

CONTINUATION OF THE NATIONAL EMERGENCY WITH RESPECT TO THE STABILIZATION OF IRAQ—MESSAGE FROM THE PRESIDENT OF THE UNITED STATES (H. DOC. NO. 114-137)

The SPEAKER pro tempore laid before the House the following message from the President of the United States; which was read and, together with the accompanying papers, referred to the Committee on Foreign Affairs and ordered to be printed:
To the Congress of the United States:

Section 202(d) of the National Emergencies Act (50 U.S.C. 1622(d)) provides for the automatic termination of a national emergency unless, within 90 days prior to the anniversary date of its declaration, the President publishes in the *Federal Register* and transmits to the Congress a notice stating that the emergency is to continue in effect beyond the anniversary date. In accordance with this provision, I have sent to the *Federal Register* for publication the enclosed notice stating that the national emergency with respect to the stabilization of Iraq that was declared in Executive Order 13303 of May 22, 2003, is to continue in effect beyond May 22, 2016.

Obstacles to the orderly reconstruction of Iraq, the restoration and maintenance of peace and security in the country, and the development of political, administrative, and economic institutions in Iraq continue to pose an unusual and extraordinary threat to the national security and foreign policy of the United States. Accordingly, I have determined that it is necessary to continue the national emergency with respect to the stabilization of Iraq.

BARACK OBAMA,
THE WHITE HOUSE, May 18, 2016.

ZIKA RESPONSE APPROPRIATIONS ACT, 2016

Mr. ROGERS of Kentucky. Mr. Speaker, pursuant to House Resolution 736, I call up the bill (H.R. 5243) making appropriations for the fiscal year ending September 30, 2016, to strengthen public health activities in response to the Zika virus, and for other purposes, and ask for its immediate consideration.

The Clerk read the title of the bill.

The SPEAKER pro tempore. Pursuant to House Resolution 736, the bill is considered read.

The text of the bill is as follows:

H.R. 5243

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled, That the following sums are appropriated, out of any money in the Treasury not otherwise appropriated, for the fiscal year ending September 30, 2016, and for other purposes, namely:

TITLE I
DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR DISEASE CONTROL AND PREVENTION
CDC-WIDE ACTIVITIES AND PROGRAM SUPPORT (INCLUDING TRANSFER OF FUNDS)

For an additional amount for “CDC-Wide Activities and Program Support”, \$170,000,000, which shall become available upon enactment of this Act and remain available until September 30, 2016, to prevent, prepare for, and respond to Zika virus, domestically and internationally: *Provided*, That products purchased with such funds may, at the discretion of the Secretary of Health and Human Services, be deposited in the Strategic National Stockpile under section 319F-2 of the Public Health Service (“PHS”) Act: *Provided further*, That such funds may be used for purchase and insurance of official motor vehicles in foreign countries: *Provided further*, That the provisions of section 317S of the PHS Act shall apply to the use of funds appropriated in this paragraph as determined by the Director of the Centers for Disease Control and Prevention (“CDC”) to be appropriate: *Provided further*, That funds appropriated in this paragraph may be transferred by the Director of CDC to other accounts of the CDC for the purposes provided in this paragraph: *Provided further*, That of the funds appropriated under this heading, up to \$50,000,000 may be transferred to, and merged with, funds appropriated under the heading “Health Resources and Services Administration—Maternal and Child Health” for an additional amount for the Maternal and Child Health Services Block Grant Program only for the following activities related to patient care associated with the Zika virus: prenatal care, delivery care, postpartum care, newborn health assessments, and care for infants with special health care needs: *Provided further*, That such transfer authority is in addition to any other transfer authority provided by law: *Provided further*, That such transferred funds may be awarded notwithstanding section 502 of the Social Security Act: *Provided further*, That such transferred funds may be awarded for special projects of regional and national significance to States, Puerto Rico, other Territories, Indian Tribes, Tribal Organizations and Urban Indian Organizations authorized under title V of such Act: *Provided further*, That no funding provided by a grant from funds in the fifth proviso may be used to make a grant to any other organization or individual.

NATIONAL INSTITUTES OF HEALTH
NATIONAL INSTITUTE OF ALLERGY AND INFECTIOUS DISEASES
(INCLUDING TRANSFER OF FUNDS)

For an additional amount for “National Institute of Allergy and Infectious Diseases”, \$230,000,000, which shall become available upon enactment of this Act and remain available until September 30, 2016, for pre-clinical and clinical development of vaccines for the Zika virus: *Provided*, That such funds may be transferred by the Director of the National Institutes of Health (“NIH”) to other accounts of the NIH for the purposes provided in this paragraph: *Provided further*, That such transfer authority is in addition to any other transfer authority provided by law: *Provided further*, That such amount is designated by the Congress as an emergency requirement pursuant to section 251(b)(2)(A)(i) of the Balanced Budget and Emergency Deficit Control Act of 1985, except that such amount shall be available only if the President subsequently so designates such amount and transmits such designation to the Congress.

OFFICE OF THE SECRETARY
PUBLIC HEALTH AND SOCIAL SERVICES
EMERGENCY FUND
(INCLUDING TRANSFER OF FUNDS)

For an additional amount for “Public Health and Social Services Emergency Fund”, \$103,000,000, which shall become available upon enactment of this Act and remain available until September 30, 2016, to develop necessary countermeasures and vaccines, including the development and purchase of vaccines, therapeutics, diagnostics, necessary medical supplies, and administrative activities to respond to Zika virus, domestically and internationally: *Provided*, That funds appropriated in this paragraph may be used to procure security countermeasures (as defined in section 319F-2(c)(1)(B) of the PHS Act): *Provided further*, That paragraphs (1) and (7)(C) of subsection (c) of section 319F-2 of the PHS Act, but no other provisions of such section, shall apply to such security countermeasures procured with funds appropriated in this paragraph: *Provided further*, That products purchased with funds appropriated in this paragraph may, at the discretion of the Secretary of Health and Human Services, be deposited in the Strategic National Stockpile under section 319F-2 of the PHS Act: *Provided further*, That funds appropriated in this paragraph may be transferred to the fund authorized by section 319F-4 of the PHS Act: *Provided further*, That such amount is designated by the Congress as an emergency requirement pursuant to section 251(b)(2)(A)(i) of the Balanced Budget and Emergency Deficit Control Act of 1985, except that such amount shall be available only if the President subsequently so designates such amount and transmits such designation to the Congress.

GENERAL PROVISIONS—THIS TITLE
NOTIFICATION REQUIREMENT

SEC. 101. Funds appropriated by this title shall only be available for obligation if the Secretary of Health and Human Services notifies the Committees on Appropriations in writing at least 15 days in advance of such obligation: *Provided*, That the requirement of this section may be waived if failure to do so would pose a substantial risk to human health or welfare: *Provided further*, That in case of any such waiver, notification to such Committees shall be provided as early as practicable, but in no event later than 3 days after taking the action to which such notification requirement was applicable: *Provided further*, That any notification provided pursuant to such a waiver shall contain an explanation of the emergency circumstances.

REPORTING REQUIREMENT

SEC. 102. Not later than 30 days after enactment of this Act the Secretary of Health and Human Services shall submit to the Committees on Appropriations a consolidated report on the proposed uses of funds appropriated by this title for which the obligation of funds is anticipated: *Provided*, That such report shall be updated and submitted to such Committees every 30 days until all funds have been fully expended.

OVERSIGHT

SEC. 103. Of the funds appropriated by this title under the heading “Centers for Disease Control and Prevention”, up to—

(1) \$500,000 shall be transferred to, and merged with, funds available under the heading “Office of Inspector General”, and shall remain available until expended, for oversight of activities supported with funds appropriated by this title: *Provided*, That the transfer authority provided by this paragraph is in addition to any other transfer authority provided by law; and

(2) \$500,000 shall be made available to the Comptroller General of the United States,

and shall remain available until expended, for oversight of activities supported with funds appropriated by the title: *Provided*, That the Secretary of Health and Human Services shall consult with the Committees on Appropriations prior to obligating such funds.

TITLE II

DEPARTMENT OF STATE

ADMINISTRATION OF FOREIGN AFFAIRS

DIPLOMATIC AND CONSULAR PROGRAMS

For an additional amount for “Diplomatic and Consular Programs”, \$9,100,000, which shall become available upon enactment of this Act and remain available until September 30, 2016, for necessary expenses to support the cost of medical evacuations and other response efforts related to the Zika virus and health conditions directly associated with the Zika virus: *Provided*, That such amount is designated by the Congress as an emergency requirement pursuant to section 251(b)(2)(A)(i) of the Balanced Budget and Emergency Deficit Control Act of 1985, except that such amount shall be available only if the President subsequently so designates such amount and transmits such designation to the Congress.

UNITED STATES AGENCY FOR

INTERNATIONAL DEVELOPMENT

FUNDS APPROPRIATED TO THE PRESIDENT OPERATING EXPENSES

For an additional amount for “Operating Expenses”, \$10,000,000, which shall become available upon enactment of this Act and remain available until September 30, 2016, for necessary expenses to support response efforts related to the Zika virus and health conditions directly associated with the Zika virus: *Provided*, That such amount is designated by the Congress as an emergency requirement pursuant to section 251(b)(2)(A)(i) of the Balanced Budget and Emergency Deficit Control Act of 1985, except that such amount shall be available only if the President subsequently so designates such amount and transmits such designation to the Congress.

BILATERAL ECONOMIC ASSISTANCE

FUNDS APPROPRIATED TO THE PRESIDENT GLOBAL HEALTH PROGRAMS

For an additional amount for “Global Health Programs”, \$100,000,000, which shall become available upon enactment of this Act and remain available until September 30, 2016, for vector control activities to prevent, prepare for, and respond to the Zika virus internationally.

GENERAL PROVISIONS—THIS TITLE

TRANSFER AUTHORITIES

(INCLUDING TRANSFER OF FUNDS)

SEC. 201. (a) Of the funds appropriated by this title under the heading “Diplomatic and Consular Programs”, up to—

(1) \$1,350,000 may be made available for medical evacuation costs of any other department or agency of the United States under Chief of Mission authority and may be transferred to any other appropriation of such department or agency for such costs; and

(2) \$1,000,000 may be transferred to, and merged with, funds available under the heading “Emergencies in the Diplomatic and Consular Service”.

(b) The transfer authorities provided by this section are in addition to any other transfer authority provided by law.

(c) Any amount transferred pursuant to this section is designated by the Congress as an emergency requirement pursuant to section 251(b)(2)(A)(i) of the Balanced Budget and Emergency Deficit Control Act of 1985,

except that such amount shall be available only if the President subsequently so designates such amount and transmits such designation to Congress.

(d) Upon a determination that all or part of the funds transferred pursuant to the authorities provided by this section are not necessary for such purposes, such amounts may be transferred back to such appropriation.

NOTIFICATION REQUIREMENT

SEC. 202. Funds appropriated by this title shall only be available for obligation if the Secretary of State or the Administrator of the United States Agency for International Development, as appropriate, notifies the Committees on Appropriations in writing at least 15 days in advance of such obligation: *Provided*, That the requirement of this section may be waived if failure to do so would pose a substantial risk to human health or welfare: *Provided further*, That in case of any such waiver, notification to such Committees shall be provided as early as practicable, but in no event later than 3 days after taking the action to which such notification requirement was applicable: *Provided further*, That any notification provided pursuant to such a waiver shall contain an explanation of the emergency circumstances.

REPORTING REQUIREMENT

SEC. 203. Not later than 30 days after enactment of this Act the Secretary of State, in consultation with the Administrator of the United States Agency for International Development, shall submit to the Committees on Appropriations a consolidated report on the proposed uses of funds appropriated by this title for which the obligation of funds is anticipated: *Provided*, That such report shall be updated and submitted to such Committees every 30 days until all funds have been fully expended.

OVERSIGHT

SEC. 204. Of the funds appropriated by this title under the heading “Global Health Programs”, up to—

(1) \$500,000 shall be transferred to, and merged with, funds available under the heading “United States Agency for International Development, Funds Appropriated to the President, Office of Inspector General”, and shall remain available until expended, for oversight of activities supported with funds appropriated by this title: *Provided*, That the transfer authority provided by this paragraph is in addition to any other transfer authority provided by law; and

(2) \$500,000 shall be made available to the Comptroller General of the United States, and shall remain available until expended, for oversight of activities supported with funds appropriated by this title: *Provided*, That the Secretary of State and the Comptroller General shall consult with the Committees on Appropriations prior to obligating such funds.

TITLE III

GENERAL PROVISIONS—THIS ACT

(INCLUDING RESCISSIONS OF FUNDS)

SEC. 301. (a) Of the unobligated balances of amounts appropriated under title VI of the Departments of Labor, Health and Human Services, and Education, and Related Agencies Appropriations Act, 2015 (division G of Public Law 113-235) and title IX of the Department of State, Foreign Operations, and Related Programs Appropriations Act, 2015 (division J of Public Law 113-235), \$352,100,000 are rescinded: *Provided*, That after consultation with the Secretary of State and the Secretary of Health and Human Services, the Director of the Office of Management and Budget (OMB Director) shall determine the accounts and amounts from which the rescis-

sion is to be derived and apply the rescission made pursuant to this subsection: *Provided further*, That not later than 30 days after enactment of this Act, the OMB Director shall transmit a report to the Committees on Appropriations detailing the amounts rescinded pursuant to this section by agency, account, program, project, and activity.

(b) Of the unobligated balances available in the Nonrecurring expenses fund established in section 223 of division G of Public Law 110-161 (42 U.S.C. 3514a) from any fiscal year, including amounts transferred to the Nonrecurring expenses fund under that section before, on, or after the date of enactment of this Act, \$270,000,000 are rescinded.

SEC. 302. Unless otherwise provided for by this Act, the additional amounts appropriated pursuant to this Act for fiscal year 2016 are subject to the requirements for funds contained in the Consolidated Appropriations Act, 2016 (Public Law 114-113).

This Act may be cited as the “Zika Response Appropriations Act, 2016”.

The SPEAKER pro tempore. The gentleman from Kentucky (Mr. ROGERS) and the gentlewoman from New York (Mrs. LOWEY) each will control 30 minutes.

The Chair recognizes the gentleman from Kentucky.

GENERAL LEAVE

Mr. ROGERS of Kentucky. Mr. Speaker, I ask unanimous consent that all Members may have 5 legislative days in which to revise and extend their remarks and to include extraneous material on the consideration of H.R. 5243 and that I may include tabular material on the same.

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

There was no objection.

Mr. ROGERS of Kentucky. Mr. Speaker, I yield myself such time as I may consume.

I rise to present H.R. 5243, the Zika Response Appropriations Act.

The Zika virus clearly poses a great threat to public health not only in the United States, but around the globe. It has become increasingly important that we, the Congress, act to protect our most vulnerable, particularly infants and pregnant women, from the risks of this disease. Our response must be urgent, direct, and strategic, targeted at preventing the further spread of this disease.

The bill before you today provides \$622.1 million to fight this dangerous virus. It prioritizes critical activities that must begin immediately, such as vaccine development and mosquito control.

I was glad to see that the administration took our committee’s advice and redirected \$589 million from less urgent needs to fund immediate actions to respond to Zika. This was and is the most immediate source of funding in the fight against Zika.

□ 1930

But given the severity of the crisis, it is clear we must do more. The funds within this legislation will continue the Department of Health and Human Services’ and the Department of

State's critical efforts to fight the spread of this harmful disease for the rest of the fiscal year of 2016 and beyond. This means that, in total, Congress will have provided over \$1.2 billion so far with this bill to respond to Zika in fiscal year 2016.

I am proud that we have provided this funding in a responsible way. The funding in this bill is entirely offset through rescissions of unobligated infectious disease funds that included Ebola or from whatever leftover administrative balances there exists within HHS.

Importantly, Mr. Speaker, this bill takes a thoughtful, strategic approach to how to address the fight against Zika, directing funds where they are needed most urgently and where they can do the most good.

This legislation provides \$170 million for the Centers for Disease Control and Prevention to support mosquito control efforts, disease surveillance, international response, and public education. These funds can also be used for emergency preparedness grants to State, local, and territorial health departments that may confront reductions to their existing budgets.

Within this total, up to \$50 million is available for health programs targeted at prenatal care, delivery and postpartum care, newborn health assessments, and care for infants with special needs related to Zika. These funds are focused on States and terri-

ories currently experiencing Zika outbreaks.

The National Institutes of Health received \$230 million to help expedite the research and development of Zika vaccines, making sure these treatments can be made available to the public quickly and safely.

For the Biomedical Advanced Research and Development Authority, BARDA, \$103 million will be directed to development and production activities for Zika, including for new rapid diagnostic tests and vaccines. Our response to Zika must also include cutting off the virus at its source, since mosquitos know no boundaries.

For the State Department and the U.S. Agency for International Development, the bill provides a total of \$119.1 million, \$100 million of this total directed to mosquito control efforts. This also includes funding for public education efforts aimed at reducing mosquito exposure. The remaining \$19.1 million is provided to help manage and oversee these programs.

As I noted earlier, we have taken the fiscally responsible step of offsetting every dollar spent in this bill. To go even further and to ensure accountability, transparency, and effective use of tax dollars, we have included strong oversight requirements.

For instance, the Department of Health and Human Services, the State Department, and USAID are required to submit spending plans to Congress before any funds can be spent. And we

have directed \$2 million total for GAO and Inspector General oversight. The bill also reiterates current, strong protections against the use of any funds for abortions.

The White House's request earlier on made none of these oversight efforts, allowing broad transfer authorities across the entire Federal Government and creating what I call "slush" funds with virtually no limits.

This bill guarantees that every cent goes to address the problem at hand: fighting the Zika virus. This funding is critical to stop the spread of Zika and to protect our most vulnerable people, both here at home and abroad. Every child deserves the chance at a full and healthy life, and every mother deserves to see her child survive. This measure will help make this happen for sure in an effective, efficient, and responsible way.

Mr. Speaker, with this bill and its passage, the Congress will have seen to \$1.2 billion just over the next 4½ months, the balance of this fiscal year. The administration request of \$1.9 billion was for several years. We, in this bill and the earlier transfer of funds from the Ebola infectious disease fund, see to it that we put money on the problem now, not waiting for further action.

I urge my colleagues to support H.R. 5243.

I reserve the balance of my time.

ZIKA RESPONSE APPROPRIATIONS ACT, 2016 (H.R. 5243)
(Amounts in thousands)

	FY 2016 Request	Recommended in the Bill	Bill vs. Request

DEPARTMENT OF HEALTH AND HUMAN SERVICES			
Food and Drug Administration			
Salaries and Expenses (emergency).....	10,000	---	-10,000
TITLE I			
DEPARTMENT OF HEALTH AND HUMAN SERVICES			
Centers for Disease Control and Prevention			
CDC-Wide Activities and Program Support.....	---	170,000	+170,000
(emergency).....	828,000	---	-828,000
National Institutes of Health			
National Institute of Allergy and Infectious Diseases (emergency).....	130,000	230,000	+100,000
Office of the Secretary			
Public Health and Social Services Emergency Fund (emergency).....	295,000	103,000	-192,000
General Provisions			
Centers for Medicare and Medicaid Services: Emergency Increase in Territorial Medicaid FMAP (CBO estimate)1/.....	157,000	---	-157,000
	=====	=====	=====
Total, Title I.....	1,410,000	503,000	-907,000
	=====	=====	=====

ZIKA RESPONSE APPROPRIATIONS ACT, 2016 (H.R. 5243)
(Amounts in thousands)

	FY 2016 Request	Recommended in the Bill	Bill vs. Request

TITLE II			
DEPARTMENT OF STATE			
Administration of Foreign Affairs			
Diplomatic and Consular Programs (emergency).....	14,594	9,100	-5,494
Emergencies in the Diplomatic and Consular Service (emergency).....	4,000	---	-4,000
Repatriation Loans Program Account, Direct loans subsidy (emergency).....	1,000	---	-1,000
UNITED STATES AGENCY FOR INTERNATIONAL DEVELOPMENT			
Funds Appropriated to the President			
Operating Expenses, USAID (emergency).....	10,000	10,000	---
BILATERAL ECONOMIC ASSISTANCE			
Funds Appropriated to the President			
Global Health Programs.....	---	100,000	+100,000
(emergency).....	325,000	---	-325,000
International Security Assistance			
Nonproliferation, Anti-terrorism, Demining, and Related Programs (emergency).....	8,000	---	-8,000
Multilateral Assistance			
International Organizations and Programs (emergency)..	13,500	---	-13,500
	=====	=====	=====
Total, Title II.....	376,094	119,100	-256,994
	=====	=====	=====
GENERAL PROVISIONS - THIS ACT			
Sec. 301(a) Unobligated balances (PL 113-235) (rescission) (emergency).....	---	-352,100	-352,100
Sec. 301(b) Nonrecurring expenses fund unobligated balances (PL 110-161) (rescission).....	---	-270,000	-270,000
	=====	=====	=====
GRAND TOTAL.....	1,796,094	---	-1,796,094
Appropriations.....	---	(270,000)	(+270,000)
Emergency appropriations.....	(1,796,094)	(352,100)	(-1,443,994)
Rescissions.....	---	(-270,000)	(-270,000)
Rescissions of Emergency funding.....	---	(-352,100)	(-352,100)

1/ OMB estimate is \$246M. FMAP is Federal Medical Assistance Percentage

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

In February, the World Health Organization declared Zika a public health emergency of international concern, and the President called for \$1.9 billion to respond to the impending crisis to prevent the spread in our very own communities.

According to the National Governors Association, the Nation is on the threshold of a public health emergency. In a separate letter, the U.S. Conference of Mayors, National League of Cities, National Association of County and City Health Officials wrote to urge Congress to provide emergency supplemental money for Zika, rather than repurpose money from other high-priority programs.

I include in the RECORD both letters.

MAY 10, 2016.

Hon. THAD COCHRAN,
Chairman, Senate Appropriations Committee,
U.S. Senate, Washington, DC.

Hon. ROY BLUNT,
Chairman, Senate Appropriations Subcommittee
on Labor, Health and Human Services &
Education, U.S. Senate, Washington, DC.

Hon. BARBARA MIKULSKI,
Ranking Member, Senate Appropriations Com-
mittee, U.S. Senate, Washington, DC.

Hon. PATTY MURRAY,
Ranking Member, Senate Appropriations Sub-
committee on Labor, Health and Human
Services & Education, U.S. Senate, Wash-
ington, DC.

DEAR CHAIRMEN COCHRAN AND BLUNT AND SENATORS MIKULSKI AND MURRAY: The U.S. Conference of Mayors, National League of Cities and National Association of County and City Health Officials call on you to advance legislation without delay to respond to the Zika virus. Our associations serve people in cities and counties where the burden of Zika will be felt directly.

Emerging infectious disease threats like Zika require ongoing vigilance, but the particular risks from this virus require immediate, additional investments. We urge Congress to provide emergency supplemental funding for Zika rather than repurpose money from other high priority programs at the Centers for Disease Control and Prevention (CDC) and other federal agencies that ensure our health security and public health preparedness. CDC has already diverted more than \$44 million from public health emergency preparedness (PHEP) to fund the Zika response. Backfilling this PHEP funding is critical to making sure that communities are ready to respond to all threats.

Although not a new virus, 2015 marked the first widespread transmission of the Zika virus in the Americas. The virus is spread primarily by mosquitoes and usually causes only mild illness or no symptoms. However, in Brazil and other countries affected by Zika there has already been a steep increase in birth defects in infants born to mothers who were infected during pregnancy. In January 2016, CDC warned women who are pregnant or trying to become pregnant to avoid travel to regions and countries with widespread Zika transmission or to prevent being bitten by mosquitoes there. With the weather getting warmer and increased numbers of mosquitos in many places in the United States, Congress can no longer wait to act.

In local communities, health departments are engaged in educating the public and health care providers about Zika, conducting prevention activities through mosquito eradication and screening travelers from countries where the outbreak has surfaced.

Our associations urge you to act quickly in providing emergency supplemental funding to the U.S. Department of Health and Human Services to support the local response to Zika with increased virus readiness and response capacity focused on areas with ongoing Zika transmission; enhanced laboratory, epidemiology and surveillance capacity in at-risk areas and surge capacity through rapid response teams to limit potential clusters of Zika virus in the United States.

Thank you for your consideration of this request. For further information, please contact: Crystal Swann, Assistant Executive Director, at cswann@usmayors.org; Carolyn Coleman, Esq., Senior Executive and Director of Federal Advocacy at coleman@nlc.org; or Eli Briggs, Senior Government Affairs Director at ebriggs@naccho.org.

Sincerely,

TOM COCHRAN,
CEO & Executive Di-
rector, United States
Conference of May-
ors.

CLARENCE E. ANTHONY,
CEO & Executive Di-
rector, National
League of Cities.

LAMAR HASBROUCK, MD,
MPH,
Executive Director,
National Association
of County and City
Health Officials.

MAY 9, 2016.

GOVERNORS ASK FOR SWIFT ACTION ON ZIKA FUNDING

WASHINGTON.—The National Governors Association (NGA) today released the following statement on congressional funding of the Zika virus:

“The nation is on the threshold of a public health emergency as it faces the likely spread of the Zika virus. As with all such emergencies, advance planning and preparation is essential to prevent injury and death.

A key component to averting infectious disease outbreaks is to prevent incidence levels from reaching a critical ‘tipping point,’ after which there is a rapid increase in the number of infections. This is particularly true of the Zika virus—the most important way we can protect people is to minimize infections and prevent a concentration of cases, which can lead to outbreak and children born with severe, lifelong birth defects such as microcephaly.

As Congress returns from recess today, the nation’s governors urge the Administration and Congress to work together to reach agreement on the appropriate funding levels needed to prepare for and combat the Zika virus. We also ask they act as expeditiously as possible to ensure those funds are available to states, territories and the public at large.”

Mrs. LOWEY. Mr. Speaker, as summer approaches, the CDC confirmed 1,204 cases, including more than 100 pregnant women in the continental United States, Puerto Rico, and other U.S. territories as of May 11. So far all of the continental U.S. cases are associated with travel, but experts expect the first locally transmitted cases in a matter of weeks.

The scientific community has concluded, after careful review, that Zika can cause microcephaly resulting in miscarriage and other severe fetal brain defects, as well as adult neurological disorders.

When the House Republican leader-ship failed to act, the administration

was forced to redirect \$589 million, mostly from emergency Ebola bal-ances, to fund immediate efforts to re-pond to Zika. According to Dr. Fauci at the National Institutes of Health, the redirected funds allowed the United States to start work.

But we cannot finish what we need to do. The Republican bill does not allow us to finish the job either. It provides \$622 million, less than a third of what is needed.

The administration requested \$743 million for State and local efforts to reduce mosquito populations as well as conduct public health studies of the Zika virus. The House Republican bill provides \$120 million, plus an additional \$50 million for block grants.

By providing such a small fraction of the requested amount, we would be drastically underfunding State and local public health departments, hampering efforts to expand mosquito control and mitigation, and unnecessarily placing millions of pregnant women at risk.

In addition, the administration requested \$246 million in direct assistance for Puerto Rico, an epicenter in the Zika outbreak. The House Republican bill does not provide this direct funding for Puerto Rico, again, placing tens of thousands of pregnant women at risk.

In the past, Congress has come together in a bipartisan manner to address and respond to emergencies from the Ebola and H1N1 viruses to natural disasters and agreed that these emergencies should not be offset. When a tornado strikes, we don’t steal money from the unfinished relief efforts for the last hurricane; yet House Republicans would take more Ebola funding, risking that it could reemerge, and give less than it needed to stop the spread of Zika in communities throughout the United States.

Without full funding to replenish Ebola accounts, we won’t complete commitments to fortify international public health systems or have health contingency funds in place to respond to outbreaks of either disease or any other unanticipated public health crisis. That is why I introduced H.R. 5044, which would provide the full emergency supplemental to combat Zika and prevent the virus from spreading without risking investments in our public health infrastructure.

Mr. Speaker, that is the bill we should be debating today, not the House Republican Zika, which is a day late and a dollar short.

I reserve the balance of my time.

Mr. ROGERS of Kentucky. Mr. Speaker, I yield such time as he may consume to the gentleman from Oklahoma (Mr. COLE), the chairman of the House Appropriations’ Subcommittee on Labor, Health and Human Services, Education, and Related Agencies. He is also a member of the House Rules Committee.

Mr. COLE. Mr. Speaker, I thank the gentleman from Kentucky for yielding me the time I need.

I want to begin my remarks by complimenting our chairman. Quite frankly, I don't know anybody that has spent more time on this issue and devoted more thought to it than Chairman ROGERS.

He took a codel down to the region. Our first stop was in Peru where we stopped at a Naval research station. It has been there for many decades. Their purpose normally is to look at tropical diseases, which they are doing, but they have now switched their efforts primarily to Zika, just as they should. So we were on top of this early.

Then we went to Brazil and, under Chairman ROGERS' leadership, we had the opportunity to meet with the Centers for Disease Control's people on the ground and also talk to our colleagues in the Brazilian Government about the appropriate ways to move forward on this that were done thoughtfully and responsibly.

What Chairman ROGERS has laid before us is essentially a three-part plan that funds all the administration wants to do. The first is the initial \$600 million that would not be available had the chairman not directed the administration to immediately use available funds.

Now, when we passed money for Ebola, if you go back and look at the legislation, it was not only for Ebola. It was for Ebola and other infectious diseases. Frankly, the money there may well be more than we need for Ebola. But in any case, it is going to be spread over many years. So because the chairman pushed hard on this, we actually have \$600 million available immediately, and the message to the administration was to start spending what you need to do now.

The second piece of this three-part plan is the bill that is in front of us today. It is over \$600 million. As the chairman pointed out, this is two-thirds essentially of what the administration has requested and more than they requested in this fiscal year. Remember, this bill is only for this fiscal year.

So the next third will come in the bills that are presented by my subcommittee and by my good friend, Chairman GRANGER's subcommittee, the Subcommittee on State, Foreign Operations, and Related Programs.

So if you actually look at the total amount provided, it is about what the administration has requested, and it arrives in a timely manner to meet all their needs. The one single critical difference is that what the chairman has provided is fully offset.

Now, my very good friend from New York mentioned that, in emergencies, we don't normally offset. The reality is we do offset when we can. She mentioned tornados. Let me give you an example.

In 2013, my home community of Moore, Oklahoma, was hit by tornados. There was a question of whether or not there would be money available. There was, in fact, money available. That

money was in the FEMA disaster relief fund. There was more than enough money in there that had already been appropriated to use. That is what is true here again today.

We have more than enough money in the Ebola funds that we appropriated 2 years ago to actually take care of the initial phase of this action and any other problem that comes up. This is now additional money on top of that.

□ 1945

So the wise thing, it seems to me, is to actually use the funds that you have set aside for these purposes. First, \$600 million from the Ebola money and infectious diseases. The next would be this. The next tranche of money would be in the Labor, Health and Human Services, and Education bill that I am privileged to be chairman of and will bring to this floor in June, and my friend Ms. GRANGER will also bring forward additional money in her bill to help with the efforts overseas.

So the simple fact is this really isn't an argument about Zika. It is an argument about whether you will pay to take care of the needs that we have. We have more than enough funds in what we have already voted, what we will vote for here, and what we will provide next year to actually take care of the problem. The chairman has made an additional commitment that if we need to backfill that money, if we are short for some other infectious disease that none of us can anticipate or for Ebola, we will take care of that during the regular appropriations process.

So this is, essentially, I think honestly, a solution in search of a problem. The money is here. We have the money. We are appropriating the money. The administration has not failed to do one thing it wanted to do because of lack of money. The money is available. The real question here is: Are you going to offset that money and make sure that we don't add another \$1.9 billion to the national debt by using the money you have got available or are you just going to simply charge it to the national credit card? That is what my friends on the other side—with the best of intentions, I am sure—are actually advocating. Let's just put the country \$1.9 billion deeper in debt as opposed to using available resources, appropriating additional resources and offsetting them, and then using the normal appropriations process to go forward.

I want to commend the chairman, honestly, for being thoughtful, careful, and prudent with taxpayer dollars. That is what this is all about. If we work together, we can provide all the money that the administration needs without increasing the national debt. If we do what our friends on the other side suggest, we will simply add \$1.9 billion more, and at the end of the day, we won't be in any different place than we will be under the chairman's plan.

Mr. Speaker, I would recommend that we pass this legislation, build on

top of the \$600 million we have already provided, and allow Ms. GRANGER and myself to bring forward to the full Congress the additional funds that they need in the normal appropriations process.

Remember, this \$1.9 billion isn't needed today. It is needed over a multiyear period. We are providing it over a number of years, and we are doing it without adding to the national debt. It seems to me pretty clear.

Actually, both sides have the same aim here. We want to take care of an urgent healthcare problem. The difference is the chairman has presented—first, in the \$600 million we have already deployed, and in the \$622 million that we will deploy in this bill, and the additional money that will come in the normal appropriations process—everything we need. In some sense, this argument is an argument we don't need to have unless your aim is simply to have \$1.9 billion more.

I want to thank the chairman for what he has done. I look forward to continuing to work with my friends on the other side of the aisle. At the end of the day, we will have more than enough money. The difference will be we will not have added one cent to the national debt.

Mrs. LOWEY. Mr. Speaker, I am very pleased to yield 3 minutes to the gentlewoman from California (Ms. LEE), a distinguished member of the Committee on Appropriations and the Committee on the Budget.

Ms. LEE. Mr. Speaker, I thank Congresswoman LOWEY for yielding and also for her very steady and effective leadership on our committee.

Mr. Speaker, as a member of the Labor-HHS and State and Foreign Operations subcommittees, I rise today in strong opposition to H.R. 5243, which is the so-called Zika funding bill.

Earlier this week, the majority finally decided to act on Zika, yet their proposal shows just how unwilling they are to take this crisis seriously. Even now, they have offered barely one-third of the resources needed to fight Zika. Not only are my Republican colleagues' efforts 3 months late, they are also woefully inadequate to address this major public health emergency.

If that weren't enough, Republicans have once again included poison pills that have no place in this legislation. While we are trying to work to protect our Nation's most vulnerable, including pregnant women and their children, the majority is putting politics over public health, and that is just wrong.

The Zika outbreak has already spread to more than 26 countries, including the United States and our territories. Sadly, there have been two Zika deaths in Puerto Rico. This summer, Americans living in Southern States face tremendous risks from the virus.

Not only does this bill underfund our Zika response, it raids vital funding for other dangerous infectious diseases, such as Ebola. Quite frankly, we should

not roll the dice should another Ebola outbreak occur. We know how this appropriations process works. I don't want to chance that. We appropriated Ebola funding for Ebola. This is not the time to rob Peter to pay Paul. The experts are clear. We need the full \$1.9 billion request, emergency request, without offsets.

Now, we have seen war funding emergency supplementals fly through this House without many questions raised. This is an emergency, and we need to treat it as such.

Finally, this bill includes Hyde-like language, a dangerous rider that denies access to abortion coverage for women if they are poor, a veteran, in the military, or a Federal Government employee. Let me be clear, politicians have no business denying a woman health coverage based on her income, her employer, or her ZIP Code.

Once again, the majority has decided to put their extremist ideology over public health. Why in the world would they put this rider in this Zika funding bill? It doesn't make any sense, and it is wrong.

It has been 3 months since the World Health Organization declared the Zika virus as a public health emergency. That was February. Three months since the President requested emergency funds, the time to act is now.

Mr. Speaker, I urge my colleagues to vote to reject this bill and let's instead pass a bill with adequate funding and without ideological antiwomen riders. The American people can't afford to wait much longer for Congress to get this right.

Mr. ROGERS of Kentucky. Mr. Speaker, I yield 3 minutes to the gentlewoman from Texas (Ms. GRANGER), the chairman of the Subcommittee on Appropriations for State, Foreign Operations, and Related Programs.

Ms. GRANGER. Mr. Speaker, I rise in support of H.R. 5243, the Zika Response Appropriations Act.

This bill provides \$622 million to respond to the Zika virus both at home and abroad. As chair of the State and Foreign Operations Subcommittee of the Committee on Appropriations, I want to highlight funds in the bill for the international response efforts to stop the virus at its source. This includes mosquito control activities to stop the spread of the virus, public information campaigns to get the message out about Zika, and evacuations of Americans when needed. These efforts will build on work that has already begun.

After my colleagues and I urged swift action, the administration decided to redirect \$589 million of funds already in hand to respond to the Zika virus. This funding bill is the next step. It provides our best estimate of what is needed for the remaining months of this fiscal year. As we draft the fiscal year 2017 appropriations bills and information about the threat of Zika becomes more clear, we will address at that time any additional requirements through our regular process.

Unlike the President's request, the activities supported in this bill are targeted and focused. This bill also contains strong oversight provisions and is fully offset. H.R. 5243 provides what is needed now to respond to the Zika virus, and I urge my colleagues to support it.

Mrs. LOWEY. Mr. Speaker, I yield 4 minutes to the gentlewoman from Florida (Ms. WASSERMAN SCHULTZ), the ranking member on the Legislative Branch Subcommittee.

Ms. WASSERMAN SCHULTZ. Mr. Speaker, I thank my ranking member, the gentlewoman from New York, for her leadership on this issue.

I join my colleagues in urging Congress to vote down this wholly inadequate legislation and take meaningful action to address the public health crisis the Centers for Disease Control called "scarier than we originally thought" and support the President's request.

My home State of Florida leads the Nation in confirmed cases of the Zika virus, with 113 people infected already and counting. Florida health officials declared a state of emergency in February. As we head into mosquito season, as well as high travel season, we know the risk of Zika will rise.

We have seen the heartbreaking images of babies born with microcephaly. As researchers are continuing to learn more about the different ways that Zika can be transmitted, it is critical that Congress provide the funding needed to thoroughly tackle this virus now.

I am proud that we have transcended partisan lines in Florida at least. Senators NELSON and RUBIO as well as Governor Scott have all been outspoken advocates in support of the President's request to fight this disease, which he made nearly 3 months ago.

I have heard many of my House Republican colleagues acknowledge the devastating effects of this disease and the need for serious proposals to combat it. Sadly, the only serious part of the bill before us is how far it is from meeting our Nation's needs in overcoming this public health crisis.

The bill that the Republican leadership has introduced will not provide meaningful support to my constituents or constituents affected by this across the country. Among its many other shortcomings, this bill would raid funds from accounts designated for Ebola, which, as many public health officials have testified already, is still a threat. Robbing Peter to pay Paul is irresponsible.

It also fails to provide any specific resources to Puerto Rico, where Americans are suffering the greatest burden of what Dr. Thomas Frieden, the Director of the Centers for Disease Control, recently called an epidemic. It continues attacks on a woman's ability to make her own reproductive health decisions, and, perhaps most astonishingly of all, this bill only provides these limited and borrowed funds until

September 30, when they will then expire. Let me assure you that mosquitoes and diseases do not follow the congressional budget calendar.

I urge the entire House to quickly pass legislation that I have introduced along with my colleagues, Ranking Member LOWEY and Ranking Member ROSA DELAURO, which would support the President's request of \$1.9 billion. We cannot simply watch more people get infected with Zika as we dither over how we fund critical investments into vaccine research, prevention strategies, and finding a cure.

This is a mosquito-borne and sexually transmitted virus. Mosquitoes don't know whether they are biting a Republican or a Democrat, and we should not politicize this serious crisis.

The National Institutes of Health, the Centers for Disease Control and Prevention, and the Department of Health and Human Services have repeatedly provided plans that clearly detail the need for these funds and how they would be spent.

Our local public health facilities, particularly in Florida, the Gulf States, and Puerto Rico need added resources, as do our local mosquito control programs. We need more investments into vector control and mosquito eradication. We need more public education, and we need more resources to ensure that people are able to protect themselves.

I will quote my colleague from the Senate, Senator MARCO RUBIO, that we must—and I agree with him—we must get out in front of this. We will only have ourselves to blame if we dither and don't do so.

So I say to my colleagues, we must act responsibly, we must respond appropriately, and we must do it quickly. This bill does not come close to doing that, so I will cast my vote against it in hopes we will reach an agreement that actually appropriates the amount of resources that address this burgeoning crisis. My constituents cannot wait and neither can yours.

Mr. ROGERS of Kentucky. Mr. Speaker, may I inquire how much time I have remaining?

The SPEAKER pro tempore (Mr. HULTGREN). The gentleman from Kentucky has 13½ minutes remaining. The gentlewoman from New York has 18 minutes remaining.

Mr. ROGERS of Kentucky. Mr. Speaker, I yield 3 minutes to the gentleman from Texas (Mr. CULBERSON), the chairman of the Subcommittee on Commerce, Justice, and Science.

Mr. CULBERSON. Mr. Speaker, the Zika virus does pose a genuine emergency situation and, as in any emergency, requires a calm head, clear thinking, and rational approach to dealing with the problem, absent of emotion. You have got to be careful and thoughtful about these things.

As with any emergency situation, you have got to trust the experts, and the experts in the field have told us that the Ebola virus is no longer as serious a threat as it was. That emergency has passed. We now need to focus

on the Zika virus, which we are beginning to see cases in the United States.

So, in a thoughtful, careful, rational way, the Republican majority has made certain that the money, our constituents' hard-earned tax dollars, is wisely and prudently spent.

□ 2000

When we first recognized it, Chairman ROGERS, Chairman COLE, and Chairman GRANGER made sure there was \$5 billion set aside in the current year to fight Ebola and other infectious diseases. Nearly \$2 billion is still in that account for other infectious diseases.

And to deal with this Zika crisis, we have in this legislation tonight—which I urge my colleagues to support—added another \$622 million that is completely offset. We have made savings and cuts in other areas of the government to make sure that our constituents' hard-earned taxpayers dollars are wisely spent.

We are not increasing spending. We are offsetting this \$622 million to fight Zika in a thoughtful, intelligent, rational way, beginning with funding mosquito control and prevention in those States with heavy mosquito populations.

Texas was inundated with rain this past April, and we got the threat of a large mosquito population that is very real. So this funding tonight, which is completely offset and paid for, will help combat that threat.

Chairman ROGERS, Chairman COLE, and Chairman GRANGER have provided \$230 million to the National Institutes of Health in addition to—remember—the \$2 billion that is still there from the current year to fight Ebola and other infectious diseases.

We have made sure that there is careful oversight of our constituents' hard-earned tax dollars and to make certain that each agency has to report to Congress on how the money is going to be used. They have to submit a spending plan. We have to make certain the dollars are going where they will do the most good. That is our responsibility. That is our duty.

As good stewards of our constituents' hard-earned tax dollars, as guardians of the Treasury, we have a fiduciary duty to make sure that money is not wasted.

Chairman ROGERS also put an expiration date on the funding to make sure that the money is not going to be transferred to other activities. It has got to be spent on fighting this dreaded disease.

The only politicization that has taken place tonight are those who would stand up in front of the people of the United States and try to make it an emotional issue. We have got to approach this, as in any crisis, in a calm, thoughtful, and intelligent way that makes sure that we are targeting our constituents' hard-earned tax dollars where they will do the most good.

Any additional funding that is necessary to fight this outbreak in the

next fiscal year can and will be considered as part of the normal appropriations process.

In a thoughtful, considerate way, Chairman ROGERS has given us a bill to help solve this crisis, and I urge my colleagues to support it.

Mrs. LOWEY. Mr. Speaker, I yield 1 minute to the gentlewoman from New York (Ms. VELÁZQUEZ), the ranking member of the Small Business Committee.

Ms. VELÁZQUEZ. I thank the gentlewoman for yielding.

Mr. Speaker, this is the face of Zika: an innocent child harmed with the disease—a disease that we could prevent.

Now, this disease is harming our fellow American citizens in Puerto Rico and on the eastern side of the mainland.

Already, because of Washington's decades of neglect, Puerto Rico's health care system is broken. Last year, 500 doctors packed up and left the island, never to return, and physicians are leaving at the rate of one a day.

While Puerto Rico's health infrastructure is vulnerable, we are seeing this terrible disease take hold. More than 570 cases of infection have already been reported in Puerto Rico, including almost 50 pregnant women, and two deaths.

How dare anyone in this Chamber say that this is political. It is not political when we have people that are dying in Puerto Rico.

The SPEAKER pro tempore. The time of the gentlewoman has expired.

Mrs. LOWEY. Mr. Speaker, I yield the gentlewoman an additional 30 seconds.

Ms. VELÁZQUEZ. Now, what are House Republicans doing in response? They are proposing less than one-third of the money needed to respond to Zika. They are providing no—zero—money targeted for Puerto Rico.

Mr. Speaker, look at this face again. Shame on this House for this failure. Look at this face and then look in the mirror.

Mr. ROGERS of Kentucky. Mr. Speaker, I yield myself 30 seconds.

This bill specifically mentions Puerto Rico. These moneys go to Puerto Rico, as well as to the rest of the territories and the States. So the money will be there if this bill passes.

Mr. Speaker, I yield 3 minutes to the gentleman from Florida (Mr. DIAZ-BALART), the chairman of the Appropriations Subcommittee on Transportation, Housing and Urban Development, and Related Agencies.

Mr. DIAZ-BALART. Mr. Speaker, I want to first thank Chairman ROGERS for his leadership on ensuring that the United States is able to do everything necessary to combat Zika, and do so immediately.

South Florida is ground zero in the United States for this disease. So the funding that this bill provides is, frankly, critically important to Florida, especially, as we know, because mosquitos are most active during the

summer months. This horrible disease has the capability to infect many, and we must focus on stopping it before it continues to spread.

So I believe, Mr. Speaker, that we need to provide every dollar needed for Zika prevention, treatment, and response programs and, I would repeat, not one penny less.

This bill is the second part of a three-pronged effort to combat this disease. First was the almost \$600 million in repurposed Ebola funds. Now we are providing an additional \$622 million for, again, a total of over \$1.2 billion to deal with this disease.

So let's be clear: if more funds are needed, Congress will step up and do what is necessary to make sure that, if those funds were necessary sometime in the future, they would be available.

It is also crucial, Mr. Speaker, that President Obama's administration and the Centers for Disease Control provide Congress with detailed information as to how they plan to spend these proposed funds.

Congress also has a responsibility to protect American taxpayers so that their hard-earned dollars are spent efficiently and effectively, much unlike, Mr. Speaker, the fiasco with those so-called "shovel-ready" programs. Let's make sure that we do not repeat that embarrassing fiasco and waste of taxpayers' money.

So I urge my colleagues to vote for this bill, as it does provide the funds necessary to fight Zika immediately—immediately, Mr. Speaker—again, while also making sure that we protect the hard-earned American people's tax dollars.

I once again want to thank the chairman for doing this so quickly, so efficiently, because Florida is ground zero.

Mrs. LOWEY. Mr. Speaker, I yield 3 minutes to the gentleman from Maryland (Mr. HOYER), our distinguished Democratic whip.

Mr. HOYER. Mr. Speaker, I like Mr. DIAZ-BALART. But if I get sick, I hope it doesn't take 90 days for the emergency responders to come to my aid.

February 22 is when the administration said we needed this money. Almost 90 days later, we are talking about one-third of what they said was necessary.

Mr. Speaker, our Nation faces a very real and present danger from Zika. Our people face that crisis. Already, more than 1,200 Americans, including more than 110 pregnant women, have confirmed cases of Zika virus. Would that have been the case if we had acted on February 22? I do not know. But I certainly wouldn't want to rely on this Congress to enact anything in a timely fashion.

We know that there is a link between Zika virus and severe birth defects, including microcephaly, which can be life-threatening and for which there is no cure. We saw a tragic picture of a child.

Puerto Rico, with its 3.5 million American citizens, has been especially

hard-hit and needs help from the Federal Government to prevent and contain the spread of the virus and ensure access to health services for those affected, particularly pregnant women and children.

Last week, Puerto Rico health officials reported the island's first confirmed case of Zika-related microcephaly.

This is a public health crisis. And I guarantee you, if it had been a terrorist who had attacked, we would have responded on February 23.

The President has requested \$1.9 billion in emergency funding to combat the Zika outbreak, but that is not what House Republicans brought to the floor today. Instead, they are putting forward legislation that would provide just \$662 million—less than a third, as I said.

That means we can't fully fund the development of a vaccine; deployment of diagnostic testing, especially for pregnant women; and vector control to manage mosquito populations.

In addition to its inadequate funding level, the Republican bill offsets the spending by further depleting funds that were appropriated to combat the Ebola virus. I know they are going to say they are going to backfill it. I won't hold my breath.

The administration has already been forced to borrow more than half a billion dollars in Ebola accounts, while Congressional Republicans ignored its Zika supplemental funding request from February 22 to this day. That is no way—no way—to handle public health crises.

I urge my colleagues on the Republican side to join us to respond effectively to the President's request.

The SPEAKER pro tempore. The time of the gentleman has expired.

Mrs. LOWEY. Mr. Speaker, I yield the gentleman an additional 1 minute.

Mr. HOYER. Representative VERN BUCHANAN of Florida, who supports the President's request, said last week—not STENY HOYER, a Democrat—but VERN BUCHANAN, a Republican:

“All Members of Congress should take this virus seriously and put aside partisanship—time is not on our side as the summer months draw near.”

Senator MARCO RUBIO of Florida said in April:

Congress is “going to have to explain to people why it is that we sat around for weeks and did nothing on something of this magnitude.”

That is MARCO RUBIO.

Let's work together to pass an emergency supplemental.

STEVE WOMACK said this:

“If we fail to deal with the issue and there are hardships that would be posed on society in this country, you wouldn't be able to compute those costs.” “It's a dice roll to get into an argument about Zika funding and running the risk in having something catastrophic happen and we own it.”

You will own it if this gets out of hand and we don't have the appropriate

resources deployed now. It should have been 30 days ago, 60 days ago, 90 days ago.

Let's not have this become a crisis. Let's act now on the full sum necessary to meet this crisis.

Mr. ROGERS of Kentucky. Mr. Speaker, I yield myself 1 minute.

Does the gentleman not realize, the request from the National Institutes of Health for vaccine development, we put in \$40 million and the money transferred from the so-called Ebola fund; in this bill, there is another \$230 million just for vaccine development at NIH. That is every penny that they asked us for. So they are getting actually more. They asked for \$270 million, and we are delivering \$270 million.

Mr. Speaker, I yield 2 minutes to the gentleman from Iowa (Mr. YOUNG), a member of the Appropriations Committee.

Mr. YOUNG of Iowa. I thank Chairman ROGERS for yielding, for his leadership, and for taking this seriously.

Mr. Speaker, I rise today in support of the Zika Response Appropriations Act. There is no question the Zika crisis presents a serious threat to our Nation's public health and an immediate, impactful response is required. The bill does such.

This important legislation provides funding immediately for the most pressing needs, including care for infants and mothers, vaccine development, and efforts to control the spread of the disease.

Mr. Speaker, let me be clear: this is not the final word on the fight against Zika. The funding level we are discussing today quickly and effectively funds much-needed efforts for the current fiscal year, 2016. It is an immediate response, while making progress on regular order as well. And we will fund fiscal year 2017 expenditures, so there will be more.

As has already been said, this bill is fully offset by using leftover funds to combat the Ebola outbreak and any unused administrative funds at the Department of Health and Human Services.

□ 2015

It is the responsible and thoughtful approach to an issue and mission we all agree on, right, combating Zika?

Some have argued the bill should fully fund the President's request. The fact that repurposed Ebola funds used to offset this bill remain unspent years later shows it is hard to predict how much it will cost to contain an outbreak, and where funds will be needed.

The House is acting quickly and responsibly, as we make repeated requests of the administration to share a detailed plan. Repeatedly, we have gotten incomplete responses. That is troubling.

The administration has no complete plan, but they want us to fund it. That is simply the wrong approach.

Though we pass this bill today, work will continue tomorrow on fully fund-

ing an effective and comprehensive plan to stop the Zika virus. We are doing this. As we gather the information, we need to move forward.

This bill responsibly and effectively provides the needed funding where the government is ready now to help those in need.

Mr. Speaker, we can argue about process in this Chamber all night, but that will do nothing to help the women and children facing very real health dangers caused by the Zika virus.

What will help them is passing this critical, targeted, and responsible legislation now, which provides needed funding now, where it can actually be used.

Subcommittee Chairmen COLE and GRANGER, thank you for your leadership on this issue. I urge my colleagues to support this important bill.

Mrs. LOWEY. Mr. Speaker, I am very pleased to yield 3 minutes to the articulate gentlewoman from Connecticut (Ms. DELAURO), the ranking member on the Subcommittee on Labor, Health and Human Services, Education, and Related Agencies, who has been very clear on the need to combat the Zika virus.

Ms. DELAURO. Mr. Speaker, this bill is woefully inadequate. The Zika virus is a public health emergency. It is a crisis.

Last week, 1,204 confirmed cases in the United States and its territories, over 100 of them pregnant women. One person has died.

Temperatures are rising already and reaching high levels in the United States in the areas where these mosquitoes thrive, and we are told that this could spread to 30 States.

The Olympics are less than 80 days away in Brazil. We are going to send our young men and women into harm's way.

The window for us to act on this effort is closing, and the majority's Zika Response Appropriations Act is too little. It is too late. It only provides a third of the President's request.

Without additional funding, the CDC will not be able to protect pregnant women by better understanding the link between Zika and adverse health effects. They will not be able to control and mitigate mosquito populations before the epidemic spreads further.

They lose laboratory capacity, they lose the ability of surveillance as the outbreak is moving on.

The most immediate needs of State and local public health departments are woefully underfunded by the House Republican bill. Our States' and our municipalities' emergency funds have been slashed.

Mr. Speaker, I include in the RECORD the list of all of the States in this country and the loss of preparedness funds in order to be able to deal with the crisis.

PHEP CUTS FROM ZIKA TRANSFER

Grantee	Cuts (dollars)	Cuts (%)	Grantee	Cuts (dollars)	Cuts (%)
Alabama	-613,733	-6.90	Montana	-139,375	-3.21
Alaska	-194,836	-4.63	N. Mariana Islands	-6,172	-1.72
American Samoa	-6,600	-1.82	Nebraska	-245,839	-4.58
Arizona	-915,853	-7.74	Nevada	-390,223	-5.77
Arkansas	-377,461	-5.70	New Hampshire	-187,880	-3.90
California	-3,979,850	-9.35	New Jersey	-1,303,734	-8.36
Chicago	-530,926	-5.42	New Mexico	-275,903	-4.09
Colorado	-706,343	-7.21	New York	-1,564,792	-7.90
Connecticut	-490,363	-6.35	New York City	-1,158,820	-6.27
Delaware	-143,256	-3.27	North Carolina	-1,240,926	-8.32
District of Columbia	-142,165	-2.23	North Dakota	-194,836	-4.63
Florida	-2,653,185	-9.00	Ohio	-1,548,159	-8.65
Georgia	-1,351,184	-8.44	Oklahoma	-499,358	-6.40
Guam	-19,345	-3.98	Oregon	-522,990	-6.51
Hawaii	-196,065	-4.01	Palau	-2,546	-0.78
Idaho	-211,568	-4.20	Pennsylvania	-1,716,179	-8.79
Illinois	-1,422,463	-8.51	Puerto Rico	-433,740	-6.06
Indiana	-872,687	-7.66	Rhode Island	-155,523	-3.45
Iowa	-393,286	-5.80	South Carolina	-605,876	-6.16
Kansas	-388,911	-5.77	South Dakota	-118,947	-2.87
Kentucky	-568,480	-6.72	Tennessee	-857,750	-7.62
Los Angeles	-1,575,170	-7.98	Texas	-3,598,615	-9.55
Louisiana	-613,015	-6.89	Utah	-380,115	-5.71
Maine	-177,231	-3.77	Vermont	-194,836	-4.63
Marshall Islands	-8,413	-2.21	Virgin Islands (US)	-12,633	-3.00
Maryland	-856,366	-7.60	Virginia	-1,149,940	-7.64
Massachusetts	-937,359	-7.14	Washington	-948,052	-7.81
Michigan	-1,310,210	-7.86	West Virginia	-242,010	-4.54
Micronesia	-12,798	-3.03	Wisconsin	-742,890	-6.41
Minnesota	-744,017	-6.61	Wyoming	-194,836	-4.63
Mississippi	-384,621	-5.74			
Missouri	-818,745	-7.52	TOTAL	44,250,000	7.23

Ms. DELAURO. While the administration requested \$743 million for CDC's public health activities, the House bill provides only \$120 million, 84 percent below the request.

Who are we kidding?

This is going to put millions of pregnant women in danger. According to the CDC, pregnant women are already facing unacceptably long delays in learning Zika test results.

Physicians are advising women not to get pregnant. Pregnant women are scared to death about what is going to happen to the child that they are carrying. Director Tom Frieden has said that experts estimate a single child with birth defects can cost \$10 million to care for.

We need to prevent this. And the amount of money that the majority has talked about is inadequate to prevent it. If each child takes \$10 million to care for, and we take a look at \$622 million, we are going to look at our ability to take care of 62 children who might be affected with microcephaly. This says nothing about what the child's quality of life is, the delays in learning to speak, to walk.

The SPEAKER pro tempore. The time of the gentlewoman has expired.

Mrs. LOWEY. Mr. Speaker, I yield the gentlewoman an additional 1 minute.

Ms. DELAURO. It is a delay in learning to speak, walk, hear and eat. Imagine.

But we can stop this crisis before it gets worse. We have to act now, and we have to fully fund the President's request. It is the responsible thing to do. More importantly, it is the moral thing to do.

Months from now, when the results of our inaction become apparent, we will ask ourselves, why did we delay? Why did we wait?

You know, I do not often quote Senator MARCO RUBIO, but yesterday he

said this about the House bill, and I quote: "Frankly, that's just not going to cut it. If we don't spend more than that on the front end, I think we are going to spend a lot more later because the problem is not going to go away."

I could not agree more. We need to act now. That is our responsibility.

The President's request was in February. It is now almost the end of May. People are suffering, and we have the power in this body to stop that.

Mr. ROGERS of Kentucky. Mr. Speaker, I yield 2 minutes to the gentleman from Ohio (Mr. JOYCE), a member of our committee.

Mr. JOYCE. Mr. Speaker, I rise today in support of H.R. 5243, the Zika Response Appropriations Act of 2016. I would like to acknowledge the thoughtful leadership of Chairman ROGERS on this matter.

The bill provides \$622.1 million for the Department of Health and Human Services, the State Department, and USAID, to fight and prevent the spread of the Zika virus. This funding will be available immediately. This funding is for this fiscal year only, available September 30, 2016. This funding is entirely offset.

Finally, the bill contains strong oversight measures to ensure responsible and effective use of taxpayer dollars. The resources provided in the bill are in addition to the \$589 million the Obama administration has already identified to repurpose to fight Zika. In other words, \$1.2 billion will be in place to combat the virus.

Please stand with me today in support of H.R. 5243.

Mrs. LOWEY. Mr. Speaker, may I ask how much time I have remaining?

The SPEAKER pro tempore. The gentlewoman from New York has 8½ minutes remaining. The gentleman from Kentucky has 4 minutes remaining.

Mrs. LOWEY. Mr. Speaker, I am pleased to yield 2 minutes to the gen-

tlewoman from Texas (Ms. JACKSON LEE).

Ms. JACKSON LEE. Mr. Speaker, let me thank the gentlewoman from New York and let me thank the chairman of the full committee, and let me thank the health scientists and doctors who have given us the real story of this case.

Mr. Speaker, the first Ebola case was in Texas, the first case in the United States. And the CDC says that we have not extinguished or eliminated Ebola.

The proposal today is not \$1.2 billion. It is \$600 million because you have taken \$600 million or so out of the Ebola. And the doctors indicate that there are about 8 clusters or more of Ebola in Africa, where 85 CDC personnel are there. And if one case breaks out, we will need 1,000 personnel to deal with it.

So what are we doing with the Zika funding if we are not providing the Centers for Disease Control what they need, \$10 million to care for a child?

They do not have the tools in order to do it. They cannot. People carrying the Zika virus do not know that they have the Zika virus and, as well, they have asked for \$800 million, which you are not giving to them.

This is the epicenter of the potential of the Zika virus in the United States.

The idea that there is sitting water in places like the Gulf region, the idea that people travel, and the person who is traveling has a mosquito that bites them, and then they—that mosquito can transmit it.

Here are the mosquito cesspools in Houston, Texas.

So today I stand in opposition to the underlying proposal. We need the \$1.9 billion that the administration has asked for. We cannot rob from Peter to pay Paul.

If you listen to the diagnosis, or you listen to the assessment, the doctors are saying that the Zika virus invades

the brain of the baby and destroys that brain and, therefore, we do not know the long-term effects of a woman or of those who have not yet been assessed of the Zika virus.

This is the wrong way to go. Vote against this bill. Give what the President wants and the CDC wants now.

Mr. Speaker, I rise to speak in opposition to H.R. 5243, the "Zika Response Appropriations Act of 2016," because this appropriations measure falls short of what is needed to aggressively address the enormity of the Zika Virus threat to the Americas and the United States, with particular concern for Puerto Rico.

I thank President Obama for his leadership in requesting \$1.9 billion to address the threat of the Zika Virus, and facing congressional delay he took funds from Ebola response to prepare the nation to face the Zika Virus threat.

Let us not forget—Ebola was on our doorstep last year before Congress acted and there are still Ebola hot spots that are occurring, which have to be addressed, but we now lack the resources to deal with that ever present threat.

I am committed to doing everything I can to address the threat of Zika Virus, but I am not supportive of tricks or misguided strategies to get legislation to the House floor in the name of Zika prevention that will do too little; and funding that will abruptly end on September 30, 2016.

As the founder and Chair of the Children's Caucus and a senior member of the House Committee on Homeland Security, I am acutely aware of how dangerous the Zika Virus is to women who may be pregnant or may become pregnant should they be exposed to the Caribbean.

Houston, Texas, like many cities, towns, and parishes along the Gulf Coast, has a tropical climate hospitable to mosquitoes that carry the Zika Virus like parts of Central and South America, as well as the Caribbean.

For this reason, I am sympathetic to those members who have districts along the Gulf Coast.

These Gulf Coast areas, which include Houston, the third largest city in the nation, are known to have both types of the Zika Virus carrying mosquitoes: the *Aedes Aegypti* the Asian Tiger Mosquito; which is why I held a meeting in Houston on March 10, 2016 about this evolving health threat.

I convened this meeting with Houston, Harris County and State officials at every level of responsibility to combat the Zika Virus and to discuss preparations that would mitigate its.

The participants included Dr. Peter Hotez, Dean of the National School of Tropical Medicine and Professor of Pediatrics at Baylor College of Medicine and Dr. Dubboun, Director of the Harris County Public Health Environmental Services Mosquito Control Division who gave strong input on the critical need to address the threat on a multi-pronged approach.

The potential for the Zika Virus outbreaks in the United States if we do not act is real, and the people on the front lines are state and local governments who must prepare for mosquito season, establish community oriented education campaigns, provide Zika Virus prevent resources to women who live in areas where poverty is present, and environmental remediation of mosquito breeding near where people live.

The assumption that everyone has air conditioning; window and door screens that are in good repair or present at all; does not take into consideration the pockets of poverty that are present in every major city including many towns, counties, parishes, and cities along the Gulf Coast.

The 18th Congressional District of Texas, which I represent, has a tropical climate and is very likely to confront the challenge of Zika Virus carrying mosquitoes before mosquito season ends in the fall.

Mr. Dubboun, Director of the Harris County Public Health Environmental Services Mosquito Control Division stressed that we cannot spray our way out of the Zika Virus threat.

He was particularly cautious about the over use of spraying because of its collateral threat to the environment and people.

We should not forget that Flint, Michigan was an example of short-sighted thinking on the part of government decision makers, which resulted in the contamination of that city's water supply.

The participants in the meeting I held in Houston represented the senior persons at every state and local agency with responsibility for Zika Virus response.

The expert view of those present was that we need a unity of effort plan to address the Zika Virus in the Houston and Harris County area that will include every aspect of the community.

The collective wisdom of these experts revealed that we should not let the fear of the Zika Virus control public policy.

Instead we should get in front of the problem then we can control the Zika Virus from its source—targeting mosquito breeding environments.

The real fight against the Zika Virus will be fought neighborhood by neighborhood and will rely upon the resources and expertise of local government working closely with State governments supported by federal government agencies.

The consensus of Texas, Houston, and Harris County experts is that we make significant strides to stay ahead of the arrival of mosquito transmission of Zika Virus if we act now.

The CDC said that for the period January 1, 2015 to May 11, 2016, the number of cases are as follows:

THE UNITED STATES

Travel-associated cases reported: 503
Locally acquired through mosquito bites reported: 0

Total: 503
Pregnant: 48
Sexually transmitted: 10
Guillain-Barré syndrome: 1

US TERRITORIES

Travel-associated cases reported: 3
Mosquito acquired cases reported: 698
Total: 701

Pregnant: 65
Guillain-Barré syndrome: 5

There are 49 countries and territories in our hemisphere where mosquito borne transmission of the Zika Virus is the primary way the virus is spread include:

American Samoa; Aruba; Belize; Barbados; Bolivia; Brazil; Bonaire; Cape Verde; Central America; Colombia; Costa Rica; Cuba; Curaçao; Dominica; Dominican Republic; El Salvador; Ecuador; Fiji; French Guiana; Grenada; the Grenadines; Guatemala; Guadeloupe; Haiti; Honduras; Islands Guyana; Ja-

maica; Martinique; Kosrae (Federated States of Micronesia); Marshall Islands; Mexico; Nicaragua; New Caledonia; the Commonwealth of Puerto Rico, Panama; Papua New Guinea, Paraguay; Peru; Samoa, a US territory; Saint Barthelemy; Saint Lucia; Saint Martin; Saint Vincent; Saint Maarten; Suriname; Tonga; Trinidad and Tobago; US Virgin Islands, Venezuela and particular note is made by the CDC by listing the 2016 Summer Olympics (Rio 2016) separately.

As of May 11, 2016, there were more than 1,200 confirmed Zika cases in the continental United States and U.S. Territories, including over 110 pregnant women with confirmed cases of the Zika virus.

The Zika virus is spreading in Puerto Rico, the U.S. Virgin Islands, American Samoa and abroad, and there will likely be mosquito-borne transmission within the continental United States in the coming summer months.

The most important approach to control the spread of Zika Virus is poverty and the conditions that may exist in poor communities can be of greatest risk for the Zika Virus breeding habitats for vector mosquitoes.

The spread of disease is opportunistic—Zika Virus is an opportunistic disease that is spread by 2 mosquitoes out of the 57 varieties.

We should be planning to fight those 2 mosquitoes in a multi-pronged way with every resource we can bring to the battle.

SOURCES OF ZIKA VIRUS SPREAD

Poverty is where the mosquito will find places to breed in great numbers, but these mosquitoes will not be limited to low income areas nor does the disease does not care how much someone earns.

The *Aedes Aegypti* or Yellow Fever mosquito has evolved to feed on people for the blood needed to lay its eggs.

This mosquito can breed in as little as a cap of dirty water; it will breed in aquariums in homes; pant water catching dishes; the well of discarded tires; puddles or pools of water; ditches; and children's wading pools;

Although water may evaporate mosquito eggs will remain viable and when it rains again or water is placed where they are the process for mosquitos development resumes.

Our enemies are those who illegal dump tires; open ditches, torn screens, or no screens; tropical climates that create heat and humidity that force people without air conditioning to open windows or face heat exhaustion.

THE BATTLE AGAINST THE ZIKA VIRUS

It might be hard for people who do not live in the tropical climates along the Gulf Coast to understand what a heat index is—it is a combination of temperature and humidity, which can mean that temperatures in summer are over 100 degrees.

Zika Virus Prevention Kits like those being distributed in Puerto Rico, which are vital to the effort there to protect women, will be essential to the fight against Zika Virus along the Gulf Coast.

These kits should include mosquito nets for beds.

Bed nets have proven to be essential in the battle to reduce malaria by providing protection and reducing the ability of biting insects to come in contact with people.

Mosquito netting has fine holes that are big enough to allow breezes to easily pass through, but small enough to keep mosquitoes and other biting insects out.

The kits should also include DEET mosquito replant products that can be sprayed on clothing to protect against mosquito bites.

Mr. Speaker, we should be preparing aggressively so that this nation does not have a reoccurrence of what happened during the Ebola crisis—when the Federal government seemed unprepared because this Congress was unmoved by the science, until domestic transmission of the disease were recorded.

WHAT WE KNOW ABOUT THE ZIKA VIRUS

The Zika Virus is a neurogenic virus that can attack the brain tissue of children in their mother's womb.

The Zika Virus will be difficult to detect and track in all cases because 4 in 5 people who get the disease will have no symptoms.

We know that 33 states have one or both of the vector mosquitoes.

Dr. Peter Hotez said that we can anticipate that the Americas including the United States can expect 4 million the Zika Virus cases in the next four months and to date there are over a million cases in Brazil.

The virus has been transmitted through sexual contact.

We know that evidence of the Zika Virus in newborns in the United States may not become apparent until we are in the late fall or winter of next year.

The most serious outcome the Zika Virus exposure is birth defects that can occur during pregnancy if the mother is exposed to the Zika Virus.

Infections of pregnant women can result in:
Still births;

The rate of Microcephaly based on Zika Virus exposure far exceeds that number.

Microcephaly is brain underdevelopment either at birth or the brain failing to develop properly after birth, which can cause:

Difficulty walking;
Difficulty hearing; and
Difficulty with speech.

WHAT WE DO NOT KNOW

Researchers and scientists at the CDC; NIH and HHS do not know how the disease attacks the nervous system of developing babies.

They cannot answer what the long term health prospects are for children born with such a severe brain birth defect.

They have not discovered the right vaccine to fight the disease—which requires care to be sure that it is safe and effective especially in pregnant women or women who may become pregnant.

They do not know what plan will work and to what degree if any a tight network of mosquito control established in areas most likely to have the Zika Virus carrying mosquitoes will work as well.

How the Zika Virus may evolve over time and what they may mean for human health.

I urge my colleagues to reject H.R. 5243, and support the President's request for \$1.9 billion to fight the Zika Virus threat.

Mr. ROGERS of Kentucky. Mr. Speaker, I yield 2 minutes to the gentleman from Maryland (Mr. HARRIS), a member of our committee and a medical physician.

Mr. HARRIS. Mr. Speaker, I agree with the gentlewoman from Texas. We should be thankful for the scientists we have, whether it is at the CDC, whether it is at the NIH, those public health officials who are going to make sure that

the mosquito control occurs that is necessary, to those who are at BARDA and other agencies where we develop the vaccines that are necessary, and do the necessary research.

This House bill, in distinction to the President's request, is targeted and well thought out. This bill deals just with Zika. The President's request didn't. It dealt with whatever other infectious disease comes down the road. Yet, Zika is what is in front of us now.

Mr. Speaker, it is going to take 2 to 3 years to complete the necessary research and to complete the vaccine development and bring it to market.

This bill deals with the needs over the next 6 months. The administration requested a total of about \$1.6 billion in research, because there is about \$300 million that has nothing to do, really, with researching and curing Zika. So it is \$1.6 billion over 3 years.

The House took the position we actually need to front-load that. We need to deal with this fiscal year, so we put together a package of \$1.2 billion to be spent over the next 6 months to make sure that we start the necessary research, we start the vaccine development, and deal with those outyears through the normal appropriations process which is going to take place over the next 2 years.

So our approach is actually a much more valid approach, targeted, well thought out, will provide all the necessary funds to the CDC, NIH, for the vaccine development and the mosquito control over the next 6 months, when we need it most, and then add additional funds as necessary, as science learns more about what we need.

We can't possibly know what we need now. The administration put a request without possibly knowing what we need 2 or 3 years in the future. We will find out what we need and we will add those.

Mr. Speaker, this is the right approach. This is actually more money up front than the administration has asked for, which is exactly the correct approach to deal with this imminent threat to the health of U.S. citizens here and in Puerto Rico.

Mrs. LOWEY. Mr. Speaker, I am pleased to yield 1 minute to the distinguished gentleman from California (Mr. RUIZ).

Mr. RUIZ. Mr. Speaker, as an emergency medicine physician and a public health expert myself, I rise today to strongly oppose this inadequate Zika funding bill, and to urge my colleagues to fully fund our Nation's efforts to fight the Zika virus.

In the emergency department, you don't just partially treat a patient. This is called negligence. You don't just take out a third of the cancer. You don't just give a third of the antibiotic dose for a severe pneumonia.

Mr. Speaker, this bill is less than a third of what is needed to treat and protect women and their children from the Zika virus. It is less than a third of the prescription from the CDC and the

experts needed to protect American families from Zika.

Tomorrow I am voting "no" because I demand that we fully fund efforts to protect families, pregnant women and their children from Zika.

Mr. Speaker, time is past due for you to do your job and address the Zika virus threat. We must completely fund efforts to protect American families from Zika. The American people deserve no less.

Mr. ROGERS of Kentucky. Mr. Speaker, I reserve the balance of my time.

□ 2030

Mrs. LOWEY. Mr. Speaker, I yield 1½ minutes to the gentlewoman from Florida (Ms. GRAHAM).

Ms. GRAHAM. Mr. Speaker, more than 120 Members and every Democrat of the Florida delegation have asked for a vote on fully funding the fight against Zika.

In Florida, we have had more than 100 recorded cases of Zika. There is no doubt we are in the midst of a public health emergency. There are pregnant women who are afraid to go out at night. As a mom myself, I am worried about my own daughter and her future. Our State's tourism industry counts on thousands and thousands of people traveling to Florida. Those provide thousands of jobs, and millions of dollars flow into our economy. All of that is at risk.

We can't wait, and we shouldn't be forced to fight this virus with one hand tied behind our back.

Scientists and our public health officials have asked for \$1.9 billion. We should stop playing games, Mr. Speaker, and fulfill the request.

Mr. ROGERS of Kentucky. Mr. Speaker, I reserve the balance of my time.

Mrs. LOWEY. Mr. Speaker, I yield myself the balance of my time.

I would like to repeat again, as a Member who has been in this House and has had the privilege of being part of many responses to emergencies, this is an emergency.

In last year's omnibus, Congress used emergency funding without offsets to pay for wildland fire suppression mostly in the West. Congress provided emergency funding to respond to two hurricanes and flooding in the Carolinas and Texas, again without offsets.

When those disasters struck, my colleagues, we didn't steal money from prior disaster response like the emergency funding provided for hurricane damage in Louisiana, Mississippi, Alabama, and Florida, storms in West Virginia, and tornadoes in Oklahoma and Kentucky. We paid for those emergencies. We did not steal from any other account, my colleagues.

In fact, after the 2013 Oklahoma tornadoes, my friend, Chairman ROGERS, told reporters: "I don't think disasters of this type should be offset. We have an obligation to help these people."

So, my friends, I just want to emphasize again, we have a crisis. We have

people suffering. The potential is enormous. These are Americans. These are citizens. Whether it is here or in Puerto Rico, we have a responsibility to respond.

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

Mr. ROGERS of Kentucky. Mr. Speaker, I yield myself the balance of my time.

Mr. Speaker, for those who are concerned that this is not an adequate amount of money at the right time, let me just say this. The money that the President requested of us, the \$1.9 billion, was for the balance of this year and all of next year—17½ months, \$1.9 billion.

In this bill, plus what we earlier forced them to put into these matters, almost \$600 million, that \$600 million, this \$622 million is just for 4½ months, from now until the end of the fiscal year. I say that is more than adequate. If there is more needed, when the regular appropriations bills come up for fiscal year 2017, you heard Chairman COLE and Chairman GRANGER say we will put in the hopper whatever is needed at that time. So this is wholly adequate. It is more than adequate in terms of money.

Now, for those who are concerned about whether or not we are taking too much money away from Ebola, in the first place, that fund is not just for Ebola. When it was created 2 years ago, it was for Ebola and other infectious diseases. That is what we are dealing with here. We are asking the administration to use that money. This is an infectious disease. You have got over \$2 billion laying there unused left over from what was not spent in eradicating Ebola.

By the way, the World Health Organization now says that Ebola is no longer an international emergency.

So the money in the so-called Ebola—I call it the infectious disease account—that money is available and needs to be spent now. That is what we told the President shortly after he said he was going to send us a supplemental request. We said to use the money you have.

Finally, they did spend \$589 million of that. Now we are adding to that with some \$622 million. So there is plenty of money there. There is plenty of money left in the till of the infectious disease account if it is needed for Ebola or anything else. There is upwards of \$2 billion laying there unused.

Mr. Speaker, I urge the adoption of the bill.

I yield back the balance of my time.

The SPEAKER pro tempore. All time for debate has expired.

Pursuant to House Resolution 736, the previous question is ordered on the bill.

The question is on the engrossment and third reading of the bill.

The bill was ordered to be engrossed and read a third time, and was read the third time.

MOTION TO RECOMMIT

Ms. CASTOR of Florida. Mr. Speaker, I have a motion to recommit at the desk.

The SPEAKER pro tempore. Is the gentlewoman opposed to the bill?

Ms. CASTOR of Florida. I am opposed to the bill.

The SPEAKER pro tempore. The Clerk will report the motion to recommit.

The Clerk read as follows:

Ms. Castor of Florida moves to recommit H.R. 5243 to the Committee on Appropriations and Committee on the Budget with instructions to report the same to the House forthwith with the following amendment:

Strike all after the enacting clause and insert the following:

TITLE I

DEPARTMENT OF HEALTH AND HUMAN SERVICES

FOOD AND DRUG ADMINISTRATION SALARIES AND EXPENSES

For an additional amount for “Salaries and Expenses”, \$10,000,000, to remain available until expended, to prevent, prepare for, and respond to Zika virus, other vector-borne diseases, or other infectious diseases and related health outcomes, domestically and internationally, and to develop necessary medical countermeasures and vaccines, including the review, regulation, and post market surveillance of vaccines and therapies, and administrative activities: *Provided*, That such amount is designated by the Congress as an emergency requirement pursuant to section 251(b)(2)(A)(i) of the Balanced Budget and Emergency Deficit Control Act of 1985, except that such amounts shall be available only if the President subsequently so designates such amounts and transmits such designation to the Congress.

CENTERS FOR DISEASE CONTROL AND PREVENTION

CDC-WIDE ACTIVITIES AND PROGRAM SUPPORT

(INCLUDING TRANSFER OF FUNDS)

For an additional amount for “CDC-Wide Activities and Program Support”, \$743,000,000, to remain available until expended, to prevent, prepare for, and respond to Zika virus, other vector-borne diseases, or other infectious diseases and related health outcomes, domestically and internationally; and to carry out titles II, III, and XVII of the Public Health Service (“PHS”) Act with respect to domestic preparedness and global health: *Provided*, That products purchased with these funds may, at the discretion of the Secretary of Health and Human Services, be deposited in the Strategic National Stockpile under section 319F-2 of the PHS Act: *Provided further*, That funds may be used for purchase and insurance of official motor vehicles in foreign countries: *Provided further*, That the provisions in section 317S of the PHS Act shall apply to the use of funds appropriated under this heading as determined by the Director of the Centers for Disease Control and Prevention (“CDC”) to be appropriate: *Provided further*, That funds appropriated under this heading may be used for grants for the construction, alteration, or renovation of nonfederally owned facilities to improve preparedness and response capability at the State and local level: *Provided further*, That funds appropriated under this heading may be used for acquisition of real property (including long-term ground leases) and equipment, and construction, demolition, or renovation of facilities, including construction on leased land: *Provided*

further, That funds appropriated under this heading may be transferred by the Director of CDC to other accounts of the CDC for the purposes provided under this heading: *Provided further*, That such transfer authority is in addition to any other transfer authority provided by law: *Provided further*, That, upon a determination that all or part of the funds transferred from this appropriation are not necessary for the purposes provided herein, such amounts may be transferred back to this appropriation: *Provided further*, That such amount is designated by the Congress as an emergency requirement pursuant to section 251(b)(2)(A)(i) of the Balanced Budget and Emergency Deficit Control Act of 1985, except that such amounts shall be available only if the President subsequently so designates such amounts and transmits such designation to the Congress.

NATIONAL INSTITUTES OF HEALTH NATIONAL INSTITUTE OF ALLERGY AND INFECTIOUS DISEASES

For an additional amount for “National Institute of Allergy and Infectious Diseases”, \$277,000,000, to remain available until expended, to prevent, prepare for, and respond to Zika virus, other vector-borne diseases, or other infectious diseases and related health outcomes, domestically and internationally, including expenses related to carrying out section 301 and title IV of the PHS Act: *Provided*, That such funds may be transferred by the Director of the National Institutes of Health (“NIH”) to other accounts of the NIH for the purposes provided under this heading: *Provided further*, That such transfer authority is in addition to any other transfer authority provided by law: *Provided further*, That, upon a determination that all or part of the funds transferred from this appropriation are not necessary for the purposes provided herein, such amounts may be transferred back to this appropriation: *Provided further*, That such amount is designated by the Congress as an emergency requirement pursuant to section 251(b)(2)(A)(i) of the Balanced Budget and Emergency Deficit Control Act of 1985, except that such amounts shall be available only if the President subsequently so designates such amounts and transmits such designation to the Congress.

OFFICE OF THE SECRETARY PUBLIC HEALTH AND SOCIAL SERVICES EMERGENCY FUND

(INCLUDING TRANSFER OF FUNDS)

For an additional amount for “Public Health and Social Services Emergency Fund”, \$233,000,000, to remain available until expended, to prevent, prepare for, and respond to Zika virus, other vector-borne diseases, or other infectious diseases and related health outcomes, domestically and internationally; to develop necessary countermeasures and vaccines, including the development and purchase of vaccines, therapeutics, diagnostics, necessary medical supplies, and administrative activities; for carrying out titles II, III, and XVII of the PHS Act with respect to domestic preparedness and global health; and for carrying out title III of the PHS Act and title V of the Social Security Act to provide health care and related services in areas affected by Zika virus: *Provided*, That funds appropriated under this heading may be used to procure security countermeasures (as defined in section 319F-2(c)(1)(B) of the PHS Act, as amended by this Act): *Provided further*, That paragraphs (1) and (7)(C) of subsection (c) of section 319F-2 of the PHS Act, but no other provisions of such section, shall apply to such security countermeasures procured with funds appropriated under this heading: *Provided further*, That products purchased with funds appropriated under this heading

may, at the discretion of the Secretary of Health and Human Services, be deposited in the Strategic National Stockpile under section 319F-2 of the PHS Act: *Provided further*, That funds appropriated under this heading may be transferred to the Covered Countermeasure Process Fund established under section 319F-4 of the PHS Act: *Provided further*, That funds appropriated under this heading may, for purposes of providing primary health services in areas affected by Zika virus, other vector-borne diseases, or other infectious diseases, be used to assign National Health Service Corps (“NHSC”) members to Puerto Rico and other territories, notwithstanding the assignment priorities and limitations in or under sections 333(a)(1)(D), 333(b), or 333A(a) of the PHS Act, and to make National Health Service Corps Loan Repayment Program awards under section 338B of such Act: *Provided further*, That funds may be awarded for projects of regional and national significance in Puerto Rico and other territories authorized under section 501 of the Social Security Act, notwithstanding section 502 of such Act: *Provided further*, That funds may be used for the alteration or renovation of nonfederally owned facilities to improve preparedness and response capability at the State and local level: *Provided further*, That funds appropriated under this heading may be transferred to other appropriations of the Department of Health and Human Services, as determined by the Secretary to be appropriate, to be used for the purposes specified under this heading: *Provided further*, That any transfers of these funds shall be made in consultation with the Office of Management and Budget: *Provided further*, That the transfer authority provided under this heading is in addition to any other transfer authority provided by law: *Provided further*, That, upon a determination that all or part of the funds transferred from this appropriation are not necessary for the purposes provided herein, such amounts may be transferred back to this appropriation: *Provided further*, That such amount is designated by the Congress as an emergency requirement pursuant to section 251(b)(2)(A)(i) of the Balanced Budget and Emergency Deficit Control Act of 1985, except that such amounts shall be available only if the President subsequently so designates such amounts and transmits such designation to the Congress.

GENERAL PROVISIONS

(INCLUDING TRANSFER OF FUNDS)

SEC. 101. For purposes of preventing, preparing for, and responding to Zika virus, other vector-borne diseases, or other infectious diseases and related health outcomes domestically and internationally, the Secretary of Health and Human Services may use funds provided in this Act—

(1) to acquire, lease, construct, alter, renovate, equip, furnish, or manage facilities outside of the United States, as necessary to conduct such programs, in consultation with the Secretary of State, either directly for the use of the United States Government or for the use, pursuant to grants, direct assistance, or cooperative agreements, of public or nonprofit private institutions or agencies in participating foreign countries; and

(2) to enter into contracts with individuals for the provision of personal services (as described in section 37.104 of title 48, Code of Federal Regulations) within the United States and abroad: *Provided*, That such individuals may not be deemed employees of the United States for the purpose of any law administered by the Office of Personnel Management.

SEC. 102. Section 3304 of title 5, United States Code, is amended by adding at the end the following new subsection:

“(g) The heads of the Department of Health and Human Services, Department of State, and the Agency for International Development may appoint, without regard to the provisions of sections 3309 through 3319, candidates needed for positions to perform critical work in direct response to a public health threat requiring an immediate response for which—

“(1) public notice has been given; and

“(2) the Secretary of Health and Human Services has determined that such a public health threat exists.”.

SEC. 103. Funds appropriated by this Act may be used to reimburse accounts administered by the Department of Health and Human Services for obligations incurred for Zika virus response prior to the date of the enactment of this Act.

SEC. 104. Funds appropriated to the Department of Health and Human Services in this Act may be transferred to and merged with other Federal accounts for purposes specified in this Act following consultation with the Office of Management and Budget: *Provided*, That such transfer authority shall be in addition to any other transfer authority provided by law: *Provided further*, That, upon a determination that all or part of funds so transferred from an account are not necessary, such amounts may be transferred back to that account.

SEC. 105. Section 319F-2(c)(1)(B) of the Public Health Service Act (42 U.S.C. 247f-6b(c)(1)(B)) is amended—

(1) in clause (i)(III)(bb), by striking “; or” and inserting a semicolon;

(2) in clause (ii), by striking the period and inserting “; or”; and

(3) by adding at the end the following new clause:

“(iii)(I) the Secretary determines to be a necessary countermeasure to diagnose, mitigate, prevent, or treat harm from any infectious disease that may pose a threat to the public health; and

“(II)(aa) is approved or cleared under chapter V of the Federal Food, Drug, and Cosmetic Act, or licensed under section 351 of this Act; or

“(bb) is a countermeasure for which the Secretary determines that sufficient and satisfactory clinical experience or research data (including data, if available, from pre-clinical and clinical trials) support a reasonable conclusion that the countermeasure will qualify for approval or licensing within 10 years after the date of a determination under subclause (I).”.

SEC. 106. (a)(1) For purposes of title XIX of the Social Security Act, for the one-year period beginning with the first day of the first full fiscal quarter following the date of the enactment of this section, the Federal medical assistance percentage (“FMAP”) under section 1905(b) of such Act for the territories specified in paragraph (2) shall be increased from 55 percent to 65 percent. Any net increase in payment to such a territory under section 1903(a) of such Act, which is attributable to such increased FMAP, shall be disregarded in applying sections 1108(f) and 1108(g) of such Act to the territory.

(2) The territories specified in this paragraph are the Commonwealth of Puerto Rico, the United States Virgin Islands, Guam, American Samoa, and the Northern Mariana Islands.

(b) With respect to the amount needed for purposes of implementing the increased FMAP under subsection (a) for each of fiscal years 2016 and 2017, such amount is designated by the Congress as an emergency requirement pursuant to section 251(b)(2)(A)(i) of the Balanced Budget and Emergency Deficit Control Act of 1985, except that such amounts shall be available only if the President subsequently so designates such

amounts and transmits such designation to the Congress.

TITLE II

DEPARTMENT OF STATE

ADMINISTRATION OF FOREIGN AFFAIRS DIPLOMATIC AND CONSULAR PROGRAMS

For an additional amount for “Diplomatic and Consular Programs”, \$14,594,000, to remain available until September 30, 2017, for necessary expenses to support response efforts related to the Zika virus and related health outcomes, other vector-borne diseases, or other infectious diseases: *Provided*, That up to \$2,419,000 may be made available for medical evacuation costs of any other Department or agency of the United States under the chief of mission authority, and may be transferred to any other appropriation of such Department or agency for such costs: *Provided further*, That such amount is designated by the Congress as an emergency requirement pursuant to section 251(b)(2)(A)(i) of the Balanced Budget and Emergency Deficit Control Act of 1985, except that such amounts shall be available only if the President subsequently so designates such amounts and transmits such designation to the Congress.

EMERGENCIES IN THE DIPLOMATIC AND CONSULAR SERVICE

For an additional amount for “Emergencies in the Diplomatic and Consular Services”, \$4,000,000 for necessary expenses to support response efforts related to the Zika virus and related health outcomes, other vector-borne diseases, or other infectious diseases, to remain available until expended: *Provided*, That such amount is designated by the Congress as an emergency requirement pursuant to section 251(b)(2)(A)(i) of the Balanced Budget and Emergency Deficit Control Act of 1985, except that such amounts shall be available only if the President subsequently so designates such amounts and transmits such designation to the Congress.

REPATRIATION LOANS PROGRAM ACCOUNT

For an additional amount for “Repatriation Loans Program Account” for the cost of direct loans, \$1,000,000, to support the response efforts related to the Zika virus and related health outcomes, other vector-borne diseases, or other infectious diseases, to remain available until expended: *Provided*, That such costs, including the cost of modifying such loans, shall be as defined in section 502 of the Congressional Budget Act of 1974: *Provided further*, That such funds are available to subsidize an additional amount of gross obligations for the principal amount of direct loans not to exceed \$1,880,406: *Provided further*, That such amount is designated by the Congress as an emergency requirement pursuant to section 251(b)(2)(A)(i) of the Balanced Budget and Emergency Deficit Control Act of 1985, except that such amounts shall be available only if the President subsequently so designates such amounts and transmits such designation to the Congress.

UNITED STATES AGENCY FOR INTERNATIONAL DEVELOPMENT FUNDS APPROPRIATED TO THE PRESIDENT

OPERATING EXPENSES

For an additional amount for “Operating Expenses”, \$10,000,000, to remain available until September 30, 2017, for necessary expenses to support response efforts related to the Zika virus and related health outcomes, other vector-borne diseases, or other infectious diseases: *Provided*, That such amounts are designated by the Congress as an emergency requirement pursuant to section

251(b)(2)(A)(i) of the Balanced Budget and Emergency Deficit Control Act of 1985, except that such amounts shall be available only if the President subsequently so designates such amounts and transmits such designation to the Congress.

**BILATERAL ECONOMIC ASSISTANCE
FUNDS APPROPRIATED TO THE
PRESIDENT**

GLOBAL HEALTH PROGRAMS

For an additional amount for “Global Health Programs”, \$325,000,000, to remain available until expended, for necessary expenses for assistance or research to prevent, treat, or otherwise respond to the Zika virus and related health outcomes, other vector-borne diseases, or other infectious diseases: *Provided*, That funds appropriated under this heading may be made available for multi-year funding commitments to incentivize the development of global health technologies: *Provided further*, That such amounts are designated by the Congress as an emergency requirement pursuant to section 251(b)(2)(A)(i) of the Balanced Budget and Emergency Deficit Control Act of 1985, except that such amounts shall be available only if the President subsequently so designates such amounts and transmits such designation to the Congress.

**INTERNATIONAL SECURITY ASSISTANCE
DEPARTMENT OF STATE**

**NONPROLIFERATION, ANTI-TERRORISM,
DEMINE AND RELATED PROGRAMS**

For an additional amount for “Nonproliferation, Anti-Terrorism, Demining and Related Programs”, \$8,000,000, to remain available until September 30, 2017, for necessary expenses to support response and research efforts related to the Zika virus and related health outcomes, other vector-borne diseases, or other infectious diseases: *Provided*, That such amounts are designated by the Congress as an emergency requirement pursuant to section 251(b)(2)(A)(i) of the Balanced Budget and Emergency Deficit Control Act of 1985, except that such amounts shall be available only if the President subsequently so designates such amounts and transmits such designation to the Congress.

**MULTILATERAL ASSISTANCE
FUNDS APPROPRIATED TO THE
PRESIDENT**

**INTERNATIONAL ORGANIZATIONS AND
PROGRAMS**

For an additional amount for “International Organizations and Programs”, \$13,500,000, to remain available until September 30, 2017, for necessary expenses to support response and research efforts related to the Zika virus and related health outcomes, other vector-borne diseases, or other infectious diseases: *Provided*, That such amounts are designated by the Congress as an emergency requirement pursuant to section 251(b)(2)(A)(i) of the Balanced Budget and Emergency Deficit Control Act of 1985, except that such amounts shall be available only if the President subsequently so designates such amounts and transmits such designation to Congress.

GENERAL PROVISIONS

**USE OF EBOLA BALANCES FOR OTHER
INFECTIOUS DISEASES**

SEC. 201. Unobligated balances of amounts appropriated under title IX of the Department of State, Foreign Operations, and Related Programs Appropriations Act, 2015 (division J of Public Law 113-235) shall also be available for necessary expenses for operations, assistance, or research to prevent, treat, or otherwise respond to the Zika virus and related health outcomes, other vector-borne diseases, or other infectious diseases:

Provided, That amounts repurposed pursuant to this section are designated by the Congress as an emergency requirement pursuant to section 251(b)(2)(A)(i) of the Balanced Budget and Emergency Deficit Control Act of 1985, except that such amounts shall be available only if the President subsequently so designates such amounts and transmits such designation to the Congress.

TRANSFER AUTHORITY

SEC. 202. (a) Funds appropriated by this title under the headings “Global Health Programs”, “Nonproliferation, Anti-Terrorism, Demining and Related Programs”, “International Organizations and Programs”, and “Operating Expenses” may be transferred to, and merged with, funds appropriated by this title under such headings to carry out the purposes of this Act.

(b) Funds appropriated by this title under the headings “Diplomatic and Consular Programs”, “Emergencies in the Diplomatic and Consular Service”, and “Repatriation Loans Program Account” may be transferred to, and merged with, funds appropriated by this title under such headings to carry out the purposes of this Act.

(c) The transfer authorities provided by this section are in addition to any other transfer authority provided by law.

(d) Upon a determination that all or part of the funds transferred pursuant to the authorities provided by this section are not necessary for such purposes, such amounts may be transferred back to such appropriations

REIMBURSEMENT AUTHORITY

SEC. 203. Funds appropriated by this Act may be used to reimburse accounts administered by the United States Agency for International Development and the Department of State for obligations incurred for Zika virus response prior to the date of the enactment of this Act.

**AVAILABILITY OF FUNDS FOR INTERNATIONAL
ORGANIZATIONS**

SEC. 204. Section 307(a) of the Foreign Assistance Act of 1961 shall not apply to funds appropriated by this Act.

NOTWITHSTANDING AUTHORITY

SEC. 205. Funds appropriated or otherwise made available under this Act and prior Acts making appropriations for the Department of State, Foreign Operations, and Related Programs that are made available to support Zika virus response and related activities may be made available notwithstanding any other provision of law.

PERSONAL SERVICE CONTRACTORS

SEC. 206. Funds available in this Act to support response efforts related to the Zika virus and related health outcomes, other vector-borne diseases, or other infectious diseases may be used to enter into contracts with individuals for the provision of personal services (as described in section 37.104 of title 48, Code of Federal Regulations) in the United States or abroad: *Provided*, That such individuals may not be deemed employees of the United States for the purpose of any law administered by the Office of Personnel Management.

Ms. CASTOR of Florida (during the reading). Mr. Speaker, I ask unanimous consent that the reading be dispensed with.

Mr. ROGERS of Kentucky. Mr. Speaker, I reserve a point of order on the gentlewoman’s motion.

The SPEAKER pro tempore. A point of order is reserved.

Is there objection to the request of the gentlewoman from Florida?

There was no objection.

The SPEAKER pro tempore. The gentlewoman from Florida is recognized for 5 minutes in support of her motion.

Ms. CASTOR of Florida. Mr. Speaker and Members, this is the final amendment to the bill. It will not kill the bill or send it back to committee. We don’t have time for that. If it is adopted, the bill will immediately proceed to final passage, as amended.

Mr. Speaker, America has a public health emergency at its doorstep, and it requires a robust and urgent response. Yet the Republican bill utterly fails to deal with the emergency posed by the rapidly spreading Zika virus, and it leaves our neighbors and our communities at risk.

So the amendment I am offering today provides the resources requested by our public health experts and researchers to combat Zika, the \$1.9 billion to help prevent, detect, and respond to Zika in contrast to the paltry \$622 million in the Republican bill.

I would like to thank Mrs. LOWEY, Ms. DELAURO, Ms. WASSERMAN SCHULTZ, Ms. GRAHAM, Mr. RUIZ, and everyone. I would like to thank the March of Dimes, which is advocating for full funding, the American College of Obstetricians and Gynecologists, and the American Academy of Pediatrics. Why? Microcephaly. Microcephaly is a severe brain abnormality that is now linked to the Zika virus, as are other anomalies where brain and skull development are affected.

We are talking about a lifetime of seizures and developmental delays, such as problems sitting, standing, walking, seeing, hearing, and feeding problems. Currently, there is no vaccine or treatment for the Zika infection.

Brazil has reported the highest incidence of microcephaly, with over 4,000 suspected cases tied to Zika.

Microcephaly has also been detected among women who contracted Zika in Colombia, Panama, and U.S. territories. In fact, in the U.S. and U.S. territories alone, we have 1,200 cases. Thirty-two of these are pregnant women, two cases of microcephaly. The Florida Department of Health says we have 120 Floridians diagnosed with Zika, including pregnant women.

Because there is no cure for the Zika virus, Congress must act to do everything we can to prevent it. We need the diagnostic tests, we need the vaccines, we need research, and we need tools for our communities back home. We have got to educate our neighbors.

This Republican bill is woefully inadequate. It puts our neighbors back home at risk and could subject us to huge economic risks as well.

Let’s get specific. The GOP’s Zika bill provides less than one-third of the funds requested by public health experts. I heard the Republican appropriators say they intend to do more next year. The mosquitoes don’t know that, do they? The mosquitoes are not going to wait until next year.

That is unconscionable. It is unconscionable that such underfunding does

not allow the development of vaccines, the diagnostics, and the research in birth defects. The most immediate needs are woefully underfunded in the Republican bill.

The CDC requested \$740 million for public health activities like mosquito control. The House bill provides \$120 million, 84 percent below the request. That means the CDC is not going to have adequate funding to assist our local communities. The House bill cuts the request by the National Institutes of Health for research and development of vaccines, treatments, and diagnostics by \$132 million, or 28 percent.

The House bill completely neglects immediate needs of American citizens in Puerto Rico. The administration asked for \$256 million. What does the Republican bill provide? Zero. Furthermore, the State Department and USAID will only get \$119 million.

Now, if we learned anything from Ebola, it is that addressing the health threat overseas can be extremely effective, but you give it short shrift here.

Colleagues, this is a public health emergency, but it is not the only one. It is not the first one, and it will not be the last. It requires a serious, thoughtful response, one with adequate funding, not a feeble attempt to demonstrate you are trying to do something.

Now, not only will the GOP obstruction likely prove dire to the health of our neighbors, but there is going to be a huge economic impact as well. Currently, pregnant women and men who hope to have a baby are advised by CDC to avoid traveling to Brazil and other areas. What if there is a similar traveling advisory for the State of Florida, the Texas coast, New Orleans, Charleston, and Mobile, Alabama, all communities that rely on the tourism dollar, from small businesses to large? So you are asking not only for a public health emergency, but for an economic emergency as well.

Members, this call to action requires actual action. This call to action was made months ago. Your answer needs to be equal to our challenge. Please pass my amendment so that we can fully fund the Zika response. Don't give the short shrift Republican bill a hearing. Vote "no" on the bill vote and "yes" on the MTR.

I yield back the balance of my time.

POINT OF ORDER

Mr. ROGERS of Kentucky. Mr. Speaker, I insist on my point of order. The SPEAKER pro tempore. The gentleman will state his point of order.

Mr. ROGERS of Kentucky. Mr. Speaker, I raise a point of order against the motion because the proposed amendment contains an emergency designation which constitutes a change to existing law within the meaning of clause 2 of rule XXI. Accordingly, it violates the longstanding prohibition on legislating on a general appropriations measure, and I must insist upon my point of order.

The SPEAKER pro tempore. Does any other Member wish to be heard on the point of order?

If not, the Chair is prepared to rule. The gentleman from Kentucky makes a point of order that the instructions in the motion to recommit contain legislation in violation of clause 2 of rule XXI.

The instructions, in pertinent part, designate certain appropriated funds as an emergency requirement pursuant to the Balanced Budget and Emergency Deficit Control Act of 1985.

The Chair has ruled on numerous occasions, as recorded in section 1052 of the House Rules and Manual, that a proposal to designate an appropriation as an "emergency requirement" within the meaning of the budget-enforcement laws is fundamentally legislative in character.

On these premises, the Chair holds that the instructions contained in the motion to recommit offered by the gentlewoman from Florida, by including a proposal to designate an appropriation as an "emergency requirement" within the meaning of the budget-enforcement laws, constitutes legislation in violation of clause 2 of rule XXI.

The point of order is sustained. The motion is not in order.

□ 2045

Ms. CASTOR of Florida. Mr. Speaker, I appeal the ruling of the Chair.

The SPEAKER pro tempore. The question is: Shall the decision of the Chair stand as the judgment of the House?

MOTION TO TABLE

Mr. ROGERS of Kentucky. Mr. Speaker, I move to table the appeal of the ruling of the Chair.

The SPEAKER pro tempore. The question is on the motion to table.

The question was taken; and the Speaker pro tempore announced that the ayes appeared to have it.

Ms. CASTOR of Florida. Mr. Speaker, on that I demand the yeas and nays.

The yeas and nays were ordered.

The SPEAKER pro tempore. Pursuant to clause 9 of rule XX, this 15-minute vote on the motion to table will be followed by a 5-minute vote on passage of the bill, if arising without further proceedings in recommittal.

The vote was taken by electronic device, and there were—yeas 240, nays 183, not voting 10, as follows:

[Roll No. 206]

YEAS—240

Abraham	Bost	Chaffetz
Aderholt	Boustany	Clawson (FL)
Allen	Brady (TX)	Coffman
Amash	Brat	Cole
Amodei	Bridenstine	Collins (GA)
Babin	Brooks (AL)	Collins (NY)
Barletta	Brooks (IN)	Comstock
Barr	Buchanan	Conaway
Barton	Buck	Cook
Benishek	Bucshon	Costello (PA)
Bilirakis	Burgess	Cramer
Bishop (MI)	Byrne	Crawford
Bishop (UT)	Calvert	Crenshaw
Black	Culberson (GA)	Culberson
Blackburn	Carter (TX)	Curbelo (FL)
Blum	Chabot	Davis, Rodney

Denham	Kelly (PA)	Rigell
Dent	King (IA)	Roby
DeSantis	King (NY)	Roe (TN)
DesJarlais	Kinzinger (IL)	Rogers (AL)
Diaz-Balart	Kline	Rogers (KY)
Dold	Knight	Rohrabacher
Donovan	Labrador	Rokita
Duffy	LaHood	Ros-Lehtinen
Duncan (SC)	LaMalfa	Roskam
Duncan (TN)	Lamborn	Ross
Ellmers (NC)	Lance	Rothfus
Emmer (MN)	Latta	Rouzer
Farenthold	LoBiondo	Royce
Fincher	Long	Russell
Fitzpatrick	Loudermilk	Sanford
Fleischmann	Love	Scalise
Fleming	Lucas	Schweikert
Flores	Luetkemeyer	Scott, Austin
Forbes	Lummis	Sensenbrenner
Fortenberry	MacArthur	Sessions
Fox	Marchant	Shimkus
Franks (AZ)	Marino	Shuster
Frelinghuysen	Massie	Simpson
Garrett	McCarthy	Smith (MO)
Gibbs	McCaul	Smith (NE)
Gibson	McClintock	Smith (NJ)
Gohmert	McHenry	Smith (TX)
Goodlatte	McKinley	Stefanik
Gosar	McMorris	Stewart
Gowdy	Rodgers	Stivers
Granger	McSally	Stutzman
Graves (GA)	Meadows	Thompson (PA)
Graves (LA)	Meehan	Thornberry
Graves (MO)	Messer	Tiberi
Griffith	Mica	Tipton
Grothman	Miller (FL)	Trott
Guinta	Miller (MI)	Turner
Guthrie	Moolenaar	Upton
Hanna	Mooney (WV)	Valadao
Hardy	Mullin	Wagner
Harper	Mulvaney	Walberg
Harris	Murphy (PA)	Walden
Hartzler	Neugebauer	Walker
Heck (NV)	Newhouse	Walorski
Hensarling	Noem	Walters, Mimi
Hice, Jody B.	Nugent	Weber (TX)
Hill	Nunes	Webster (FL)
Holding	Olson	Wenstrup
Hudson	Palazzo	Westerman
Huelskamp	Palmer	Westmoreland
Huizenga (MI)	Paulsen	Whitfield
Hultgren	Pearce	Williams
Hunter	Perry	Wilson (SC)
Hurd (TX)	Pittenger	Wittman
Hurt (VA)	Pitts	Womack
Issa	Poe (TX)	Woodall
Jenkins (KS)	Poliquin	Yoder
Jenkins (WV)	Pompeo	Yoho
Johnson (OH)	Posey	Young (AK)
Jolly	Price, Tom	Young (IA)
Jones	Price, Tom	Young (IN)
Jordan	Ratcliffe	Zeldin
Joyce	Reichert	Zinke
Katko	Renacci	
Kelly (MS)	Ribble	
	Rice (SC)	

NAYS—183

Adams	Clyburn	Gabbard
Aguilar	Cohen	Gallego
Ashford	Connolly	Garamendi
Bass	Conyers	Graham
Beatty	Cooper	Grayson
Becerra	Costa	Green, Al
Bera	Courtney	Green, Gene
Beyer	Cuellar	Grijalva
Bishop (GA)	Cummings	Gutiérrez
Blumenauer	Davis (CA)	Hahn
Bonamici	Davis, Danny	Hastings
Boyle, Brendan F.	DeFazio	Heck (WA)
Brady (PA)	DeGette	Higgins
Brown (FL)	Delaney	Himes
Brownley (CA)	DeLauro	Honda
Bustos	DelBene	Hoyer
Butterfield	DeSaulnier	Huffman
Capps	Deutch	Israel
Capuano	Dingell	Jackson Lee
Cárdenas	Doggett	Jeffries
Carney	Doyle, Michael F.	Johnson (GA)
Carson (IN)	Duckworth	Johnson, E. B.
Cartwright	Edwards	Kaptur
Castor (FL)	Engel	Keating
Castro (TX)	Eshoo	Kelly (IL)
Chu, Judy	Esty	Kennedy
Cicilline	Farr	Kildee
Clark (MA)	Foster	Kilmer
Clarke (NY)	Frankel (FL)	Kind
Clay	Fudge	Kirkpatrick
Cleaver		Kuster
		Langevin

Larsen (WA)	Neal	Scott, David	Huelskamp	Messer	Schweikert	Quigley	Schrader	Tsongas
Larson (CT)	Nolan	Serrano	Huizenga (MI)	Mica	Scott, Austin	Rangel	Scott (VA)	Van Hollen
Lawrence	Norcross	Sewell (AL)	Hultgren	Miller (FL)	Sensenbrenner	Rice (NY)	Scott, David	Vargas
Lee	O'Rourke	Sherman	Hunter	Miller (MI)	Sessions	Richmond	Serrano	Veasey
Levin	Pallone	Sinema	Hurd (TX)	Moolenaar	Shimkus	Ros-Lehtinen	Sewell (AL)	Vela
Lewis	Pascrell	Sires	Hurt (VA)	Mooney (WV)	Shuster	Roybal-Allard	Sherman	Velázquez
Lieu, Ted	Payne	Slaughter	Issa	Mullin	Simpson	Ruiz	Sires	Visclosky
Lipinski	Pelosi	Smith (WA)	Jenkins (KS)	Mulvaney	Sinema	Ruppersberger	Slaughter	Walz
Loeb sack	Perlmutter	Speier	Jenkins (WV)	Murphy (PA)	Smith (MO)	Rush	Smith (WA)	Wasserman
Lofgren	Peters	Takano	Johnson (OH)	Neugebauer	Smith (NE)	Ryan (OH)	Speier	Schultz
Lowenthal	Peterson	Thompson (CA)	Jolly	Newhouse	Smith (NJ)	Sánchez, Linda	Takano	Waters, Maxine
Lowe	Pingree	Thompson (MS)	Joem	Noem	Smith (TX)	T.	Thompson (CA)	Watson Coleman
Lujan Grisham	Pocan	Titus	Jordan	Nugent	Stefanik	Sánchez, Loretta	Thompson (MS)	Welch
(NM)	Polis	Tonko	Joyce	Nunes	Stewart	Sarbanes	Titus	Wilson (FL)
Luján, Ben Ray	Price (NC)	Torres	Katko	Olson	Stivers	Schakowsky	Tonko	Yarmuth
(NM)	Quigley	Tsongas	Kelly (MS)	Palazzo	Stutzman	Schiff	Torres	
Lynch	Rangel	Van Hollen	Kelly (PA)	Palmer	Thompson (PA)			
Maloney,	Rice (NY)	Vargas	King (IA)	Paulsen	Thornberry			
Carolyn	Richmond	Veasey	King (NY)	Pearce	Tiberi			
Maloney, Sean	Roybal-Allard	Vela	Kinzinger (IL)	Perry	Tipton			
Matsui	Ruiz	Velázquez	Kline	Pittenger	Trott			
McCollum	Ruppersberger	Visclosky	Knight	Pitts	Turner			
McDermott	Rush	Walz	Labrador	Poe (TX)	Upton			
McGovern	Ryan (OH)	Wasserman	LaHood	Poliquin	Valadao			
McNerney	Sánchez, Linda	Schultz	LaMalfa	Pompeo	Wagner			
Meeks	T.	Waters, Maxine	Lamborn	Posey	Walberg			
Meng	Sanchez, Loretta	Watson Coleman	Lance	Price, Tom	Walden			
Moore	Sarbanes	Welch	Latta	Ratcliffe	Walker			
Moulton	Schakowsky	Wilson (FL)	LoBiondo	Reed	Walorski			
Murphy (FL)	Schiff	Yarmuth	Long	Reichert	Walters, Mimi			
Nadler	Schrader		Loudermilk	Renacci	Weber (TX)			
Napolitano	Scott (VA)		Love	Ribble	Webster (FL)			

NOT VOTING—10

Crowley	Johnson, Sam	Swalwell (CA)
Fattah	Reed	Takai
Herrera Beutler	Rooney (FL)	
Hinojosa	Salmon	

□ 2105

Messrs. CRAWFORD, SMITH of Missouri, BARR, ROE of Tennessee, SHIMKUS, ROSKAM, and WITTMAN changed their vote from “nay” to “yea.”

So the motion to table was agreed to.

The result of the vote was announced as above recorded.

A motion to reconsider was laid on the table.

The SPEAKER pro tempore. The question is on the passage of the bill.

Pursuant to clause 10 of rule XX, the yeas and nays are ordered.

This is a 5-minute vote.

The vote was taken by electronic device, and there were—yeas 241, nays 184, not voting 8, as follows:

[Roll No. 207]

YEAS—241

Abraham	Coffman	Forbes
Aderholt	Cole	Fortenberry
Allen	Collins (GA)	Foxx
Amodei	Collins (NY)	Franks (AZ)
Babin	Comstock	Frelinghuysen
Barletta	Conaway	Garamendi
Barr	Cook	Garrett
Barton	Costa	Gibbs
Benishek	Costello (PA)	Gibson
Bilirakis	Cramer	Gohmert
Bishop (MI)	Crawford	Goodlatte
Bishop (UT)	Crenshaw	Gosar
Black	Culberson	Gowdy
Blackburn	Davis, Rodney	Granger
Blum	Denham	Graves (GA)
Bost	Dent	Graves (LA)
Boustany	DeSantis	Graves (MO)
Brady (TX)	DesJarlais	Griffith
Brat	Diaz-Balart	Grothman
Bridenstine	Dold	Guinta
Brooks (AL)	Donovan	Guthrie
Brooks (IN)	Duffy	Hanna
Buck	Duncan (SC)	Hardy
Bucshon	Duncan (TN)	Harper
Burgess	Ellmers (NC)	Harris
Byrne	Emmer (MN)	Hartzler
Calvert	Farenthold	Heck (NV)
Carter (GA)	Fincher	Hensarling
Carter (TX)	Fitzpatrick	Hice, Jody B.
Chabot	Fleischmann	Hill
Chaffetz	Fleming	Holding
Clawson (FL)	Flores	Hudson

Adams	DeLauro	Langevin
Aguilar	DelBene	Larsen (WA)
Amash	DeSaulnier	Larson (CT)
Ashford	Deutch	Lawrence
Bass	Dingell	Lee
Beatty	Doggett	Levin
Becerra	Doyle, Michael	Lewis
Bera	F.	Lieu, Ted
Beyer	Duckworth	Lipinski
Bishop (GA)	Edwards	Loeb sack
Blumenauer	Ellison	Lofgren
Bonamici	Engel	Lowenthal
Boyle, Brendan	Eshoo	Lowe
F.	Esty	Lujan Grisham
Brady (PA)	Farr	(NM)
Brown (FL)	Foster	Luján, Ben Ray
Brownley (CA)	Frankel (FL)	(NM)
Buchanan	Fudge	Lynch
Bustos	Gabbard	Maloney,
Butterfield	Gallego	Carolyn
Capps	Graham	Maloney, Sean
Capuano	Grayson	Matsui
Cárdenas	Green, Al	McCollum
Carney	Green, Gene	McDermott
Carson (IN)	Grijalva	McGovern
Cartwright	Gutiérrez	McNerney
Castor (FL)	Hahn	Meeks
Castro (TX)	Hastings	Meng
Chu, Judy	Heck (WA)	Moore
Ciilline	Higgins	Moulton
Clark (MA)	Himes	Murphy (FL)
Clarke (NY)	Honda	Nadler
Clay	Hoyer	Napolitano
Cleaver	Huffman	Neal
Clyburn	Israel	Nolan
Cohen	Jackson Lee	Norcross
Connolly	Jeffries	O'Rourke
Conyers	Johnson (GA)	Pallone
Cooper	Johnson, E. B.	Pascrell
Courtney	Kaptur	Payne
Cuellar	Keating	Pelosi
Cummings	Kelly (IL)	Perlmutter
Curbelo (FL)	Kennedy	Peters
Davis (CA)	Kildee	Peterson
Davis, Danny	Kilmer	Pingree
DeFazio	Kind	Pocan
DeGette	Kirkpatrick	Polis
Delaney	Kuster	Price (NC)

NAYS—184

Adams	DeLauro	Langevin
Aguilar	DelBene	Larsen (WA)
Amash	DeSaulnier	Larson (CT)
Ashford	Deutch	Lawrence
Bass	Dingell	Lee
Beatty	Doggett	Levin
Becerra	Doyle, Michael	Lewis
Bera	F.	Lieu, Ted
Beyer	Duckworth	Lipinski
Bishop (GA)	Edwards	Loeb sack
Blumenauer	Ellison	Lofgren
Bonamici	Engel	Lowenthal
Boyle, Brendan	Eshoo	Lowe
F.	Esty	Lujan Grisham
Brady (PA)	Farr	(NM)
Brown (FL)	Foster	Luján, Ben Ray
Brownley (CA)	Frankel (FL)	(NM)
Buchanan	Fudge	Lynch
Bustos	Gabbard	Maloney,
Butterfield	Gallego	Carolyn
Capps	Graham	Maloney, Sean
Capuano	Grayson	Matsui
Cárdenas	Green, Al	McCollum
Carney	Green, Gene	McDermott
Carson (IN)	Grijalva	McGovern
Cartwright	Gutiérrez	McNerney
Castor (FL)	Hahn	Meeks
Castro (TX)	Hastings	Meng
Chu, Judy	Heck (WA)	Moore
Ciilline	Higgins	Moulton
Clark (MA)	Himes	Murphy (FL)
Clarke (NY)	Honda	Nadler
Clay	Hoyer	Napolitano
Cleaver	Huffman	Neal
Clyburn	Israel	Nolan
Cohen	Jackson Lee	Norcross
Connolly	Jeffries	O'Rourke
Conyers	Johnson (GA)	Pallone
Cooper	Johnson, E. B.	Pascrell
Courtney	Kaptur	Payne
Cuellar	Keating	Pelosi
Cummings	Kelly (IL)	Perlmutter
Curbelo (FL)	Kennedy	Peters
Davis (CA)	Kildee	Peterson
Davis, Danny	Kilmer	Pingree
DeFazio	Kind	Pocan
DeGette	Kirkpatrick	Polis
Delaney	Kuster	Price (NC)

NOT VOTING—8

Crowley	Hinojosa	Swalwell (CA)
Fattah	Johnson, Sam	Takai
Herrera Beutler	Salmon	

ANNOUNCEMENT BY THE SPEAKER PRO TEMPORE
The SPEAKER pro tempore (during the vote). There are 2 minutes remaining.

□ 2113

So the bill was passed.

The result of the vote was announced as above recorded.

A motion to reconsider was laid on the table.

NATIONAL DEFENSE AUTHORIZATION ACT FOR FISCAL YEAR 2017

The SPEAKER pro tempore. Pursuant to House Resolution 735 and rule XVIII, the Chair declares the House in the Committee of the Whole House on the state of the Union for the further consideration of the bill, H.R. 4909.

Will the gentleman from Georgia (Mr. COLLINS) kindly resume the chair.

□ 2114

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. 4909) to authorize appropriations for fiscal year 2017 for military activities of the Department of Defense and for military construction, to prescribe military personnel strengths for such fiscal year, and for other purposes, with Mr. COLLINS of Georgia (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. 119 printed in House Report 114-571, offered by the gentleman from Guam (Ms. BORDALLO), 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 House Report 114-571 on which further proceedings were postponed, in the following order:

Amendment No. 1 by Mr. BUCK of Colorado.

Amendment No. 2 by Mr. FLEMING of Louisiana.

Amendment No. 5 by Ms. LEE of California.

Amendment No. 6 by Mr. POLIS of Colorado.

Amendment No. 7 by Mr. ELLISON of Minnesota.