

individual was misidentified as deceased based on information obtained from the Death Master File, and was erroneously disenrolled from medical assistance under the State plan (or waiver of such plan) based on such misidentification, the State shall immediately reenroll such individual under the State plan (or waiver of such plan), retroactive to the date of such disenrollment.

“(2) *RULE OF CONSTRUCTION.*—Nothing under this subsection shall be construed to preclude the ability of a State to use other electronic data sources to timely identify potentially deceased beneficiaries, so long as the State is also in compliance with the requirements of this subsection (and all other requirements under this title relating to Medicaid eligibility determination and redetermination).”.

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

The Chair recognizes the gentlewoman from Washington.

#### GENERAL LEAVE

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

The SPEAKER pro tempore. Is there objection to the request of the gentlewoman from Washington?

There was no objection.

Mrs. RODGERS of Washington. Mr. Speaker, I yield myself such time as I may consume.

Mr. Speaker, according to the HHS Office of Inspector General, States pay hundreds of millions per year to Medicaid-managed care organizations to care for beneficiaries who have passed away.

It feels almost impossible to believe that precious Medicaid dollars intended to help pregnant women, children, and those in need would instead go to insurance companies to help manage care for people who are already deceased. Yet, it is happening.

H.R. 8084 will hopefully change this by requiring States to check the Social Security Administration's Death Master File every quarter to identify individuals still enrolled in the State's Medicaid program who are deceased. This is a commonsense solution that will better serve the people Medicaid is intended to help. I encourage my colleagues to support this bill, and I reserve the balance of my time.

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

Mr. Speaker, I rise today in support of H.R. 8084, the LIVE Beneficiaries Act, sponsored by Representatives CRAIG and BILIRAKIS.

This bipartisan bill would require State Medicaid agencies to use the database managed by the Social Security Administration to identify people who have passed away yet remain enrolled in the Medicaid program.

In recent years, the Department of Health and Human Services Office of the Inspector General has identified payments made by States to Medicaid-managed care plans for people who had already passed away.

H.R. 8084 would help to prevent this wasteful spending by requiring States to check the Social Security Administration's Death Master File on a quarterly basis at a minimum and to disenroll anyone who is deceased before any additional payments can be made inadvertently on their behalf.

Importantly, though, H.R. 8084 includes protections to ensure that in the rare circumstance an individual is falsely identified as deceased, the State must reinstate the person's coverage retroactive to the date that the person was improperly disenrolled.

Mr. Speaker, I hope my colleagues will join me in voting “yes” on this bill, and I reserve the balance of my time.

Mrs. RODGERS of Washington. Mr. Speaker, I yield 5 minutes to the gentleman from Florida (Mr. BILIRAKIS), the subcommittee chair of the Innovation, Data, and Commerce Subcommittee of Energy and Commerce, and the prime sponsor of this legislation.

Mr. BILIRAKIS. Mr. Speaker, I thank the chair for giving me the opportunity to speak. She has done such an outstanding job as chairman of the Energy and Commerce Committee. We are so very fortunate. She thinks of her constituents and the American people as a whole first, and we really appreciate her service.

I rise in strong support of my bill, H.R. 8084, the Leveraging Integrity and Verification of Eligibility, or the LIVE Beneficiaries Act.

I am grateful to have worked in a bipartisan fashion alongside Representative CRAIG, and I thank her for her support of this commonsense bill focused on Medicaid program integrity and preventing fraud, waste, and abuse to save taxpayer dollars.

Our legislation requires CMS to ensure that States are certifying, at least on a quarterly basis, that enrollees are not listed on the Social Security Administration's Death Master File database. We also include a provision to give States the ability to check other death records to make sure Medicaid beneficiaries are not deceased.

I mean, what we want is to save money for our senior citizens and those who need Medicaid, as well. This is a good bill. Unfortunately, it is a must-pass bill. It shouldn't have to happen, but we are going to save dollars, and we are going to take care of this with this particular bill.

We also require immediate disenrollment of beneficiaries should they verify the death of Medicaid enrollees. This repeals the current CMS guidance that forced States to collect additional information about their beneficiaries to ensure their records are correct.

CMS has started to recognize this problem and take some administrative steps with States but not enough. This bill will help ensure we are abiding by good governance standards in statute. We know that too often fraudulent,

wasteful payments occur in the Medicaid and Medicare programs, and we should continue to find ways to cut down and save taxpayer dollars wherever possible.

Again, the money is intended to go to our seniors and those who are on Medicaid. That is what we are doing with this bill. I commend Representative GARCIA for his bill, as well. I also thank the chairman and the ranking member. I ask my colleagues to support H.R. 8084.

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Mr. PALLONE. Mr. Speaker, I have no additional speakers, and I am prepared to close.

Mr. Speaker, again, this is a bill that addresses wasteful spending, and I think it is important for us to make sure we support it on a bipartisan basis.

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

Mrs. RODGERS of Washington. Mr. Speaker, in closing, I urge a “yes” vote on this bill, and I yield back the balance of my time.

The SPEAKER pro tempore. The question is on the motion offered by the gentlewoman from Washington (Mrs. RODGERS) that the House suspend the rules and pass the bill, H.R. 8084, as amended.

The question was taken; and (two-thirds being in the affirmative) the rules were suspended and the bill, as amended, was passed.

A motion to reconsider was laid on the table.

#### REAUTHORIZATION OF LIFESPAN RESPITE CARE PROGRAM

Mrs. RODGERS of Washington. Mr. Speaker, I move to suspend the rules and pass the bill (H.R. 6160) to amend the Public Health Service Act to reauthorize a lifespan respite care program, as amended.

The Clerk read the title of the bill.

The text of the bill is as follows:

H.R. 6160

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

#### SECTION 1. REAUTHORIZATION OF LIFESPAN RESPITE CARE PROGRAM.

*Section 2905 of the Public Health Service Act (42 U.S.C. 300ii-4) is amended by striking “fiscal years 2020 through fiscal year 2024” and inserting “fiscal years 2025 through 2029”.*

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

The Chair recognizes the gentlewoman from Washington.

#### GENERAL LEAVE.

Mrs. RODGERS of Washington. Mr. Speaker, I ask unanimous consent that all Members may have 5 legislative days in which to revise and extend their remarks and include extraneous material in the RECORD on the bill.

The SPEAKER pro tempore. Is there objection to the request of the gentlewoman from Washington?

There was no objection.

Mrs. RODGERS of Washington. Mr. Speaker, I yield myself such time as I may consume.

Mr. Speaker, I rise in support of H.R. 6160, led by Mr. MOLINARO, which reauthorizes the Lifespan Respite Care Program administered by the Administration For Community Living.

This program helps support State systems to provide community-based respite care services to family caregivers tending to children and adults with disabilities and chronic conditions.

There are about 53 million family caregivers in the United States, more than 5 million who are parents or guardians caring for children with special healthcare needs.

Many family caregivers have unmet respite needs, and studies show that increasing respite accessibility can decrease burnout rates and help individuals continue caregiving.

Reauthorizing the Lifespan Respite Care Program will continue vital resources for family caregivers so they can operate at their highest potential.

I encourage my colleagues to support this bill, and I reserve the balance of my time.

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

Mr. Speaker, I rise in support of H.R. 6160, a bill to amend the Public Health Service Act to reauthorize the Lifespan Respite Care Program led by Representatives MOLINARO and CÁRDENAS.

There are more than 53 million family caregivers in the United States. For many, caregiving is a 24/7 job. While it can be very rewarding, it can also be emotionally and physically challenging. Respite care, the opportunity to temporarily entrust the care of loved ones to someone else, is one of the most frequently reported unmet needs of caregivers. Respite care can be provided in a variety of settings, including the home, adult daycare centers, or residential care facilities.

By providing temporary relief for caregivers, respite care helps to reduce the mental stress and physical health issues that caregivers might experience. In doing so, respite care also decreases the need for professional long-term care and allows people who require care to remain at home.

This bill reauthorizes the Lifespan Respite Care Program operated by the Administration for Community Living. This program empowers State systems to provide accessible community-based respite care services which can contribute to the health and well-being of both caregivers and care recipients.

This important program provides much-needed relief to caregivers and helps to improve the availability of respite services to families across the age and disability spectrums.

I encourage all my colleagues to vote "yes" on H.R. 6160, and I reserve the balance of my time.

Mrs. RODGERS of Washington. Mr. Speaker, I yield 5 minutes to the gen-

tleman from New York (Mr. MOLINARO), the prime sponsor of this legislation.

Mr. MOLINARO. Mr. Speaker, I thank the chairwoman not only for her leadership but for her support of this legislation as well.

Mr. Speaker, I rise today in support of my bill, H.R. 6160, the Lifespan Respite Care Reauthorization Act.

As we know, over 48 million Americans are caring for someone over the age of 18. Recent reports from the AARP have shown that caregivers have reported increases in stress levels and a decline in overall health.

Respite services offer families much-needed temporary care or supervision for children and adults of all ages with disabilities and chronic illnesses.

As the parent of an adult child with a developmental disability, I know firsthand the value of respite care. Having interacted with many respite care workers, I know how important their work is and how they deserve greater respect and more support.

My bill authorizes the Lifespan Respite Care Program through fiscal year 2029 to provide States with Federal funding to continue to offer these essential services and provide relief to our caregivers.

Authorized by Congress in 2006, the Lifespan Respite Care Program has been a lifeline for our caregivers and provides them with critical assistance so they can recharge and meet their family's needs.

Family caregivers are often the unsung heroes who make personal sacrifices to care for their loved ones. I am proud to work alongside my colleagues to pass this bipartisan Lifespan Respite Care Reauthorization Act and continue to provide caregivers with relief and assistance so they can lead a balanced life while tending to their loved ones.

I would like to extend my appreciation to Congressman CÁRDENAS for his support of this legislation, and I urge my colleagues to support this common-sense bipartisan bill.

Mr. PALLONE. Mr. Speaker, may I inquire as to the time remaining.

The SPEAKER pro tempore. The gentleman from New Jersey has 18½ minutes remaining.

Mr. PALLONE. Mr. Speaker, let me just say that respite care is obviously very important, and this bill goes a long way toward dealing with that. I would ask all my colleagues to support it, and I yield back the balance of my time.

Mrs. RODGERS of Washington. Mr. Speaker, in closing, I urge a "yes" vote on this legislation, and I yield back the balance of my time.

The SPEAKER pro tempore. The question is on the motion offered by the gentlewoman from Washington (Mrs. RODGERS) that the House suspend the rules and pass the bill, H.R. 6160, as amended.

The question was taken; and (two-thirds being in the affirmative) the rules were suspended and the bill, as amended, was passed.

A motion to reconsider was laid on the table.

## POISON CONTROL CENTERS REAUTHORIZATION ACT OF 2024

Mrs. RODGERS of Washington. Mr. Speaker, I move to suspend the rules and pass the bill (S. 4351) to amend the Public Health Service Act to reauthorize certain poison control programs.

The Clerk read the title of the bill.

The text of the bill is as follows:

S. 4351

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

### SECTION 1. SHORT TITLE.

This Act may be cited as the "Poison Control Centers Reauthorization Act of 2024".

### SEC. 2. REAUTHORIZATION OF POISON CONTROL PROGRAMS.

(a) NATIONAL TOLL-FREE NUMBER AND OTHER COMMUNICATION CAPABILITIES.—Section 1271(c) of the Public Health Service Act (42 U.S.C. 300d–71(c)) is amended by striking "fiscal years 2020 through 2024" and inserting "fiscal years 2025 through 2029".

(b) PROMOTING POISON CONTROL CENTER UTILIZATION.—Section 1272(c) of the Public Health Service Act (42 U.S.C. 300d–72(c)) is amended by striking "fiscal years 2020 through 2024" and inserting "fiscal years 2025 through 2029".

(c) POISON CONTROL CENTER GRANT PROGRAM.—Section 1273(g) of the Public Health Service Act (42 U.S.C. 300d–73(g)) is amended by striking "fiscal years 2020 through 2024" and inserting "fiscal years 2025 through 2029".

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

The Chair recognizes the gentlewoman from Washington.

### GENERAL LEAVE

Mrs. RODGERS of Washington. Mr. Speaker, I ask unanimous consent that all Members may have 5 legislative days in which to revise and extend their remarks and include extraneous material in the RECORD on the bill.

The SPEAKER pro tempore. Is there objection to the request of the gentlewoman from Washington?

There was no objection.

Mrs. RODGERS of Washington. Mr. Speaker, I yield myself such time as I may consume.

Mr. Speaker, I rise in support of S. 4351, the Poison Control Centers Reauthorization Act of 2024. I thank Mrs. CHAVEZ-DEREMER, the sponsor of H.R. 7251, the House bill passed unanimously by the Energy and Commerce Committee. We applaud her leadership on this important bill and on the reauthorization of this program.

The Poison Control Network Program supports local poison centers to ensure that they can provide 24/7 access to specially trained providers, physicians, or toxicology experts, to provide guidance on possible poisoning and toxic exposures.

This reauthorization will help continue to provide resources for the Poison Help Line, which is a toll-free number for people to access trained experts.