



# ENERGY & COMMERCE NEWSROOM

CHAIRMAN FRANK PALLONE, JR. | 116<sup>TH</sup> CONGRESS

**FOR IMMEDIATE RELEASE**

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## **Pallone Opening Remarks at Health Subcommittee Markup of Ten Health Bills**

*The Subcommittee Will Consider Bipartisan Legislation to Reauthorize Public Health and Medicare Programs, Improve Drug Pricing Transparency, Provide Medicaid Funding for Puerto Rico and the U.S. Territories, and Address Surprise Medical Billing*

**Washington, D.C.** – *Energy and Commerce Chairman Frank Pallone, Jr.'s (D-NJ) remarks as prepared for delivery at the Health Subcommittee markup of ten health bills are below:*

Today we are continuing with this Committee's work of putting consumers first, expanding access to health care, and making both prescription drugs and health care more affordable. The 10 bipartisan bills we are marking up today will take great strides toward achieving these goals.

I want to thank Ranking Member Walden and his staff for working together with us on these bipartisan bills. Throughout this process, we have kept the patient and the consumer at the center, and I am proud of where we have landed.

We have negotiated a four-year extension of our expiring public health programs. We have tackled the difficult problem of surprise billing. And we have also reached a long-term funding agreement for the Medicaid programs for Puerto Rico and the U.S. territories.

I am proud that we have come together to address all of these critical health care issues in a bipartisan fashion – that's this Committee at its best.

Today we'll consider the No Surprises Act, which I introduced with Ranking Member Walden to address the issue of surprise medical billing. Our legislation removes the "surprise" from billing by completely protecting patients in emergency situations, patients who did not

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specifically choose to see an out of network physician for scheduled care, and patients in situations where there is no in-network provider available to treat them.

This legislation protects consumers and it does it without raising health care costs for working Americans. It's critical that we pass this legislation today and finally protect patients from these outrageous surprise medical bills.

The subcommittee will also mark up a number of bills to improve the Medicare program and reauthorize vital public health programs that strengthen the health care workforce and provide direct access to health care for American families.

The Title VIII Nursing Workforce Reauthorization Act, introduced by Representative Joyce, and the EMPOWER for Health Act, introduced by Representative Schakowsky, will ensure that our nurses, doctors, and allied health professionals receive the training and support they need to be the strong, stable, and diverse workforce that forms the backbone of our health system.

The subcommittee will also be strengthening a number of public health programs that will expire at the end of this fiscal year if we do not act. Representative O'Halleran's Community Health Innovation, Modernization, and Excellence Act will provide Community Health Centers and the National Health Service Corps with a historic level of funding. This bill will extend the programs for the longest period since the Community Health Center Fund was created in the Affordable Care Act.

We will also consider an Amendment in the Nature of a Substitute to the package offered by Representative Butterfield that will incorporate long-term extensions of several other health programs, including the Teaching Health Center Graduate Medical Education Program. Tens of millions of Americans rely on these health programs, and I am pleased that we are on track to get these extensions signed into law before the programs expire.

We have also acted decisively to address the dire humanitarian crisis looming in the territories. Today, we will consider a bipartisan bill that will provide four years of additional funds and an enhanced matching rate to Puerto Rico, and six years of additional funds and enhanced matching rates to the U.S. Virgin Islands, the Commonwealth of the Northern Mariana Islands, Guam, and American Samoa. It also makes important program integrity improvements that will bring greater transparency and accountability to these programs.

We will also consider an amendment that will provide two years of responsible relief to the pending reductions to the disproportionate share hospital payments.

We will also be considering the FAIR Drug Pricing Act, as well as an Amendment in the Nature of a Substitute with other provisions as well, that will increase drug pricing transparency. This legislation will ensure consumers have access to more information about how prescription drugs are priced and why drug prices are increasing.

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All 10 of these bipartisan bills are good bills and I look forward to supporting them all. I also thank you, Madam Chair, for your leadership and continued commitment to moving these bills through Subcommittee.

Thank you, I yield back.

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