said we were going to try to address this using math, using science. But beyond that math and science—that is your benchmark—please, we need part of the consideration to be the emotional well-being of our kids. It also needs to be the well-being of their scholastics.

Another project we are doing in the Joint Economic Committee—and I am going to geek out for a second—we are starting to do some math that says we may be damaging millions of Americans in their future earning power. We are setting them back. We may be damaging millions of Americans in their retirement.

Because if you come to the tables, these actuarial tables that we have, and say: What happens if I lost earning power or I lost growth in my Social Security, in my pension, and even my career path for several months, for a year? Have we taken a step backward and understood what other things are happening in our communities?

It turns out one of the linchpins for the next part of the spiking of employment coming back, people getting back into society and our communities, is a barrier called daycare and schools. How many parents are doing their darndest to work from home, but the difficulty is doing it when your child is in the next room sitting behind a laptop completely depressed, trying to do tele-school.

We really need to have a tough conversation and be honest with the numbers and strip the crazy partisan debate over: Is opening schools partisan?

It is insanity. We have loved and cared for our kids. Let's love on them. Let's do the right thing.

I am sorry to personalize the story, but I saw it through the lens of a 5-year-old. I can only imagine what so many others have gone through with their children.

I mean, I am hearing stories of adolescents—we had another one in my community just last week—who have taken their lives. Now, I don't know if that is tied to not being able to socialize or not being able to get counseling services or just the human relations of being at school. I don't know. But you do have to take a step backward and think about it.

Are we willing to engage in this type of cruelty to our children, to those who are trying to build their careers so they can have a healthy retirement, take care of their family for future investments, for just the ability to be part of the American Dream? Because we have some well-organized groups out there that see a political advantage. That is the definition of cruelty.

Let's take a step backward, go back to our earlier promises that we were going to do this through science. It is as much as the COVID statistics in your community and your school district as the human element of let's take care of our kids, let's actually also take care of those parents. Let's do the right thing here.

I am so disappointed in so many of my brothers and sisters who are in the world of politics who are just blinded with a level of rage, that the need to win the election—well, I have sort of said it.

Let's move away from this sort of cruelty and move back to solutions. Whether it be my hope that we found a way to make healthcare more accessible and more affordable to what we are going to do for our families to allow them to safely go back to school.

My friend from Louisiana is here. I want to share my time with him, but I also want to understand what is about to happen with the hurricane.

Didn't you get blasted just a couple of weeks ago with very, very heavy rains?

Mr. HIGGINS of Louisiana. Incredibly powerful winds, good sir. Yes, sir.

Mr. SCHWEIKERT. Look, I have a soft spot. My mother was from Baton Rouge. It is one of the reasons I love the food. And every time I hear your accent, I think of my extended family.

But I wanted to give you some time. Tell us what is happening in your community, and let us know, beyond thoughts and prayers, what is needed.

I yield to the gentleman from Louisiana (Mr. HIGGINS).

Mr. HIGGINS of Louisiana. I thank my friend, the gentleman, for yielding.

Mr. Speaker, I rise today simply to remind America of southwest Louisiana's plight in the wake of Hurricane Laura. While the national media and much of America has moved on, I will not allow the people of Louisiana to be forgotten here in Congress.

Just 2 weeks ago, my district witnessed the most powerful hurricane in our State's modern history, sustained winds above 150-miles-per-hour, a storm surge over 10 feet, a catastrophic loss across much of the State.

Thousands of families have been displaced. Many are still without power, without water, without access to the internet, without sanitation. Virtually all infrastructure, public and private, was heavily damaged.

Behind me are images from my district. These are not isolated examples. This is every street, every neighborhood, and every business across two entire parishes of southwest Louisiana and beyond.

I am grateful to President Trump for his quick response. He was on the ground just as soon as we could safely land Air Force One. I am grateful for his response and his strong commitment.

I am so thankful for the outpouring of support from faith-based and charitable organizations and from the countless first responders and volunteers who are working tirelessly to help Louisiana recover.

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

HURRICANE LAURA RECOVERY IN LOUISIANA

The SPEAKER pro tempore. Under the Speaker's announced policy of Jan-

uary 3, 2019, the gentleman from Louisiana (Mr. HIGGINS) is recognized for the remainder of the hour as the designee of the minority leader.

Mr. HIGGINS of Louisiana. Mr. Speaker, my colleagues in Congress should provide, as I was saying, every necessary Federal resource. We must do everything in our power to ensure that southwest Louisiana is not forgotten as we work through the long and difficult recovery.

I have seen firsthand the best of Louisiana, neighbors helping neighbors, communities coming together to rebuild and recover.

It is what Louisiana does. We stand back up. Our people are resilient. We will rebuild.

Louisiana, stand strong. You are not alone. You are loved. You are respected. You will never be forgotten. We stand with you as one through this recovery.

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

□ 1815

DEFENDING AMERICA'S VALUES AND PROTECTING AMERICA'S COMMUNITIES

The SPEAKER pro tempore. Under the Speaker's announced policy of January 3, 2019, the Chair recognizes the gentleman from Texas (Mr. ARRINGTON) for 30 minutes.

GENERAL LEAVE

Mr. ARRINGTON. Mr. Speaker, I ask unanimous consent that all Members may have 5 legislative days in which to revise and extend their remarks and include extraneous materials on the topic of my Special Order.

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

There was no objection.

Mr. ARRINGTON. Mr. Speaker, today's Special Order, which I am proud to host, is about defending America's values and protecting America's communities.

I have no doubt that the greatness of our beloved country can be found in "We the People," and I would say that America is great because of the people and the values which they hold so dear: the things that we believe collectively, the ideals that we hold out and strive for as a nation, imperfect people striving for a more perfect Union. And those values distinguish this experiment in liberty and democracy.

There is a reason that people from all over the world literally risk their lives to come here to be a part of this experiment in self-government, and I would say those ideals consist, first and foremost, in the belief that the American people run the affairs of this country, and we believe in that doctrine of popular sovereignty.

We believe that strong and healthy nations are nothing more than the cumulative effect of strong and healthy families; that is, the family is the cornerstone, at the cellular level it is the