what is going to be proposed tonight, how we are going to save money on health care. It is not by investing more in prevention; it is not by moving people out of emergency rooms and putting them into real programs and care. It is taking people who have good insurance and making their good insurance bad insurance. It is going out and taking folks who have had the great benefit of working for an employer that provides a comprehensive package of benefits, and it is becoming less and less likely these days that even good employers out there can afford to give a robust package of benefits.

What the President is going to propose today is that for families that have had the good fortune to find a good insurance plan, they are going to tax that employer. They are going to make it less likely that you are going to get good insurance anymore. So we are going to get a proposal today which is going to actually result in worse health care for a lot of families.

I guess the point here is that, you know, again, if we are going to listen to the words that come from this administration, we heard in last year's State of the Union that we need to confront the rising cost of care, strengthen the doctor/patient relationship and help people afford the insurance coverage we need, if we want to talk about that, then we need to do something about that. And how we do something about that is not by taking the haves and putting them into the column of the have-nots. It is by keeping the haves where they are on health care and taking the have-nots and giving them that same level of health care.

We can absolutely do that without adding cost to the system, because those have-nots, as Mr. RYAN said, end up getting care. They just end up getting the most expensive, the most unfortunate type of care, that being crisis care. We can do a better job on that.

And, Mr. MEEK, as you said, we can make sure that we continue to have that discussion on Iraq, which may be missing tonight.

Mr. RYAN of Ohio. One of the issues, you know, the more you talk, the more you see how all this just really ties together. This is health care costs and tying in a way to the minimum wage. The average family health care premium in 2005 was $10,880; and the salary of a full-time year-round minimum-wage worker was less than that, $10,700. So you will work as a minimum-wage worker 40 hours a week for an entire year and not even be able to pay for your full health care bill.

Now, in the United States of America, there is something wrong with that. There is something wrong with the wage of the minimum-wage worker, and there is obviously something wrong with the cost of health care in the United States because of this kind of backward system that we now have that just basically treats diseases and is not focusing probably like it should in preventing a lot of these things from happening.

And I think the more we reach out through the SCHIP program to make sure that these families who are qualified for children's health care know that they are qualified, to get them signed up, because at the end of the day it is the right thing to do, it is the compassionate thing to do, but at the end of the day it is going to save everybody a lot more money, too.

If we can get these kids at a young age and make sure they are treated, evaluated, they know the direction that they are going in, they know the medical history of both parents so that they can be treated accordingly.

I appreciate what you are saying and I appreciate you bringing up the issue of health care.

I know we are running down here; the clock is ticking, Mr. MEEK. I would be happy to yield to you in order to get us down the road here of wrapping things up. I appreciate all the comments that have been made here, and I appreciate our young friend being here with us, who is probably older than me.

I yield to our fearless leader from Florida.

Mr. MEEK of Florida. Mr. Speaker, I think in light of bipartisanship, I know we split the hour, and I see my colleague on the Republican side is already here, in the light of bipartisanship, we will yield back our 10 minutes that we have left on our time to get off on a good note here.

Mr. RYAN of Ohio. Mr. Speaker, for any Members who want to, also to their constituents, if they want to look at some of these charts we have, www.speaker.gov/30something, get on the Web site, send us an e-mail at 30somethingdems@mail.house.gov, you will get a chance to look at all these charts.

I appreciate our friend from Connecticut joining us. I look forward to our President's speech tonight and hope it is inspiring and filled with good information and good public policy that we can work on in a bipartisan way.

## ELECTION OF MEMBERS TO CERTAIN STANDING COMMITTEES OF THE HOUSE

Mr. RYAN of Ohio (during the Special Order of Mr. MEEK of Florida). Mr. Speaker, by direction of the Democratic Caucus, I offer a privileged resolution (H. Res. 85) and ask for its immediate consideration.

The Clerk read the resolution, as follows:

H. RES. 85

*Resolved,* That the following named Members be and are hereby elected to the following standing committees of the House of Representatives:

(1) COMMITTEE ON FINANCIAL SERVICES.—Mr. Wexler (to rank immediately after Mr. Donnelly).

(2) COMMITTEE ON THE JUDICIARY.—Ms. Wasserman Schultz (to rank immediately after Mr. Davis of Alabama).

(3) COMMITTEE ON SCIENCE AND TECHNOLOGY.—Mr. Kanjorski (to rank immediately after Mr. McNerney), Ms. Hooley (to rank immediately after Mr. Kanjorski).

(4) COMMITTEE ON SMALL BUSINESS.—Ms. Millender-McDonald, Mr. Jefferson, Mr. Shuler, Mr. Gonzalez, Mr. Larsen of Washington, Mr. Grijalva, Mr. Michaud, Ms. Bean, Mr. Cuellar, Mr. Lipinski, Ms. Moore of Wisconsin, Mr. Altmire, Mr. Braley of Iowa, Ms. Clarke, Mr. Ellsworth, Mr. Johnson of Georgia, Mr. Sestak.

Mr. RYAN of Ohio (during the reading). Mr. Speaker, I ask unanimous consent that the resolution be considered as read and printed in the RECORD.

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

There was no objection.

The resolution was agreed to.

A motion to reconsider was laid on the table.

## REPORT ON RESOLUTION PROVIDING FOR CONSIDERATION OF H. RES. 78, PERMITTING DELEGATES AND THE RESIDENT COMMISSIONER TO CAST VOTES IN THE COMMITTEE OF THE WHOLE

Ms. SLAUGHTER (during the Special Order of Mr. MEEK of Florida), from the Committee on Rules, submitted a privileged report (Rept. No. 110–3) on the resolution (H. Res. 86) providing for consideration of the resolution (H. Res. 78) amending the Rules of the House of Representatives to permit Delegates and the Resident Commissioner to the Congress to cast votes in the Committee of the Whole House on the state of the Union, which was referred to the House Calendar and ordered to be printed.

## REPUBLICAN PERSPECTIVE ON 110TH CONGRESS

The SPEAKER pro tempore. Under the Speaker's announced policy of January 18, 2007, the gentlewoman from Tennessee (Mrs. BLACKBURN) is recognized for 60 minutes as the designee of the minority leader.

Mrs. BLACKBURN. I thank the gentlemen for yielding their time back and doing it in the spirit of bipartisanship.

Mr. Speaker, I hope that now that the 100 hours is out of the way and we are to the point of having the State of the Union, that we will see this body return to a format of regular order and regular process and rules that we have had in place and have respected and this body has abided by through the course of this great Nation. That would, indeed, be welcomed.

In the 100-hour agenda we have seen the majority party take action on some of the issues that they had chosen to address. Their 100-hour agenda has included legislation on student loans that really is not going to do anything to make loans more accessible and available to those students that are trying to get into college. It is not going to reduce the cost of college while it is there. And it will take effect

after a person has graduated and then is working and is looking at consolidating those loans and paying them back.

So that one was a little bit of a head-scratcher for a lot of our constituents because we have worked tirelessly to make college more affordable, to raise the caps on what could be loaned for students to get those Stafford loans, Pell Grants and increasing the funding for those, things that actually would make a difference, and that is an accomplishment of the Republican majority over the past decade.

Minimum wage. One of our colleagues had just mentioned minimum wage. And I will point out, Mr. Speaker, to the Members of this body that the actions that were taken on minimum wage, we heard from our small business community. Certainly small business employers that are in my district were very concerned about this. We have heard estimates of 5 to 7 to as much as $17 billion in costs that this would be to our small businesses. That is of tremendous concern. That is a cost that is going to get passed on.

□ 1600

That is a cost that is going to get passed on. And of course in the minimum wage bill, we had the unfortunate error of Tunagate that was crept into that bill somehow in one of the sessions as the bill was being drafted, and there again, not going through regular order in making its way to the House. And we hope that we will see that situation addressed.

And the tuna producers that American Samoa were exempted from that, American Samoa was exempted from that minimum wage. That is not fair to the rest of the tuna producers in this country. It is not fair to the rest of the companies that sell tuna and tuna products, and we do hope that there will be attention placed to that and that issue will be addressed, because it was a northern California, San Francisco, company that produced the tuna that is harvested in American Samoa. We do have concerns about favoritism that was shown there.

The Medicare bill that was passed in the first 100 hours will indeed yield additional costs to the VA. We have had some numbers there that are of quite concern, as much as three-quarters of a billion dollars that this would end up costing, be an additional cost to the veterans health care system, to our veterans for their pharmaceuticals.

And what we have heard from our seniors is that they are pleased with Medicare part D. They are pleased to have access to affordable health care. They are very pleased that prescriptions and pharmaceuticals and therapies that at one point they did not have, that they now have access to that.

It was a little bit of a head-scratcher, Mr. Speaker, that a program that has been so well received by our seniors, that the new majority would come along and say, well, we are going to change it. We are going to tweak it. It does not matter if it is working well.

And it leads us to question: Is it just they want programs that only they design and only they grow, or do they want programs that are going to be of service to the American people?

Another of the bills that came through was the 9/11 Commission implementation, not exactly what had been promised in campaign promises. But, you know, the new majority did take the bill up and did take action. And we have heard from a lot of our businesses that are in logistics and transportation with great concerns, great concerns about the cost.

Mr. Speaker, when you pass additional fees and additional mandates, and additional costs on to business, guess what? Ronald Reagan was right. It is the people that end up paying those costs. It is not businesses that are bearing those costs and absorbing them. They get passed on to you, to me, and to other consumers, the taxpayers, who see their costs go up because the business that they are doing business with is having to meet the mandates of who? Guess what? The mandates of the Federal Government.

So, yes, this has been a very expensive first 100 hours. And it has been troublesome in that regular order was not abided by, the bills were not going through committees and having hearings and having the due diligence process that we as Members of Congress are bound to do. And then they were just coming to the floor without those hearings.

I just had another of our colleagues mention something on health care. Of course, this is an issue that we know the President is going to speak a little bit about this evening. Before we move on to a couple of other points, I do want to make a couple of observations about health care and some of the discussion that was taking place on the issue of health care.

We know the President is going to talk about health care tonight. Now, the Republicans, the conservatives, have an approach that they think is a right approach. We think that it is appropriate for small businesses to be able to band together and come together under an umbrella and purchase health care, health coverage, health insurance for their employees.

That is very good. Our Nation has 40 million uninsured, and to be able to have groups come together, small businesses, let us say all of your florists, or all of your auto supply companies, or all of your plumbing companies, or companies that are a part of the Chamber of Commerce or other small business organizations, or women-owned businesses, businesses of like groups can come together and make that purchase of insurance.

It is called small business health plans or association health plans, very good idea for helping our Nation's 40 million uninsured, and the right type, the right type step because it helps make health care insurance affordable.

Mr. Speaker, that is positive. That is a free-market way to address the situation. It is a pro-small-business way to address the situation. It is the right step.

Another good step is allowing a tax deduction, $5,000, $7,500, for small business that buy insurance. That is the great step. That is the way it should be. You know, when you start looking at the end of the year and filling out your taxes, that is money that you have earned, and being able to take that deduction because you have done something that is right, way to go.

It should be incentivized. There should be deductions for that. And it is appropriate that that take place. Now, those are private sector, free market responses to addressing the health care situation. They work very well with the health savings accounts that were passed as part of the Medicare modernization when that bill came forward in 2003.

Health savings accounts have been tremendously popular. We now know that we have about 15 million Americans that are insured through health savings accounts. The number is growing. By 2010 we know that there will be over 20 million American families that are there and insured through health savings accounts, having the opportunity to take responsibility for their health care from dollar one.

And continuing to incentivize health savings accounts, tax deductions there. There again, it is a private sector, free-enterprise solution to the health care situation, more market-driven, allowing people to have control of access, to take control of their health care decisions, and to participate in those, have choice over who their physician is. Those are the right things to do.

Now, one of my colleagues just made a statement about the haves and the have-nots in health care, and made a statement that health care could be provided and, I think I am quoting this correctly, said: We could do it without any additional cost to the system.

Oh, Mr. Speaker, let me tell you, when I hear things like that, without any additional cost to the system, it certainly causes me to pay a little bit closer attention, because one of the things that we have realized, Mr. Speaker, is you know what? Nothing is free. There is nothing free. Nothing. There is no free lunch. There is nothing free in health care. Somebody is paying the bill.

What we see take place many times is cost shifting, and you will see costs shift within a system. Now, in my wonderful State of Tennessee, we have had an interesting situation take place. We have had a program that went into place in January 1, 1995. It is called TENNCARE, and it was basically a template for HILLARY CLINTON's health care plan. And one of the talking points on it was: There will be no additional costs. We will just spread out

the risk. We will allow those who are uninsured, up to so many percent of poverty, 400 percent of poverty, to come in and to access health care, and we will spread the risk. We will do it through managed care organizations. And managed care organizations can compete for the opportunity to provide this insurance.

Well, it has been a program that has had quite a bit of turmoil. We now see that nearly 30 percent of the individuals in our State are on the program, and it is eating up about 36 percent of our State's budget.

The reason for that, Mr. Speaker, is because whenever you are trying to give things for free, someone else is paying. In the case of TENNCARE, it has been the citizens of our State, the taxpayers of our State. And there is no way to ever keep up with the exponential growth of that program. So I would encourage all of my colleagues to be very, very thoughtful as we move forward on the health care debate.

There is no such thing as being free. There is no way to do this with no additional cost, because, as you try to make more things free, what happens is your access is restricted. What happens is you have fewer physicians who are available for those individuals that need those services. What have you when things are free is people flood into that State trying to get that for a reduced fee, and your own citizens of the State who need the program many times are not able to access it.

So I would step very cautiously as our colleagues on the other side of the aisle talk about health care that is going to be free, and universal health care and HILLARY CLINTON's health care plan. There are some pitfalls that are there, and they deserve to be recognized by the body of this House.

As we talk about health care, I would love to yield to the gentleman from Georgia, Dr. PRICE, a distinguished Member of this body who is an expert on health care, for some of his thoughts on the issues of the day.

Mr. PRICE of Georgia. Mr. Speaker, I thank the gentlewoman for yielding. I want to thank you for your leadership and your organization of this hour, and day in and day out of working here in the Congress to represent your constituents in Tennessee, but working so diligently on behalf of the hardworking American taxpayer out there, making certain that their interests are upheld here in the House of Representatives.

I appreciate you bringing up the issue of health care. There are a couple of things that I would be interested in talking about today. But the issue of health care is near and dear to my heart. As you mentioned, I am a physician, or was in my former life before coming to Congress, spent over 20 years in the private practice of orthopedic surgery outside Atlanta.

One thing that I knew for certain and that my patients knew for certain was that when doctors and patients are able to make health care decisions, then good decisions get made. When insurance companies or government inserts themselves into those decisions, then most often, most often those decisions do not resemble the kind of decisions that individual persons would make in very personal health care decisions that they have.

I appreciate the comments that you made. I would like to commend the President for putting on the table what I believe will be discussed tonight in his State of the Union; that is, the individual tax deductibility of health insurance. I have been a longtime supporter of the right of individuals to have the same kind of benefit that employers do in the purchase of health insurance.

So I am pleased that we have heard that that is indeed going to be a possibility brought forward by the President this evening. It would give so many people an opportunity to purchase health insurance that right now are not able to do so financially. So I look forward to that proposal coming forward tonight. And I would be happy to yield back to the gentlewoman and talk about some other issues if you so desire.

Mrs. BLACKBURN. Mr. Speaker, I thank the gentleman for yielding. Before I yield back to him for some further comments, I just want to highlight one of the things that he brought up as a physician, and someone who deals with this.

When you have a government-run program, what you are doing is putting bureaucrats in charge of your health care decisions, and you are removing that doctor-patient relationship many times. You are putting a barrier there between the individual and that doctor. Someone else that is removed from the process is making that decision; thereby it removes the patient many times from that decision process.

□ 1615

That is something that we do not want to see this Nation run toward. Our seniors, our families want to be able to participate in making those health care decisions for themselves. We are so pleased to know that the President will talk about, as I said earlier, the private sector free market-based approach to solving our health care problem.

Mr. Speaker, that is what it is going to require, innovation, thinking outside of the box and being certain of something we know: access, affordability, and preserving that doctor-patient relationship.

In my case, preserving health care for Tennesseeans. In the gentleman from Georgia (Mr. PRICE), preserving health care for Georgians. That is where our focus will be as we move forward on this discussion. We do not want a government-run, government-directed program that is going to place barriers between patients and the individuals that are making those decisions with their health care professionals.

Mr. PRICE of Georgia. Sometimes it is hard to get your arms around what do you mean the government being involved in the process.

I would suggest to my colleagues here and others who are listening that we already see the inroads of some government decisions. One of them is what sounded wonderful at the time, the HIPAA legislation, Health Insurance Portability and Accountability Act, which was supposed to make every individual citizen in this Nation make their health records more secure and private. In fact, what that bill has done is make that information less private and more available to more individuals than ever before. That is because, as you well know when you go in to see your doctor, the first thing you have to do is sign a ream of documents. You feel like you are in a lawyer's office. You sign a ream of documents.

What you are doing when you sign those documents is providing so that the physician, when he or she shares your medical information with anybody, isn't liable for violating HIPAA. Medicine is a collegial activity. It requires that Dr. A communicate with Dr. B who communicates with Dr. C, and they get together and come up with the best solution for anybody's health problem.

When you are not able to share that information, the quality of health care goes down. What has happened because the government had this brilliant idea to get involved in the process is to say we will make it so that your information cannot be shared with anybody unless you give your permission. So because Dr. Smith doesn't know when he or she is going to run into Dr. Jones to discuss that case, it is imperative that every single patient sign away their right to any privacy so the doctor can communicate when that time arises.

What the government has done by putting these rules in place, which sounded wonderful, but what the government has done is made it so every single patient in this Nation, their medical information is less private and less secure than it was before governmental intervention.

Mrs. BLACKBURN. I thank the gentleman for bringing that forward. The unintended consequences are many times what is so difficult to deal with. In theory to bureaucrats sitting in buildings, that sounded like a great deal: let's have everybody sign the forms.

In practice what happened for physicians, it was additional paperwork, additional staff, and removing the patient from the process, making it longer before they get a definitive diagnosis and know how to begin a protocol and treatment that will restore their health, things that impede a quality of life that our constituents desire.

So those unintended consequences many times get in the way. We are just very hopeful that we will continue the focus and that the Democrats will join

us in wanting a private sector, free-market solution to health care and not a government-run bureaucracy.

Mr. PRICE of Georgia. If the gentlewoman would yield, I appreciate that description of a free market private system health care. I call it patient centered when I am talking about private because it means that patients are empowered to do what they feel is appropriate in their instance.

When you have a medical problem or when somebody else has a medical problem, their decision about what they want to do to treat that may not be what mine would be or my family's would be. It is only when individuals get to make those personal decisions that we are able to make certain that patient-centered health care exists.

When we try to describe what the future may be if our friends on the other side of the aisle had their way and put in place a government system that they tried to do in the early 1990s, all you have to do is think about the last time you were at your doctor's and you needed a test or an X-ray or some type of procedure done. Well, it is very likely that discussion and education that you got as a patient with your physician didn't last terribly long and you came to an understanding and agreement about what would happen next.

What you may not have known what happens next is one of those employees in that office then gets on the phone and talks to the insurance company to make certain that it is okay. Most often we have gotten that process down to be relatively streamlined. But can you imagine if we put the government in charge of health care and you had to get on the phone and get the government's permission, Washington's permission, so you could have an MRI or biopsy or some other procedure? That is what is looming.

The problem is now just time and inconvenience. The problem is that if you, in order to have that happen and to be effective from the government, from Washington's viewpoint, if you were not to follow those rules, there would be significant punishment. In fact, you would violate the law.

So what we saw in the early 1990s in the proposal that was put on the table, if you as a patient or a physician were to do something that wasn't allowed by the government, that would be a crime. It wouldn't just be a bad decision; it would be a crime.

So what our friends on the other side of the aisle are in fact proposing in the small print, and I know they like bumper-sticker politics, I know they like to give these glorious titles to things, and they sound wonderful, but when you get down to the fine print, what you see, especially in the area of health care that I feel so passionately about, when you get down to the fine print, what it means is that patients and doctors will be exposed to criminal violations if they don't follow what Washington says they ought to do. That concerns me very, very greatly; and I know it does you.

I yield back.

Mrs. BLACKBURN. It does indeed. I thank the gentleman for yielding back.

Having this process that gets more and more convoluted every single day is of such concern to our constituents who just want to be able to go to the doctor, have a relationship with the doctor and know a little bit about what to expect.

As I said earlier, not knowing what to expect has been one of the interesting points that we have dealt with in this first 100 hours. I think that we all have been a little bit concerned about a bill that was brought forward on Friday. I know my constituents asked about it as they heard about it over the weekend. We talked about it on the floor some this morning, and this is allowing the Delegates voting rights.

I have had constituents say, well now, wouldn't that require an amendment to the Constitution? They remember when this debate took place at different times through history back in the 1970s and again in the early 1990s when there were those that wanted to give voting rights to our territories. They are very, very concerned about this, and rightfully so.

This morning on the floor earlier I quoted a comment that was made by the Democrat Speaker of the House in 1970, Tom Foley, who said: ''It is very clear that a constitutional amendment would be required to give Delegates a vote in the Committee of the Whole or in the full House.'' That was taken from a New York Times editorial.

Now, this is something that we have to realize, we hold our Constitution and the orderly process and the rule of law that is laid forth in that Constitution, we hold that to be meaningful. We recognize the necessity, Mr. Speaker, to respect the Constitution of this great land. We respect that it is built on one man, one vote and equal representation under the law.

So when we hear about giving the residents of our territories a vote, it is of concern to us and it does raise several succinct points that we have discussed on the floor today. It is a point worthy of discussion because it appears that since this has not gone through regular order and through the committee process, we haven't held hearings, this is nothing more than an unconstitutional power grab in order to try to move the new majority's agenda. It is of tremendous concern.

I yield to the gentleman from Georgia for some comments on the issue.

Mr. PRICE of Georgia. I thank the gentlewoman for yielding and her leadership on this issue.

The issue we are talking about is House Resolution 78, H. Res. 78. As the gentlewoman mentioned, it was just brought up as a possibility that we would be voting on it this week this past Friday. I would venture to say, Mr. Speaker, that in your race and I know in my race and I doubt in anybody's race around this Nation, save possibly the elections in the territories, did anyone ever address the issue of Delegates voting on the floor of the House of Representatives. I can honestly say I don't know of anybody who used that as an issue that they ran on in November.

We all appreciate that the American people were interested in change when they voted in November, but I'm with you: I don't think that the American people were interested in this kind of change, this kind of change that I believe to be unconstitutional.

When I go to schools, middle schools and high schools, around my district and I talk to students and we talk about the process of government, oftentimes I will ask them a question: Can we make any law we want in the House of Representatives? Can we make any law in Congress we want?

Sometimes you will get some folks that say yeah; but most often the young men and women and boys and girls in my district and I know across this Nation know and understand and appreciate that the guiding principles that we follow here are defined in the Constitution. I know that it is challenging sometimes for people to be held to make certain that they follow the Constitution, because there are some really stiff rules in this Constitution.

But one of the ones at the very beginning, article I, is about the legislative branches, as you well know, Mr. Speaker, and I believe article I was about the legislative branch because the Founders knew the incredible importance of the representative branch of government, the legislative branch of government. And section 1 is about all powers being vested in the House and Senate. Article I, section 2 states: ''The House of Representatives shall be composed of Members chosen every second year by the people of the several States.''

It didn't mention anything about territories, Delegates from territories. I am so pleased, and we are really aided by the representation in the committees by the Delegates from the territories, by the Resident Commissioner from Puerto Rico, by the Delegates from Guam, the Virgin Islands and American Samoa, and by the Delegate from the District of Columbia, but clearly they do not represent States.

In this Chamber, Mr. Speaker, when we gather as a Committee of the Whole or as the House of Representatives, it is clear that the Founders and that our Constitution states that an individual to vote in that instance must be a Member of the House and a representative of the State.

Mrs. BLACKBURN. Mr. Speaker, repeating again from the Constitution that the representatives of this body are popularly elected from the several States, and that is so important, and I want to talk for just a moment about the size of our districts.

Mine is right around 700,000 people. We have some that I think are as low as 640,000, 650,000. They are going to vary just a little bit. But that is the size of them.

We do appreciate so much the guidance that is given by the Delegates from the territories. They are a valuable participation and a valuable addition and a wonderful and treasured resource of this body. We need their opinion and their input. But the Constitution does not allow for their having a vote.

I think in Guam we have about 155,000 people, and in American Samoa there are about 57,000 people.

□ 1630

So we look at one man, one vote and the equal representation, and then we have to say, my goodness, that is just really a far smaller number. That is the size of many of our towns or our counties that we represent when you have a district like mine. So I think that it is important for us to realize that.

And it is important for us also to realize that these are Delegates that will be able to vote to raise your taxes, but they are not paying those Federal income taxes, and that is of tremendous concern to our constituents.

Mr. Speaker, we have dubbed this time and again the ''hold on to your wallet Congress'' because it seems as if they are looking for ways to increase the cost of government and increase the size of that bureaucracy. And our concern is that this is another of those ways that would make it easier to raise your taxes.

And I yield back to the gentleman from Georgia.

Mr. PRICE of Georgia. I thank you so much for yielding. And I appreciate your bringing up that point because it is so important and really so basic to our Nation.

Our Nation began for a variety of reasons, but not the least of which is that our Founding Fathers believed that they were being taxed without any ability to have representation in the body that was deciding whether or not to tax them. They had taxation without representation.

Well, this is really turning it on its head because, as you mentioned, the individuals, the people in American Samoa, Guam, Puerto Rico, and the Virgin Islands, wonderful people that they are, but they are not obligated to pay any Federal income tax. None. So what we would be doing would be allowing Members, individuals in this House of Representatives who would be described as Members, to vote on whether or not to raise income taxes, but not be affected personally and not have the people that they represent be affected. So that would be representation without taxation. And I simply believe and I think that our constituents believe across this Nation that that is fundamentally wrong. Fundamentally wrong.

And I want to get back for just a moment to the issue of one person/one vote, because when people say, well, it does not make a whole lot of difference if the districts are a little bit different size. What difference does that make? But, again, our Founders knew and understood wisely that every Member of this House of Representatives ought to represent essentially the same number of people so that when individuals at home, citizens at home, vote for their representative, their vote counts basically the same as every other citizen of this Nation. And when you have districts that are one-tenth the size of other districts, which, as you mentioned, American Samoa has a population of about 57,000, 58,000, and most of our districts are around 650,000; so that means that every person in American Samoa who votes, their vote counts 10 times, 10 times the amount that your vote and my vote and every other American citizen's vote counts. And that, Mr. Speaker, and ladies and gentlemen, and colleagues of the House of Representatives, one, is not fair; and, two, it is not the way our Founders envisioned anybody voting in this House of Representatives.

Mrs. BLACKBURN. I thank the gentleman.

And one of the things that we have our focus on as we prepare for the State of the Union tonight and for the work that is before us for the rest of this Congress is certainly making certain that we are successful in our efforts in Iraq and making certain that we are successful in the war on terror.

Mr. Speaker, our constituents know that this has been a long war. They know that the terrorists started attacking us over two decades ago, and they also know that on September 11 this Nation decided we were no longer going to respond to terrorist attacks as civil disobedience. What we were going to do was to change course, and we were going to respond to it as what it is: an act of war. And our constituents all know, especially constituents in my district, National Guard families, Reserve families, families at Fort Campbell that are in our district, they know that this is a very, very difficult time for our Nation, and it is a difficult time for our men and women in uniform. And they know that freedom is worth protecting.

And when I talk to those men and women, many who have been deployed in Afghanistan, have done two deployments in Iraq and know that they may be going back, they will say, Yes, we are going back because our job is not done. And they understand it, Mr. Speaker. And they know that we take a step forward and then we take a step or two back, and that it comes very slowly, and that progress is very slow.

We have seen, and our colleague JOHN SHADEGG had handed me an article from Real Clear Politics that pointed out some things that have been happening recently that just haven't caught the eye of the media, and I wish that they had because I would like for them to catch the eye of the American people.

First of all, there appears to be some retreating by al Qaeda from Baghdad because they know that troop levels are returning to where they were during the electoral process that took place in January of last year in Iraq. They know that the radical cleric, al Sadr, has decided to call off his boycott, and that his people are returning to participate in that newly formed Parliament, and they know that he is lowering his profile. And they also have seen Prime Minister al Maliki begin to take a change of course and to put some distance between himself and al Sadr. But this is of tremendous concern to us when we hear the naysayers talk about cutting funding and not supporting the troops.

And this morning I was on the floor speaking about our colleague SAM JOHNSON, who truly is a hero and has a wonderful piece of legislation that steps forward. It is House Resolution 511, and it really pushes forward on the idea of supporting our troops and funding these men and women who are in harm's way, making certain that they have what they need to do the job that is in front of them; sending the message to them that we stand with them and we are not going to desert them.

We know that this is difficult work. We know that it is a job, as I said, that is slow; that progress is slow. But, Mr. Speaker, as we stand here today preparing for the State of the Union, and as we expect to hear this evening from our Commander in Chief that the state of the Union is indeed strong, we also want these men and women in uniform to know that it is strong because of the work they do.

We have the ability to stand here every day and talk about freedom and defend freedom and talk about having a Nation that is so wonderful and so diverse that we all, each and every one of us, can pursue our dreams, can focus on hope and opportunity that is so important to us. We do that because men and women have put their life on the line, many times more than once, many times for days on end, to be certain that freedom remains. And we feel that it is appropriate to bring forward a resolution that says fund the troops and fund their needs.

We think that it is important that we move forward letting the men and women know that, when they are in the field, we are listening to them. We are listening to the troops. We are listening to the commanders, and we respect their judgment. That is an important message for us to send.

And I yield to the gentleman from Georgia for his comments.

Mr. PRICE of Georgia. Mr. Speaker, I thank the gentlewoman for yielding. And it is so important. And I appreciate your bringing up Congressman JOHNSON's resolution. I spoke for a brief moment on the floor earlier about that as well.

And I know that in this Chamber we can disagree about a lot of things, and we should. Our system works best when ideas are exchanged and the best solutions rise to the top, because it really

is a battle of ideas. But in this instance we can disagree, as I mentioned, about many things, but we ought not disagree about whether or not our men and women in harm's way, our troops who are defending liberty truly around the globe, ought to receive every single resource that they need in order to defend themselves and to defend us.

I know that many folks go to Walter Reed and visit some of those brave men and women who have been injured in battle. I have had the opportunity to do that, and I was struck always by every conversation that I had with some of those men and women who have come back, some with devastating injuries, truly. And I am just so humbled by those conversations that I have with those brave soldiers and warriors because I would try to close every conversation and ask them what it was that we could do to help. What can I do to help? And virtually every single one of them said without fail, Congressman, if you can do one thing, if you can do just one thing, please, please let me get back to my unit. And that kind of enthusiasm, that kind of commitment, that kind of sense of duty and honor and patriotism is chilling. It really is.

There are incredible stories that each of them tell, but also I believe those men and women serve as a guidepost for us. And, in fact, we ought to look to them and look to their courage to have the courage that we need in order to support our men and women who are in harm's way.

And I am very hopeful that this House of Representatives will support Congressman JOHNSON's resolution because it truly speaks for, I believe, the vast majority of the American people who want to make certain that, regardless of how you feel about this conflict, we as a Congress state clearly that we will make certain that we provide all of the resources necessary for our men and women in harm's way.

Mrs. BLACKBURN. I thank the gentleman.

I will close our hour by referencing some comments I have had from some veterans in my district. I love the fact that I have absolutely wonderful veterans who participate with me on these issues in our National Security Coalition, in our Veterans Coalition, which are advisory groups for me. And I have had great discussions with them and have sent them information about the new strategy going forward in Iraq, about some of the conversations that have been taking place here, and have sought their best judgment, men and women who have worn the uniform and have been there and who have fought and seeking their best judgment. And a couple of their comments, I think, are so incredibly significant.

One of them says: ''We have to continue our push forward and let our military make the decisions in this war. When the House and Senate changed, there was no doubt there would be a change of efforts. Our enemy knows this and will continue to strike as long as they think our country is not united.''

And another of the veterans said in this e-mail: ''What is important is that we show a unified front to the enemy and we give the new plan and the deployment a chance to work. If we win, if we defeat radical Islam, then maybe, maybe, this is all going to be worth it.''

Mr. Speaker, these men and women who have put that uniform on and have gone into battle know that this is the price that we pay. They understand that this is not going to be easy. They know, and they are watching the President's speech tonight, and they are watching our response. And I would submit to you, Mr. Speaker, that our enemy is watching our response. And I will submit to you that, while we all have different philosophies, we all come from different districts, and we are a very diverse body, I would commend to you and my colleagues that it is important that we stand with our men and women in uniform, that we show a unified front and show that we are committed to being certain that this Nation continues to stand as a great Nation and that we persevere.

## RECESS

The SPEAKER pro tempore (Mr. LYNCH). Pursuant to clause 12(a) of rule I, the Chair declares the House in recess until approximately 8:40 p.m. for the purpose of receiving in joint session the President of the United States.

Accordingly (at 4 o'clock and 45 minutes p.m.), the House stood in recess until approximately 8:40 p.m.

□ 2041

## AFTER RECESS

The recess having expired, the House was called to order at 8 o'clock and 41 minutes p.m.

## JOINT SESSION OF THE HOUSE AND SENATE HELD PURSUANT TO THE PROVISIONS OF HOUSE CONCURRENT RESOLUTION 38 TO HEAR AN ADDRESS BY THE PRESIDENT OF THE UNITED STATES

The Speaker of the House presided.

The Deputy Sergeant at Arms, Mrs. Kerri Hanley, announced the Vice President and Members of the U.S. Senate, who entered the Hall of the House of Representatives, the Vice President taking the chair at the right of the Speaker, and the Members of the Senate the seats reserved for them.

The SPEAKER. The Chair appoints as members of the committee on the part of the House to escort the President of the United States into the Chamber:

The gentleman from Maryland (Mr. HOYER);

The gentleman from South Carolina (Mr. CLYBURN);

The gentleman from Illinois (Mr. EMANUEL);

The gentleman from Connecticut (Mr. LARSON);

The gentleman from Ohio (Mr. BOEHNER);

The gentleman from Missouri (Mr. BLUNT);

The gentleman from Florida (Mr. PUTNAM); and

The gentleman from Michigan (Mr. MCCOTTER).

The VICE PRESIDENT. The President of the Senate, at the direction of that body, appoints the following Senators as members of the committee on the part of the Senate to escort the President of the United States into the House Chamber:

The Senator from Nevada (Mr. REID);

The Senator from Illinois (Mr. DURBIN);

The Senator from New York (Mr. SCHUMER);

The Senator from Washington (Mrs. MURRAY);

The Senator from North Dakota (Mr. DORGAN);

The Senator from Michigan (Ms. STABENOW);

The Senator from Kentucky (Mr. MCCONNELL);

The Senator from Mississippi (Mr. LOTT);

The Senator from Arizona (Mr. KYL);

The Senator from Texas (Mr. CORNYN);

The Senator from Texas (Mrs. HUTCHISON);

The Senator from Nevada (Mr. ENSIGN); and

The Senator from Alaska (Mr. STEVENS).

The Deputy Sergeant at Arms announced the Dean of the Diplomatic Corps, His Excellency Roble Olhaye, Ambassador from the Republic of Djibouti.

The Dean of the Diplomatic Corps entered the Hall of the House of Representatives and took the seat reserved for him.

The Deputy Sergeant at Arms announced the Chief Justice of the United States and the Associate Justices of the Supreme Court.

The Chief Justice of the United States and the Associate Justices of the Supreme Court entered the Hall of the House of Representatives and took the seats reserved for them in front of the Speaker's rostrum.

The Deputy Sergeant at Arms announced the Cabinet of the President of the United States.

The members of the Cabinet of the President of the United States entered the Hall of the House of Representatives and took the seats reserved for them in front of the Speaker's rostrum.

At 9 o'clock and 7 minutes p.m., the Sergeant at Arms, the Honorable Wilson Livingood, announced the President of the United States.

The President of the United States, escorted by the committee of Senators