

endorsed Medicare drug price negotiations in his campaign and put forward a proposal to use international prices as a guide to limit out-of-control U.S. prices. That is what the gentleman's President said.

The administration has endorsed the other two concepts of inflation limits on drug prices and improving Medicare part D as part of the legislation put forward by Senator GRASSLEY.

I guess everybody has their own definition of bipartisanship.

Mr. SCALISE. Well, clearly, as the gentleman talks about the Grassley bill that is moving through the Senate, let them do their work. Let them find a way to come together with their 60-vote rule and produce a bipartisan bill. I encourage them to do that. They haven't yet, but I encourage them to do that.

When the gentleman talks about the ACA, let's be clear, because the vast majority of people on the gentleman's side now—especially in the Presidential campaign, the Democratic candidates for President—are not talking about the ACA anymore. They are talking about what is referred to as Medicare for All.

I will yield in a moment, but if the gentleman read the bill, Medicare for All, number one, it gets rid of the private insurance marketplace. Over 180 million people lose that healthcare. Then, if you look at Medicare Advantage, an incredibly popular and successful part of Medicare is gone. It goes away.

So 200 million people lose what they have now that they like, and everybody is placed in Medicare, which, as we all know, pays below-market rates. Most rural hospitals said they will close. If that bill passes, they can't even operate. They will close because they can't continue to run and make any kind of profit. They lose money, and they ultimately close down. They have said it.

People know, people understand, how the healthcare marketplace works. Know that if you get rid of the private insurance market, that is what is paying for Medicare and Medicaid today.

Medicare for All, which, again, is the catchphrase that is being used by every Presidential candidate on the gentleman's side, and maybe they all want to have their own version of it, is a far different place than even the ACA.

We can continue and will continue to have a debate about the best way to fix our broken healthcare system, and focus on lowering prices and protecting people with preexisting conditions, but in a way that you can actually let people choose their own plans and buy whatever they want from wherever they want it.

That is how people get all other products. Healthcare, for various reasons, doesn't work that way. But, clearly, on the drug-pricing side, there have been a lot of good ideas that came together that would be proven to lower drug prices.

If we want to get into the high cost, which I agree is a problem, let's look at

the fundamental reasons why it costs billions of dollars, instead of maybe hundreds of millions of dollars, to create a new lifesaving drug.

There are reasons that the cost is so high to bring a drug to market. Thank goodness there are companies that are out there that are willing to invest billions of dollars. Sometimes they don't succeed, by the way, and they have to eat that cost. But if they do succeed in finding a new drug that will save lives, it typically costs billions of dollars and years and years of bureaucratic red tape and other processes that they have to go through to finally bring that drug to market.

That is where we should focus our energies, on compressing that process so it can happen quicker, addressing other problems within the way that a drug comes to market so that it doesn't cost billions of dollars, and we can have more lifesaving drugs at lower costs.

If we are going to ignore that side of the equation and say: Here, we are just going to set the price without addressing the fundamental problems that are leading to such high costs, then all that is going to happen is that nobody is going to make the investment to go find the next lifesaving drug.

You will never know what could have happened. We see every day there are amazing breakthroughs in medical technology, and we want to continue encouraging that.

Something like the 21st Century Cures Act actually achieves it. Again, we came together to put that bill into law to now allow for lifesaving drugs, especially in areas like cancer, Alzheimer's, and ALS. We are going to get real big breakthroughs. There are already some big breakthroughs because of that.

I yield to the gentleman.

Mr. HOYER. Mr. Speaker, I have nothing more to say.

Mr. SCALISE. Mr. Speaker, I know we will have more debates next week over the limited number of items coming to the floor. Hopefully, some of these other items can get addressed in a bipartisan way, but I know there are other battles ahead, and we will do our part to try to come together to address these problems.

If the gentleman has nothing else, then I yield back the balance of my time.

ADJOURNMENT FROM FRIDAY, SEPTEMBER 20, 2019, TO TUESDAY, SEPTEMBER 24, 2019

Mr. HOYER. Mr. Speaker, I ask unanimous consent that when the House adjourns today, it adjourn to meet on Tuesday next, when it shall convene at noon for morning-hour debate and 2 p.m. for legislative business.

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

There was no objection.

REMEMBERING MARKIYA SIMONE DICKSON

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

Ms. SPANBERGER. Mr. Speaker, I rise today to tell the story of Markiya Simone Dickson.

She was an energetic, kind, and spunky 9-year-old girl. She was a beloved daughter and an adored sister. She was in third grade, and she was preparing to sing a Justin Bieber song in her school's upcoming talent show.

On May 26, 2019, Markiya and her family attended a community picnic in Richmond, Virginia. From across the park, a random gunshot went through the crowd, and this senseless, cruel act of gun violence took Markiya's life.

During and since this unimaginable time, Markiya's parents, Mark Whitfield and Ciara Dickson, have demonstrated extraordinary strength, determination, and courage. They continue fighting to ensure Markiya's name and her beautiful life are never forgotten.

They stand by their steadfast wish to fight back against gun violence in our communities so that other parents will never have to experience the pain that they feel following Markiya's death.

Markiya was beloved by those who knew her, and the Richmond, Virginia, community stands with her family at this time. Together, we share her story; we mourn her death; and we promise to fight for safer communities for all our children.

RECOGNIZING 75 YEARS SINCE HANFORD'S B REACTOR WENT CRITICAL

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

Mr. NEWHOUSE. Mr. Speaker, I rise today to recognize an important anniversary in our Nation's nuclear and military history.

At the start of the atomic age, thousands of men and women, our Cold War patriots, moved to central Washington State to work on a top-secret government project, building the world's first full-scale nuclear reactor.

During World War II, Hanford, Washington, was selected as one of the three sites for the Manhattan Project, and September 26 marks the 75th year since the B Reactor went critical at the Hanford site.

Since then, the Tri-Cities has grown as a hub for innovation, with an appreciation of the past and an excitement for the future, transforming into the fastest growing economy in Washington State.

The B Reactor has been converted into the centerpiece of the Manhattan National Historical Park, where all are welcome to experience its history.

But the work at the Hanford site must continue as the Federal Government has a moral and legal obligation