



Health Policy Briefing

September 23, 2019

H.R. 3, Lower Drug Costs Now Act, Officially Introduced

House Speaker Nancy Pelosi (D-Calif.) released her long-awaited proposal to lower prescription drug prices last week. The **Lower Drug Costs Now Act** (H.R. 3) would allow the U.S. Department of Health and Human Services (HHS) Secretary to negotiate the price of a minimum of 25 drugs, up to a maximum of 250 drugs, each year - targeting those products without generic or biosimilar competition that cost the most to the health care system. The bill would set a “maximum fair price” of 120 percent of the average price across Australia, Canada, France, Germany, Japan, and the U.K. The negotiated prices would apply to both private insurance and the Medicare program. If a manufacturer refuses to negotiate, or is unable to reach an agreement with HHS, the company would be penalized by a 65 percent tax on the drug’s gross sales. This penalty would increase by 10 percent each quarter of noncompliance until a maximum of 95 percent. Savings from the bill would be used to cap out-of-pocket drug costs for Medicare beneficiaries at \$2,000.

Before her official release of the bill, Pelosi held meetings with the Congressional Progressive Caucus and the more centrist Blue Dog Coalition and New Democrat Coalition. Progressive House Democrats offered cautious praise for the bill but have objected to the fact that it does not allow for the Secretary to negotiate the price of all drugs. The Speaker has appeared open to making changes to the measure as it goes through the committee process. Such changes could include increasing resources for HHS to raise the negotiating floor to more than 25 drugs.

The plan is unlikely to pass the Republican-controlled Senate. Senate Majority Leader Mitch McConnell (R-Ky.) has already ruled out any action on the bill and stated that the Senate’s path forward on drug pricing is still under discussion. House leadership, who have spent months negotiating with the White House on drug prices, had hoped that the President’s support would pressure Senate Republicans to consider the measure. President Trump

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praised the release of Pelosi's bill but did not go so far as to offer an official endorsement. The President called for bipartisan action on drug pricing and commended the legislation advanced by Sen. Chuck Grassley (R-Iowa) and the Senate Finance Committee. HHS Secretary Alex Azar also met with various groups of lawmakers last week and encouraged them to reach a bipartisan agreement to lower drug prices. He did not offer an opinion on the Lower Drug Costs Now Act, stating that he needed additional time to review it.

The House Energy and Commerce Subcommittee on Health will hold a hearing on H.R. 3 this Wednesday. The Ways and Means and Education and Labor committees are also expected to schedule hearings on the legislation this fall. Speaker Pelosi reportedly hopes to vote on the bill by the end of October or early November.

House Passes CR Through Nov. 21

The House of Representatives passed a continuing resolution (CR) (H.R. 4378) last week by a vote of 301-123 to avoid a potential government shutdown on October 1. The stopgap spending bill would extend current government funding through November 21, when lawmakers are scheduled to leave for Thanksgiving recess, giving them additional time to finish work on \$1.3 trillion in spending for fiscal year (FY) 2020 as agreed to in the July budget deal. The CR was drafted following bipartisan, bicameral negotiations and is expected to be approved by the Senate this week before the end of the FY on September 30.

The CR includes a package of health extenders that would temporarily extend current funding for several public health programs that have expired or are set to expire at the end of the month, including funding for the Medicaid programs in Puerto Rico and other U.S. territories, Community Health Centers, the Demonstration Program for Certified Community Behavioral Health Clinics, the National Health Service Corps (NHSC), teaching health centers' graduate medical education (GME) programs, the Special Diabetes Program, and the Special Diabetes Program for Indians. The CR would also delay Medicaid disproportionate share hospital (DSH) cuts. It would temporarily extend a contract with the National Quality Forum (NQF) to support Medicare and Medicaid quality measure development as well as funding authorizations for the Patient-Centered Outcomes Research Trust Fund and funding for the State Health Insurance Assistance Programs, Area Agencies on Aging, Aging and Disability Resource Centers, and the Health Profession Opportunity Grant. The Medicaid Improvement Fund would be increased to \$2.39 billion for states beginning in FY 2025 to improve their mechanized claims systems. The CR would also implement the Medicaid and CHIP Payment and Access Commission's (MACPAC) to exclude an authorized generic's drug price from the average manufacturer price of the brand product, and to remove manufacturers from the definition of wholesaler in the Medicaid drug rebate program.

Senate Appropriations Update

Senate Appropriations Subcommittee on Labor, Health and Human Services, Education, and Related Agencies Chairman Roy Blunt (R-Mo.) released the panel's fiscal year (FY) 2020 spending bill last week. The bill contains \$178.3 billion in discretionary funding, \$223 million above current levels. The U.S. Department of Health and Human Services (HHS) would receive \$93.4 billion, including:

- \$42.1 billion for the National Institutes of Health (NIH), \$3 billion more than FY 2019;
- \$3.9 billion to address opioid abuse, a \$70 million increase;
- \$3.7 billion for mental health programs, \$305 million more than FY 2019; and
- \$1.63 billion for community health centers.

The bill would provide \$266 million to support the President's initiative to reduce HIV infections by 90 percent over the next decade, including \$140 million for the Centers for Disease Control and Prevention (CDC), \$120 million for the Health Resources and Services Administration (HRSA), and \$6 million for the NIH. The measure would increase funding for the Children's Hospitals GME program, which the administration proposed eliminating, by \$15 million. It would also extend several policies blocking any federal funds for the purposes of needle exchange programs, research involving human

embryos, activity to promote the legalization of schedule I drugs without significant evidence of a therapeutic advantage, and the adopting of standards related unique health identifiers for patients until legislation is enacted to specifically approve such standards. The bill would also extend funding for some health programs that are scheduled to expire on October 1 for an additional year. Unlike the House's Labor-HHS- Education spending bill, the Senate legislation does not include any funding for gun violence prevention research at the CDC or NIH.

The Senate Appropriations Subcommittee on Agriculture, Rural Development, Food and Drug Administration (FDA), and Related Agencies advanced its fiscal year (FY) 2020 spending bill last week by unanimous consent. The measure includes \$23.1 billion in discretionary funding, a \$58 million increase over current spending levels. The FDA would receive \$3.1 billion.

Senate Republicans sought to vote last week on whether to consider a package of spending bills that would fund most of the federal government for FY 2020, including Labor-HHS-Education, as an amendment to the House-passed appropriations legislation, since not all of the individual appropriations bills have successfully been advanced by the Senate appropriations panels. The vote to begin debate on the measure did not receive the 60 votes needed due to Democratic objections related to funding for the President's border wall. Senate Appropriations Committee Chairman Richard Shelby (R-Ala.) has warned that absent an agreement on the border wall, Congress may have to pass additional short-term spending measures.

Ed & Labor Postpones Vote on Surprise Billing Legislation

The House Education and Labor Committee cancelled a vote last week on the panel's bill to address the issue of surprise insurance gaps. The markup, which had not been formally scheduled, was called off amidst divisions among the committee members who were expected to consider surprise billing legislation that was fundamentally aligned with the bill that has been advanced out of the Energy and Commerce Committee. According to Chairman Bobby Scott (D-Va.), the panel is still negotiating technical details to ensure that the final plan applies to all forms of health coverage, including ERISA. The panel also has yet to reach a bipartisan consensus on whether to use a benchmark payment rate or independent dispute resolution (IDR) to settle payment disputes between providers and payers. While Education and Labor Committee leadership have reiterated their commitment to advancing a bipartisan solution to protect patients from surprise medical bills, it is unclear if or when the vote will be rescheduled. Staff for the House Ways and Means Committee have stated that they are also continuing work to draft their own bipartisan surprise billing legislation.

CBO Releases Score of No Surprises Act

The Congressional Budget Office (CBO) has released its [cost estimate](#) of legislation (H.R. 2328) advanced by the House Energy and Commerce Committee that includes provisions aimed at protecting patients from surprise insurance gaps. The agency estimates that the **No Surprises Act** would increase federal revenues by \$20.9 billion and reduce direct spending by \$1.0 billion for a total reduction in the deficit of approximately \$21.9 billion over the next decade. CBO's analysis indicates that premiums would be reduced by around one percent compared to current law. The cost estimate anticipates that providers currently earning in-network rates above the median would see reductions to more typical amounts; the decrease in premiums driven by lower payment rates would be somewhat offset by increases in payment rates for providers currently receiving below-median payments. CBO also assumes that the legislation would create new administrative costs stemming from the independent dispute resolution (IDR) process that would be used to settle out-of-network payment disputes between providers and health plans. The report finds that the inclusion of the IDR policy would offset expected premium reductions by almost 25 percent because of the likelihood that it would result in higher payments to physicians.

E&C to Probe Private Equity's Role in Surprise Billing

The House Energy and Commerce Committee has opened a bipartisan investigation into the impact of private equity control of health care companies on rising health care costs and surprise medical billing. Chairman Frank Pallone (D-N.J.) and Ranking Member Greg Walden (R-Ore.) have sent [letters](#) to three private equity firms – KKR, Blackstone, and Welsh, Carson, Anderson & Stowe – requesting information about how they profit from out-of-network billing practices. The firms have each acquired private physician staffing and emergency transportation companies in recent years. The lawmakers ask the private equity firms to detail their role in the staffing and management of the companies they own as well as their role in negotiations between their physician staffing companies, emergency transport companies, and insurers. The investigation was announced shortly after the New York Times reported that the firms were behind a multi-million dollar lobbying campaign against Congress's proposed legislation to address the issue of surprise insurance gaps. The ads specifically expressed opposition to the use of benchmark payments tied to the median in-network rate for the location in which the service took place to settle reimbursement disputes between providers and insurers.

Senate Passes Autism Research, Education, Intervention Bill

The Senate passed the ***Autism Collaboration, Accountability, Research, Education, and Support Act of 2019*** (H.R. 1058) by voice vote last week. The legislation would authorize \$370 million annually through FY 2024 for research, education, and intervention programs for individuals with autism spectrum disorder. It allows program participants to receive funding throughout their lifetimes, rather than being limited to their childhood years. The bill will now be sent to the President for his signature.

Lawmakers Request FDA Data on Drug Shortages

A bipartisan group of more than 90 lawmakers have [written](#) to the FDA asking the agency to release information about what has been learned from the interagency Drug Shortages Task Force regarding the growing number of drug shortages. According to the letter, the number of drug shortages increased by 27 percent between 2017 and 2018 for a total of 186 shortages of new drugs last year – the most shortages in the last five years. The Drug Shortages Task Force convened several stakeholder listening sessions last year, followed by a public meeting and the opening of a docket for public comment. The lawmakers request details about the information obtained through this process and urge the FDA to prioritize the release of the Drug Shortages Task Force Report. The letter was led by Reps. Eliot Engel (D-N.Y.) and Brett Guthrie (R-Ky.).

Smith, Cramer Request Hearing on Insulin Legislation

Sens. Tina Smith (D-Minn.) and Kevin Cramer (R-N.D.) are [urging](#) Senate Finance Committee leadership to hold a hearing to consider their ***Emergency Access to Insulin Act*** (S. 2004). “Given the immediate impact high insulin costs have on the health and well-being of people who need insulin to survive,” the lawmakers write, “we believe Congress must take swift action to provide emergency assistance to individuals struggling to afford their prescription medications.” Their bill aims to expand access to insulin for those who cannot afford it, hold manufacturers accountable for certain insulin price increases, and promote market competition to lower the price of insulin.

Energy and Commerce Inquires on Use of Opioid Funds

Bipartisan leadership of the House Energy and Commerce Committee have sent [letters](#) to 16 of the states hit hardest by the opioid epidemic, requesting information about the use of federal funds in response to the abuse and addiction crisis. The lawmakers ask how funding from the **SUPPORT for Patients and Communities Act**, the **Comprehensive Addiction and Recovery Act**, the **21st Century Cures Act**, and funding bills for fiscal years (FY) 2018 and 2019 has been deployed and prioritized, how such funds are being used to assist those with substance use disorder (SUD), and what efforts have been successful in aiding opioid use disorder (OUD) treatment, recovery, and prevention. The letters were signed by Chairman Frank Pallone, Jr. (D-N.J.), Ranking Member Greg Walden (R-Ore.), Health Subcommittee Chairwoman Anna G. Eshoo (D-Calif.), Ranking Member Michael Burgess (R-Texas), Oversight and Investigations Subcommittee Chair Diana DeGette (D-Colo.), and Ranking Member Brett Guthrie (R-Ky.) and sent to the governors of Florida, Indiana, Kentucky, Maine, Maryland, Massachusetts, New Mexico, New York, North Carolina, Ohio, Oregon, Pennsylvania, Rhode Island, Tennessee, West Virginia and Wisconsin.

E-Cigarettes Remain Bipartisan Focus on the Hill

Chairman of the House Oversight and Reform Subcommittee on Economic and Consumer Policy Raja Krishnamoorthi (D-Ill.) has [threatened](#) to “seek compulsory process” against Juul following its failure to comply with the panel’s investigation into increasing rates of youth vaping. Lawmakers requested information from Juul in July detailing which schools received funding from the company to implement programming to prevent teen vaping and which schools used Juul’s curriculum. The panel also sought documents related to the contract between Juul and tobacco company Altria. According to the letter from Rep. Krishnamoorthi sent last week, Juul has missed several deadlines to provide the requested information and has violated its promise to cooperate with the committee’s investigation. He plans to consider a subpoena if Juul does not comply with the request for information by October 1. Krishnamoorthi, along with Reps. Diana DeGette (D-Colo.) and Peter King (R-N.Y.), also announced the formation of a new congressional caucus aimed at curbing the country’s teen-vaping epidemic last week.

In a letter to acting Commissioner of Food and Drugs Ned Sharpless, a bipartisan group of senators have called on the FDA to immediately remove all pod- and cartridge-based e-cigarettes from the market until manufacturers can prove that they benefit the public health. The FDA has already stated that it intends to remove all flavored e-cigarettes from the market until they can be reviewed. The lawmakers are pushing for this same standard to apply to all e-cigarette products. The letter was sent by Sens. Dick Durbin (D-Ill.), Lisa Murkowski (R-Alaska), Jeff Merkley (D-Ore.), and Richard Blumenthal (D-Conn.).

Court Rules Against CMS Site-Neutral Payment Policy

The U.S. District Court for the District of Columbia has ruled that the Centers for Medicare and Medicaid Services’ (CMS) site-neutral payment policy exceeds the agency’s statutory authority in reducing the payment rate for clinic services at off-campus provider-based clinics. The policy, which was contained in last year’s hospital outpatient payment rule, would have set the same payment rate for Medicare patients in off-campus, hospital-based outpatient departments as the lower reimbursement rate received by freestanding physician offices. The regulation went into effect January 1st and was scheduled to be phased in over two years. It is estimated that the policy would have effectively cut \$300 million in Medicare spending to the hospital-based facilities this year. CMS had hoped to discourage hospitals from building new facilities in order to receive the higher Medicare payment rates for certain clinic-visit services.

Upcoming Congressional Hearings and Markups

House Oversight and Reform Subcommittee on Economic and Consumer Policy hearing “Don’t Vape: Examining the Outbreak of Lung Disease and CDC’s Urgent Warning Not to Use E-Cigarettes;” 10:00 a.m., 2154 Rayburn Bldg.; September 24

House Energy and Commerce Subcommittee on Oversight and Investigations hearing titled “Sounding the Alarm: The Public Health Threats of E-Cigarettes;” 10:00 a.m., 2123 Rayburn Bldg.; September 25

House Veterans’ Affairs Subcommittee on Health hearing “MISSION Critical: Care in the Community Update;” 10:00 a.m., 210 Capitol Bldg.; September 25

House Appropriations Subcommittee on the Departments of Labor, Health and Human Services, Education, and Related Agencies hearing “Investments in Medical Research at Five Institutes and Centers of the National Institutes of Health;” 10:00 a.m., 2358-C Rayburn Bldg.; September 25

House Energy and Commerce Subcommittee on Health hearing “Making Prescription Drugs More Affordable: Legislation to Negotiate a Better Deal for Americans;” 10:30 a.m., 2322 Rayburn Bldg.; September 25

Senate Special Committee on Aging hearing to examine promoting healthy aging, focusing on living your best life long into your golden years; 2:30 p.m., 562 Dirksen Bldg.; September 25

House Veterans’ Affairs Subcommittee on Technology Modernizations hearing titled “The Future of VA Scheduling: Implementing a Commercial Off the Shelf Scheduling Solution at the Department of Veterans Affairs;” 10:00 a.m., 210 Capitol; Sept. 26

House Education and Labor Subcommittee on Health, Employment, Labor, and Pensions hearing “Making Health Care More Affordable: Lowering Drug Prices and Increasing Transparency;” 2:00 p.m., 2175 Rayburn Bldg.; September 26

House Energy and Commerce Subcommittee on Health field hearing on the public health threat posed by gun violence; time TBD, University of Chicago Medical Center; October 3

Recently Introduced Health Legislation

H.Res.557 — Expressing support for designation of September 2019, as “National Dystonia Awareness Month” and raising awareness and understanding of the disorder of dystonia; Sponsor: Rep. Levin, Andy [D-MI-9]; Committees: House - Energy and Commerce

H.R.4336 — To amend the Patient Protection and Affordable Care Act to align open enrollment periods for Exchange plans with the deadline for filing Federal income tax returns, and for other purposes; Sponsor: Rep. Bera, Ami [D-CA-7]; Committees: House - Energy and Commerce

H.Res.559 — Expressing support for designation of the week of September 15, 2019, through September 21, 2019, as “Balance Awareness Week”; Sponsor: Rep. Johnson, Eddie Bernice [D-TX-30]; Committees: House - Energy and Commerce

H.R.4350 — To amend title XVIII of the Social Security Act to modernize payments for ambulatory surgical centers under the Medicare program, and for other purposes; Sponsor: Rep. Larson, John B. [D-CT-1]; Committees: House - Energy and Commerce, Ways and Means

H.R.4353 — To amend the Public Health Service Act to establish a grant program to provide self-harm and suicide prevention services in primary care offices, and for other purposes; Sponsor: Rep. DeSaulnier, Mark [D-CA-11]; Committees: House - Energy and Commerce

S.2481 — A bill to facilitate effective research on and treatment of neglected tropical diseases through coordinated domestic and international efforts; Sponsor: Sen. Brown, Sherrod [D-OH]; Committees: Senate - Health, Education, Labor, and Pensions

S.2492 — A bill to amend the Public Health Service Act to provide best practices on student suicide awareness and prevention training and condition State educational agencies, local educational agencies, and tribal educational agencies receiving funds under section 520A of such Act to establish and implement a school-based student suicide awareness and prevention training policy; Sponsor: Sen. Gardner, Cory [R-CO]; Committees: Senate - Health, Education, Labor, and Pensions

H.Con.Res.63 — Expressing the sense of Congress that the Centers for Medicare & Medicaid Services should take action to ensure that home infusion therapy services are accessible to all Medicare beneficiaries; Sponsor: Rep. Engel, Eliot L. [D-NY-16]; Committees: House - Energy and Commerce, Ways and Means

H.R.4370 — To amend title 38, United States Code, to direct the Secretary of Veterans Affairs to furnish hyperbaric oxygen therapy to veterans with traumatic brain injury or post-traumatic stress disorder; Sponsor: Rep. Biggs, Andy [R-AZ-5]; Committees: House - Veterans' Affairs

H.R.4379 — To amend the Patient Protection and Affordable Care Act to require qualified health plans to have in place a process to remove from publicly accessible provider directories of such plans providers that are no longer within the network of such plans, and for other purposes; Sponsor: Rep. Axne, Cynthia [D-IA-3]; Committees: House - Energy and Commerce

H.R.4381 — To effectively staff the public elementary schools and secondary schools of the United States with school-based mental health services providers; Sponsor: Rep. Clark, Katherine M. [D-MA-5]; Committees: House - Education and Labor

H.R.4386 — To amend title II of the Social Security Act to eliminate the Medicare and disability insurance benefits waiting periods for disabled individuals; Sponsor: Rep. Doggett, Lloyd [D-TX-35]; Committees: House - Ways and Means, Energy and Commerce, Transportation and Infrastructure

H.R.4393 — To amend title XIX of the Social Security Act to provide for a State option under the State Medicaid plan to provide DNA sequencing clinical services for certain children, provide for a study by the National Academy of Medicine on the use of genetic and genomic testing to improve health care, and for other purposes; Sponsor: Rep. Swalwell, Eric [D-CA-15]; Committees: House - Energy and Commerce

S.Res.317 — A resolution recognizing the seriousness of polycystic ovary syndrome (PCOS) and expressing support for the designation of September 2019 as "PCOS Awareness Month"; Sponsor: Sen. Warren, Elizabeth [D-MA]; Committees: Senate - Health, Education, Labor, and Pensions

S.Res.318 — A resolution to support the Global Fund to fight AIDS, Tuberculosis and Malaria, and the Sixth Replenishment; Sponsor: Sen. Risch, James E. [R-ID]; Committees: Senate - Foreign Relations

S.2495 — A bill to amend the Internal Revenue Code of 1986 to establish an exception to the penalty on early distributions from qualified plans for individuals diagnosed with certain terminal illnesses; Sponsor: Sen. Burr, Richard [R-NC]; Committees: Senate - Finance

S.2496 — A bill to amend title II of the Social Security Act to eliminate the Medicare and disability insurance benefits waiting periods for disabled individuals; Sponsor: Sen. Casey, Robert P., Jr. [D-PA]; Committees: Senate – Finance

S.2499 — A bill to effectively staff the public elementary schools and secondary schools of the United States with school-based mental health services providers; Sponsor: Sen. Merkley, Jeff [D-OR]; Committees: Senate - Health, Education, Labor, and Pensions

S.2500 — A bill to amend the Public Health Service Act to authorize a loan repayment program for mental health professionals to relieve workforce shortages, and for other purposes; Sponsor: Sen. Harris, Kamala D. [D-CA]; Committees: Senate - Health, Education, Labor, and Pensions

S.2504 — A bill to amend title 38, United States Code, to direct the Secretary of Veterans Affairs to furnish hyperbaric oxygen therapy to veterans with traumatic brain injury or post-traumatic stress disorder; Sponsor: Sen. Hoeven, John [R-ND]; Committees: Senate - Veterans' Affairs

S.2506 — A bill to direct the Administrator of the Federal Aviation Administration to enter into appropriate arrangements with the National Academies of Sciences, Engineering, and Medicine to provide for a report on the health impacts of air traffic noise and pollution, and for other purposes; Sponsor: Sen. Warren, Elizabeth [D-MA]; Committees: Senate - Commerce, Science, and Transportation

H.Res.567 — Supporting the designation of September 20, 2019, as “National Concussion Awareness Day”; Sponsor: Rep. Pascrell, Bill, Jr. [D-NJ-9]; Committees: House - Energy and Commerce

H.R.3 — To establish a fair price negotiation program, protect the Medicare program from excessive price increases, and establish out-of-pocket maximum for Medicare part D enrollees, and for other purposes; Sponsor: Rep. Pallone, Frank, Jr. [D-NJ-6]; Committees: House - Energy and Commerce, Ways and Means, Education and Labor

H.R.4398 — To amend the Federal Trade Commission Act to prohibit anticompetitive behaviors by drug product manufacturers, and for other purposes; Sponsor: Rep. Cicilline, David N. [D-RI-1]; Committees: House – Judiciary

H.R.4399 — To amend the Federal Food, Drug, and Cosmetic Act to prohibit the approval of new abortion drugs, to prohibit investigational use exemptions for abortion drugs, and to impose additional regulatory requirements with respect to previously approved abortion drugs, and for other purposes; Sponsor: Rep. Latta, Robert E. [R-OH-5]; Committees: House - Energy and Commerce

H.R.4400 — To amend the Public Health Service Act to provide for an internet website to provide educational materials for health care providers, patients, and caregivers, regarding the meaning of the terms, and the standards for review and licensing of, biological products, and for other purposes; Sponsor: Rep. Bucshon, Larry [R-IN-8]; Committees: House - Energy and Commerce, Ways and Means

H.R.4404 — To amend the Federal Food, Drug, and Cosmetic Act to require that the label of drugs with an increased risk of suicide or depression present such increased risk prominently, and for other purposes; Sponsor: Rep. Rush, Bobby L. [D-IL-1]; Committees: House - Energy and Commerce

H.R.4420 — To amend subpart 1 of part B of title IV of the Social Security Act to ensure that mental health screenings and assessments are provided to children and youth upon entry into foster care; Sponsor: Rep. Lawrence, Brenda L. [D-MI-14]; Committees: House - Ways and Means

H.R.4428 — To establish a special enrollment period for family members of an individual who has died by suicide, to establish a competitive grant program to provide services and support to friends and family members impacted by an individual's suicide, and for other purposes; Sponsor: Rep. Wild, Susan [D-PA-7]; Committees: House - Energy and Commerce, Ways and Means, Oversight and Reform

S.Res.321 — A resolution designating September 2019 as “National Prostate Cancer Awareness Month”; Sponsor: Sen. Menendez, Robert [D-NJ]; Submitted in the Senate, considered, and agreed to without amendment and with a preamble by Unanimous Consent.

S.2515 — A bill to require the Food and Drug Administration to conduct a study on the effects of radiofrequency radiation in the 5G networks on human health; Sponsor: Sen. Merkley, Jeff [D-OR]; Committees: Senate - Health, Education, Labor, and Pensions

S.2519 — A bill to protect the public health by prohibiting non-tobacco e-cigarette flavors and ensuring electronic nicotine delivery systems are tamper-proof; Sponsor: Sen. Romney, Mitt [R-UT]; Committees: Senate - Finance

S.2522 — An original bill making appropriations for Agriculture, Rural Development, Food and Drug Administration, and Related Agencies for the fiscal year ending September 30, 2020, and for other purposes; Sponsor: Sen. Hoeven, John [R-ND]; Committees: Senate - Appropriations