

SCHIP

The SPEAKER pro tempore. Under the Speaker's announced policy of January 18, 2007, the gentleman from Minnesota (Mr. ELLISON) is recognized for 60 minutes as the designee of the majority leader.

Mr. ELLISON. Mr. Speaker, I rise today with the very, very wonderful company of my freshman Members.

Mr. Speaker, since the 110th Congress began, we have, as a class, stepped forward to try to do everything we could to help the American people see a new way forward for America. And this week, we have seen that the distinction and the differences between our view of caring for the health of all Americans and that of the President were brought into very sharp contrast, very sharp contrast in that the President has vetoed SCHIP.

Mr. Speaker, before I turn it over to my very able classmates, I just want to point out that we're not rising today to talk about health care and SCHIP to throw partisan darts or anything like that. We recognize and respect and appreciate and even are quite grateful for members of the Republican Caucus in both Houses who have come forward to join and say that the health of our children is very important, in fact, it's sacred, and that all Americans should come together to support it.

Mr. Speaker, the bipartisan SCHIP reauthorization bill, which was vetoed by the President, is supported by 67 Senators, including 18 Republicans. It is supported by 43 Governors, including 16 Republican Governors, and I'm proud to say my own Governor, Tim Pawlenty. Governor Pawlenty knows that he and I have disagreed on things in the past, but we're together on this, that children's health must be cared for by adults.

The bill that was vetoed today is supported by more than 270 organizations, literally representing millions of Americans, and has very strong support from the American people at large.

Mr. Speaker, I just wanted to get us started today. I have much more to say, but I don't want to delay any longer because I know that my very excellent difference-maker classmates have much to say about this issue. So without any further delay, I'd like to offer the microphone to the very able, very excellent, honorable Mr. SARBANES from Maryland.

Mr. SARBANES. I thank my colleague. And I know we have a number of people here that are going to speak, and if at any time I say something where you would like me to yield to add to the discussion, please let me know as we move forward.

There is no more important issue than children's health insurance coverage. And I think it's incomprehensible to certainly all of us here this evening who are talking about the issue, but I think to most Americans, that the President of the United States initially even threatened to veto, but

then today took the action of vetoing this bill which would increase to 10 million children the number that are covered under this health insurance program.

I wanted to speak just a moment about two faces on this issue that my life has intersected with. They come from the State of Maryland, and actually over the last few months they've become known to millions of Americans across the country. The first face is the face of Diamonte Driver, who was a young man in Prince George's County, Maryland who had a toothache and ended up dying because he didn't get the treatment that he needed. If his family had had the coverage available that SCHIP provides, his mother could have gotten him to a doctor, a dentist. He would have been seen early, like is the experience of most of us when we have a toothache, and his life would have been saved.

I came to know Diamonte because I worked for years with an organization called the Public Justice Center in Maryland. And the Public Justice Center has been championing increasing Medicaid coverage for children in the State of Maryland. And they had worked with the Driver family. They were actually working with Diamonte's older brother, trying to get him some help that he needed through the Medicaid program, and got to know the family that way, and then Diamonte's situation occurred. So that hit me right there because I was aware of what had happened with this family through my personal interaction with that organization. That's the terrible tragic face on this issue. That's what happens when the coverage isn't there, when children don't get the health care coverage that they need.

There is a positive face on this issue, which was illustrated by the Frost family, Graham and Gemma Frost. Graham Frost was part of the Democratic statement across the country this past weekend where he talked about how his sister and he were in a terrible car accident, and because they were covered by the SCHIP program, they got the treatment they needed, it did not bankrupt the family, and that family is intact, healthy and able to move forward because of the SCHIP program.

So, on the one hand you have the example of Diamonte Driver, someone who didn't have access to this kind of coverage, and on the other hand you have the experience of Graham and Gemma Frost, who did.

I don't understand how the President can line himself up against 10 million children in this country. It is mind-boggling to me, and I've been trying to figure out why he would do it. I think there's maybe a philosophical imperative that he is laboring under, this notion that somehow a government program, already proven to work well, can't continue to work well because there is this investment in the notion that government can't do good things,

that government can't design programs that work effectively. And so that philosophy apparently this administration is prepared to sacrifice. At the alter of that philosophy, the government can't do anything right, they're prepared to sacrifice the interests of millions and millions of children across this country.

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The President made a statement the other day where he said, "Well, what's the problem? If children need to get treatment, they can always go to the local emergency room." I know we all heard that. Some of us were stunned with the callousness of that comment. But I was impressed as much with its callousness as I was, or in addition to its callousness, as with its lack of insight.

I have spent 18 years working with hospitals. I know that the emergency room of a hospital is the highest-cost part of our system. Why would you want children to go there to get treatment when you could build clinics and otherwise empower our health care providers, through the SCHIP program, to provide service at an earlier stage? Not only is it less expensive, but you intervene before children reach a more acute condition where the cost of treating them is going to be higher. So this, I think, illustrates a fundamental lack of understanding of how we can enhance coverage in our health care system.

Let me just make a couple of final comments here. We didn't send the SCHIP bill to the President. We, the Members of the House and the Members of the Senate who voted for it, didn't send it to the President. We delivered it to the President. We delivered it on behalf of America's children. That is what we did. That is our job. We are an instrument of the American people, and in this case, of America's children, so we delivered this to the President on behalf of America's children. His decision to veto it is not a rejection of this Congress. It is a rejection of the interests of America's children.

What I hope Americans all across this country will do, starting tonight and going forward over the days to come, is make it perfectly clear that they want this Congress to override the veto of the President on SCHIP. Call us. Call every Member in this Chamber and make that point. Because if you do that, you are going to send a powerful message to the President that he made the wrong decision here. In spite of the decision he made, we can move forward on behalf of America's children.

I yield back to my colleague and thank him for the time.

Mr. ELLISON. Mr. Speaker, if it wouldn't violate the rules of decorum, I would clap after Mr. SARBANES' comment. I thought it was very eloquent. I thought the examples he used were very poignant. The young man who had a tooth abscess and had that go up into

his brain and he died as a result of it stands as an indictment against our whole Nation. That young man deserves to have all of us, every adult in America, stand up and say, change must come, and it must come now.

I just would like to read a quote and see if I could get my colleague from Brooklyn's reaction, if I may.

Yvette Clarke, you are here with us tonight. You are a stalwart. You are a clarion voice for the public good. I just want to know what you might think about this statement as relates to SCHIP, which is a quote from the late Senator and former Vice President Hubert Humphrey, from my home State of Minnesota, in which he said that the moral test of any government is how it treats those in the dawn of life, the children; those in the dusk of life, the elderly; and those in the shadow of life, the disadvantaged.

When you think about this veto of SCHIP and you think about the moral test of the Nation, what do you think? What thoughts come to mind?

Ms. CLARKE. First, let me just thank you as a member of the class of 2006 to be here with my colleagues this evening to really address what is a moral imperative. Taking care of our young, taking care of our elderly, being in a position to actually have our future secured by making sure that our children are healthy and well-focused, well-nourished and ready to compete in this Nation is a critical part of what makes America America. So to hear that this morning, before the President's coffee got cold, he had vetoed the SCHIP legislation, bipartisan legislation that we delivered to him on their behalf, was really disheartening.

I think that it is imperative that Americans really press upon this body that we make sure that we override this veto. \$3.50 a day. That is what it would cost us to cover the children who are currently uninsured, to provide them with preventive care so that they are able to reach their God-given potential, so that they don't have to sit up in the classroom with headaches and stomachaches and other ailments, perhaps communicable diseases that could cause an outbreak. Meningitis was one of the major issues in many of our schoolhouses last year. We have a President that sort of stood in the way of that. He has just made it unequivocally clear that this is not a policy that he will pursue.

I think it is our obligation as representatives of the people to pursue this and make sure that we get it right on their behalf. Hubert Humphrey was absolutely right. It is a moral imperative, very much so. I hope that every American feels that this evening when they look at their children this evening, when they look at their grandchildren this evening, they will count their blessings that they are able to sit with their child today and their child is not in need of a doctor's care. For those who are in need of a doctor's care, that they will pray for a mother

like Deamonte's mother who went around trying to find coverage for her child, who tried to get a doctor to see her son though she did not have insurance and who was turned away. As a result, her son met his demise.

My colleague, the doctor is in the House.

Mr. ELLISON. The doctor is in the House.

Mr. Speaker, we have a doctor in the House. We are all richly benefited by the presence of Dr. STEVE KAGEN in this Congress. He is one of the freshman Members who tells it like it is. Very few people are better qualified to talk about health care than he is. He is a physician. I think he was probably practicing right up until the day he got sworn in.

We are all very honored to have you here again, Doctor. What do you have to say about this veto?

Mr. KAGEN. Thank you, Mr. ELLISON, and thank you, Ms. CLARKE. This is a very difficult hour to be with you. I cannot tell you how much it hurts me, how much it hurts the children of Wisconsin, of New York State, of Minnesota, and all the children throughout the country who don't know yet that their President has left them behind, that the President has turned away from children in need.

What we are talking about is the difference between seeing a physician and gaining access to good health and not. Those children that don't get health care don't get well. When you are sick in school, you cannot learn. You cannot progress. You cannot move up into the middle class.

This bill, the SCHIP bill, and the veto by this President, a President who no longer represents traditional American values, he does not represent our values, this is a stark contrast between the two parties today. It really asks the question, whose side are we on? I am a Democrat. I am proud to be a Democrat. We are on the side of people who are in need. It is the role of government, isn't it, to care for those who are in need? Not just Hubert Humphrey. It goes back 2,000, 5,000 years, into all of our cultures, into all of our religious beliefs, into all that we hold spiritually sacred. We must care for those who are in need.

The SCHIP bill has been lied about by many politicians. Some have said it's going to cover illegals. That's a lie. There are no illegal human beings, no illegal citizens covered in SCHIP. It does not cover rich people. Ninety percent of people that would be covered by the SCHIP bill have incomes below \$41,000. Folks, the average cost of health care in this country is 12 to 14 grand per year. If you make \$40,000, you can't afford health insurance today. You mentioned, Ms. CLARKE, \$3.50 a day. What are we spending in the religious civil war in Iraq, \$400 million a day? \$3.50 versus \$400 million. The American people get it.

When I go back home to Wisconsin, I am just as frustrated as our electorate.

People believe their elected officials are not listening to them. We are listening. We understand your frustration. We feel it in our heart, as well. This is a veto that must be overturned.

When I was running for Congress, when I left my medical practice, I left my medical practice because 30 percent of the time I would write a prescription, but my patients either couldn't afford the medication or it wasn't covered on the insurance company's list, or they simply couldn't get it. They didn't have the money. So I ran for Congress.

During my trails across the district, I had a 15-minute conversation set aside for a Native American activist. That conversation lasted 2½ hours. It took me 2 weeks to recover. But she taught me that it is politicians who determine who lives and who dies. It is politicians, in this House, that will determine who has access to health care and who does not. It is politicians that will take us to war based on lies and deceptions. We are the people's voice here.

If you would allow me to take a moment, I would like to express the viewpoint of some of the people I represent. Chris Dion in Marinette wrote to me and said, "I am a single person but can't afford medical insurance unless it has a very high deductible. Then it is still expensive. I have many medical problems and cancer runs in my family. But I can't afford tests or treatments because I don't meet requirements for free checkups." Her story is one of millions.

Forty-seven million don't have any coverage at all. The SCHIP bill makes fiscal sense. It is paid for. It doesn't raise taxes on anyone who isn't smoking. It is responsible. It is morally responsible to care for those who are in need. In my opinion, the President's veto of this bill is morally unacceptable not just to me, not just to me as a physician, but as a husband, as a father, as a Congressman. It is unacceptable to every citizen everywhere in this country who has a human heart. I think we have to work hard with our colleagues in a bipartisan manner to care for those who are in need. We can do it with the SCHIP bill that we created here in this House, the People's House.

Mr. ELLISON. Mr. Speaker, I think it is important to point out that this is a bipartisan effort. As we come here and ask that this veto be overridden, it is not simply a Democratic initiative. It is also a Republican one. Let me tell you, I was really warmed, my heart was warmed up when I read the words written by Representative HEATHER WILSON and Representative RAY LAHOOD, two Republican Members, who sent out a Dear Colleague letter for the support of the SCHIP. They wrote, "According to Census Bureau data, about 9 million children lack health insurance. This SCHIP agreement would cover 3 to 4 million of them by investing \$35 billion in additional funding in

children's health insurance over 5 years."

Here is what our two Republican colleagues wrote further: "We urge your support for the SCHIP agreement and believe it is the best vehicle for reauthorizing the program before it expires."

That is what two Republican colleagues had to say about this bill. Presumably, they will be with us trying to overturn the veto.

My point is that as Americans citizens are watching us and watching this whole debate unfold here in the Capitol, they should know that they don't have to take sides based on party.

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This is something that is simply a moral imperative. It is right, it is cost-effective, and improves our health and well-being. It demonstrates our commitment to our children. It is right for a whole number of reasons, not just one reason.

Mr. Speaker, I would also like to say, Senator CHARLES GRASSLEY, who is a Republican Member, spoke very eloquently on this. He says, well, I am not trying to score political points. Again, it is not politics we are talking here. And any of the Democrats that have worked with me I know believe in they want to help kids, low-income kids, and we are going to not only keep the existing kids on the program, we are going to do what the President implied he wanted to do, was to bring more kids on. We are going to cover 4 million more kids as a result of what we are doing. I think it's up to the President, based on his message, to look at what we have done and see if it doesn't fit into that he tried to do, that he can't do that with just \$5 million.

So, the point being, Senator GRASSLEY, a Republican, is in support of this.

Ms. CLARKE. Would you put a pin in it right there for me, my colleague? I just also wanted to quote two other Senate Republicans. Senator ORRIN HATCH said, We are talking about kids who basically don't have coverage. I think the President has some pretty bad advice on this, you think?

Then Senator SUSAN COLLINS says, I can't believe the President would veto a program that benefits low-income children.

Mr. Speaker, we are talking bipartisan effort here. As we salute and talk about the heroism of those who would fight for our freedoms abroad, we have got to bring some heroics here right now. This is one of those issues where the faint of heart should not be casting a vote.

This goes to the fiber, the core of who we are as a Nation, not as a party, not as an individual, but as a Nation. Where are we going to set the bar for what is acceptable in leadership and what is not? I say that the President in this case has abdicated his responsibility as a leader.

Our children need us. Their health care is critical to the growth and devel-

opment of our communities. For every child that falls ill, we have more and more that we have to invest in getting that child to wellness. In the meantime, the educational advances that that child should have been making have not been made. The turmoil within the home and family, the setbacks there, and, by extension, the entire community

Mr. Speaker, so I just wanted to point out to you and just to highlight, as you both have, my colleagues, that this is not a Republican issue, this is not a Democrat issue, this is an American issue, and we have got to focus on this like a laser. It is now up to us in this House of Representatives to make sure that our colleagues recognize their responsibility and leadership to override this veto.

Mr. ELLISON. Dr. KAGEN, how are you looking at this?

Mr. KAGEN. I am just as frustrated as you and the American people. Where are you going to run and hide on this vote? There will be no place to run and no place to hide. You have to show your cards. Whose side are you on? Are you on the side of physicians and nurses who want access to their patients and their patients who want access to their doctors and nurses? Whose side are you on? We do not sit in the boardrooms, we are not the CEOs of insurance companies, but we are representative of peoples' voices.

You quoted some Republican Senators. I will go back home again and quote someone who writes to me, Jean, from Appleton: "What is it with this country? Health care for the rich and those in government; the rest can just die or try and live with broken bones and illness." Or Mary Anderson: "Health care issues, affordability is destroying my family and our financial stability."

I agree with you, we have to do more. We have done our job. We have created a bill that is fiscally responsible, it is socially progressive, it is the morally acceptable thing to do. That bill went to the Senate. It came back without caring for our senior citizens. It got chopped off.

We have here before the House an opportunity in the next several days to have a discussion with the American people about what kind of Nation we are. What kind of Nation turns away from its children who are most in need?

Mr. Speaker, now let's just mention something so that people listening understand about the eligibility factor. If you have got a family income that's below 300 percent of the Federal poverty level, you will qualify for this SCHIP program. All of the resources in this program will go to the poorest, the poorest working families. These are the people that need a boost. These are the people that need a lift up. These are the people who need a humane Congress, a Senate and a House to move this bill back to the President.

Let's give President Bush another chance to think this one all the way

through. My friend, my colleagues, many times I have asked myself: Are we really thinking these problems all the way through? Are we really using the best judgment? Because it really does matter who your mayor is, who your Congressman is, and it really does matter who the President, the next President is. Why? Because judgment, good judgment must be used in everything we are doing. Otherwise, it could be a catastrophe.

Mr. ELLISON. Mr. Speaker, I think that the words of Dr. KAGEN are on the mark. Elections certainly do have consequences. Elections absolutely have consequences. I do hope as we deliberate on the next phase of this struggle, because the American people should know that we will not falter, we will not back down, we will stand strong with them, we will stand strong with the children, we will keep the faith, we will be in fidelity with them on this issue of health care.

Mr. Speaker, please let everyone know that we have heard our Speaker clearly state that we are not going to back down on this one. This is a gut-check issue, and we will be sticking to it. Not only have both Democrat and Republican legislators been very clear on the importance of this issue, it is bipartisan and it is a moral issue, and our Nation's editorial boards have been clear.

It is important to point out that on October 1, The Washington Post editorial stated that President Bush appears determined to veto, and he did now, the \$35 billion expansion of the State Children's Health Insurance Program that the House and Senate approved last week. The administration's proposal to increase spending by less \$5 billion would fall \$14 billion short of what is needed to maintain the existing coverage in SCHIP alone, never mind adding the millions of eligible but uncovered children the President once said he was determined to sign up. Where is the commitment in that?

The Austin American Statesman editorial states on October 1: "For many kids, the doctor is not in." What kind of statement is that, doc?

The Atlanta Journal Constitution: "Kids lose out to politics," screams the headline on September 30.

The Chicago Tribune editorial: "A sound children's health bill." Stating further, "We urge the President to sign the measure. If he vetoes it, Congress should override that decision. We share the concern over stealthy leaps toward government-sponsored and universal health care. But this bill doesn't do that. It is a reasonable expansion of a vital program."

The New York Times editorial: "Overcoming a veto and helping children."

The Daily News, New York, editorial. "Presidential malpractice," screams the headline. "President Bush is threatening a veto of legislation with broad bipartisan support that would extend health coverage to millions of

uninsured children. He is wrong. Dead wrong.”

My colleagues, do the editorial writers have it right or wrong?

Ms. CLARKE. What I think most Americans find most mind-boggling is just the mindset that our President has been in in terms of his whole rationale for the veto. He at one point said the SCHIP plan is an incremental step toward the goal of government-run health care for every American.

I am saying to myself, first of all, there is a bit of hypocrisy here, because we have the Commander-in-Chief, who I believe gets a Federal health care plan himself, saying that we are moving towards government-run health care, when he knows in fact that government doctors and government health plans do not deliver the services of SCHIP. It is private doctors, private health care that do, under private insurance. So, there is this false justification he came up with.

He at one point even talked about, well, the SCHIP bill, the proposal would result in taking a program meant to help poor children and turning it into one that covers children in households with incomes up to \$83,000 a year. I am saying to myself, this bill does not expand eligibility for SCHIP. The focus of the bill is on expanding health care coverage for low-income children who have no health insurance.

So there have been these false statements in justification of a decision that he made, which I really believe was in retribution, quite frankly. When we get to that level of angst, I guess, in our decisionmaking, it is time to sort of pack it up.

I think right now it is important that, as a legislative body, we take control and consciousness of the moves that we have to make on behalf of the American people, because, obviously, our Commander-in-Chief has decided to submerge himself into a bipartisan fight with himself. We have said here that we agree as Democrats and Republicans that this is important, and he is off on a whole other planet.

Mr. ELLISON. In fact, right in this Chamber just this past week this bill passed 265-159. When do you see things pass with 259 votes, unless they are completely noncontroversial? That is overwhelming.

Doctor, you worked in this field. You are a professional. You are in the healing arts. Is SCHIP a program where the government would be telling doctors like yourself how many pills to prescribe? Are they ordering every facet of the patient-doctor relationship? What is the real truth about this?

Mr. KAGEN. The reality is that it takes doctors and nurses to get into the room to get health care done. If you don't have a doctor and a nurse in the room, you don't have health care. And to get a child into a room, you need a parent. That is why in Wisconsin, by expanding in this State grant money, the State of Wisconsin sought to increase the enrollment of

those children who are eligible, and thereby they covered the mother of these children who are close to poverty. By mothers being covered, the enrollment went up. It went up because they brought their children in.

I have practiced medicine for over 30 years, and I will tell you, I never saw a kid in the office unless the mother or one of the caregivers was there. So if you are going to get a child to a doctor, you have to include, in my opinion, the parent.

But this overarching theme is really about values. When the President vetoed this bill, it was a reflection of his values. And how you and your homes spend your money, your hard-earned money, is a reflection of your family values. How our Nation spends its money is a reflection of our national values. And there I come back to the \$3.50 a day for a child and the \$400 million a day making war and occupying Iraq.

Mr. ELLISON. Mr. Speaker, I just want to take this opportunity, it is an excellent segue that the doctor made. While the President finds it repugnant to have \$35 billion in new moneys over 5 years, which would be what SCHIP calls for, the President in his new Iraq war supplement asks for an additional \$45 billion, totaling close to \$200 billion for the war in Iraq for the next year. That is \$200 billion for the next year. And we can't afford a \$7 billion increase for our children to get health care?

So please keep in this mind that this compromise to reauthorize SCHIP is something very small in comparison to the values that he seems to hold dear, which is waging war, in a war that we never should have been in, based on a false premise. For that he is willing to give all. But to secure the national health of our children, no money for that.

Ms. CLARKE. A fraction of the cost, my colleague; a fraction of the cost of what we are spending every day to build democracies overseas. He is not willing to invest in strengthening our democracy here at home. It is fundamental. It just almost seems like a bad dream.

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Another thing that the President has said, the SCHIP proposal would move millions of American children who now have private health insurance into government-run health care. What planet is he on, Doctor? The main impact of this bill would be extending coverage to low-income children who would otherwise be uninsured.

Mr. KAGEN. I look at it as an investment. The children are our future. If we don't invest in our children's health, if we don't invest in their education, this Nation has no future. So we must make important decisions based on our values. We must invest in our children.

In Wisconsin, 95,000 children and 110,000 adults are covered by SCHIP.

We could enroll an additional 37,800 children with the authorization with a President who will sign a bill instead of vetoing a bill.

I believe we need a President who will work with us in a bipartisan way, a real uniter so we can take that step forward and build a healthier Nation for all of us in these United States. I can't agree more with you.

This is not government-run health care; it is not even close. It is an investment in our next generation, the generation we are going to come to depend on as we age.

Mr. ELLISON. Mr. Speaker, if I might just propose that we spend some time sort of talking about what Americans can do, what Americans might think about doing as we move forward. Of course today, action was taken in the Congress that on a date certain 2 weeks from now, we will take up the override issue. That is very important for Americans to know.

In a couple of weeks, we will be right back here in the same Chamber and we are going to see what is what. Who is who and what is what. We are going to be counting. On that day there will be no hiding, and everybody who has an election certificate will be called upon to say where they are really at when it comes to caring for the health of our children.

Mr. Speaker, I think it is important now to talk about what American citizens might consider doing. Of course people do whatever they want, it's a free country, but people feel strongly about SCHIP, and 70 percent of the people believe it should have been passed. So what they might consider doing.

Ms. CLARKE, what might an American citizen do as we are moving toward this showdown on SCHIP?

Ms. CLARKE. When we look at our families and communities, they are called upon to do so much all the time. But these are very special times we are in. It calls for us to multitask. It calls for us to go above the call of duty to address real life-and-death issues. SCHIP is a life-and-death issue. It is here, it is now, it is our neighbors. It is our coworkers' children. It is the folks who attend religious services with us. It is their children. We need to call our representatives, e-mail our representatives. We need to make sure that the Speaker's office, the whip's office, the majority leader's office, we need to make sure that we make our voices heard, jam the phone lines.

Mr. ELLISON. Representative CLARKE, one of the things I really enjoy about serving with you, you are a person of tremendous faith. And also I know that Dr. KAGEN is a man of great faith as well. In fact, only a few weeks ago we recognized Yom Kippur, a sacred holiday for our Jewish brethren and sisters. One of the phrases they use from the scripture and cite is, Let there be no needy among you.

I know you come from the Christian tradition. It is interesting to me because I noticed that one of the things

that Jesus did is that he healed people and he didn't charge them.

Ms. CLARKE. No, he didn't.

Mr. ELLISON. Let's talk about this idea. Would it be okay, and people can do whatever they want, we are not telling anybody what to do, but what somebody might do is ask their pastor to sort of talk about SCHIP and its moral implications.

Ms. CLARKE. Their pastors, their imams, and their rabbis. We need to make sure that our children are protected, and we have an opportunity to do so. We should not miss this opportunity. We don't know when it will come our way again.

Just think about the lives in between, the children's lives in between that will be adversely impacted if we are unable to override the President's veto.

We don't have any time to waste. The imperative is there. And I think there isn't a parent, an aunt, an uncle or grandparent who doesn't understand what it is to stay up late at night when their child is ill and to feel helpless. Compound that with the fact that you can't even go to a doctor until, as your President says, they are sick enough to be wheeled into an emergency room. There has got to be a better way, my colleagues.

Mr. ELLISON. Dr. KAGEN, what might Americans consider doing? For people who feel SCHIP is a worthy program, a meritorious program, overwhelmingly Americans agree on both sides of the aisle, so what might they consider doing? Particularly people who are busy and working a couple of jobs, getting kids and getting groceries, is this the type of thing people might want to get active on?

Mr. KAGEN. Most people I know in Wisconsin are hardworking and they are just trying to get through the day, just like us. We are trying to get through the day and get our rest in. But this is a time for our country to raise up and ask questions, to find out about the conscience of America, and really ask the question about what kind of Nation we are and in which direction we are going to turn.

If we stay on this divisive path, this path of partisan politics, we are not going to be able to solve any of these complex problems we face, whether it is war and peace or health and disease. If we stay on the path that the President has put us on with his veto, it is an expensive path. He is asking our children and their caregivers and parents to take them to the emergency room and not to their doctor. The President is asking us to take a path not towards prevention, to prevent illness and to prevent the big bill that is coming, but he is taking us down the road that leads to an end we don't want to be on. It's a path we cannot afford to take. We have taken a path, a wrong path, that led us into Iraq. It may lead us into a recession yet to come that no American citizen can afford. It will at some point in time raise our taxes, de-

preciate the value of our dollar and create inflation in this country because we haven't paid for a dime of our involvement in Iraq yet. We borrowed the money from China, and it is our next generation, this generation of children that won't be healthy, that won't be working.

We understand it makes sense. If you are working, you earn money and you pay taxes. We can lower people's taxes by having a healthy generation of children. It is just that simple. If our Republican colleagues would understand, if it is just about money, we are going to save you money. Give our children, the children who are most in need, an opportunity to see their physicians and their nurse practitioners. Give them an opportunity to be healthy. They will get the education they need, and we will pay less in taxes and we will all be better off for it.

What can people do? The first thing they have to do is believe. People must truly believe there is hope. I do believe our class, our class of 2006 is America's hope. It is America's hope for a different direction, a positive change and a new direction. I think by our being here tonight, by staying overtime and having this conversation with one another, hopefully the American people are listening to it and they will begin to have faith and hope that there is going to be a positive change.

And I hope that the President is listening, if not to us, he should listen to the American people. I will share with you one other constituent's thoughts. Donna Killian: "Our country desperately needs health care reform. In this very wealthy country, there should be no one denied good health care because of a lack of insurance or income. I, myself, am disabled and 54 years old. I am disabled due to excruciating, chronic pain all over my body. If something happened to my husband, then I would be uninsurable."

What kind of Nation are we when Donna has to be concerned about this, when every single American understands they could be next? Lose their insurance, get sick, and lose your house.

As I stand here tonight, as my colleagues know, I respectfully declined my health care coverage when I came here. I wanted to make a statement that until each and every American has that same opportunity to make a selection of health care coverage, I didn't feel it was right for me to accept something that everyone back home was not also offered.

I think this Congress has to consider health care a crisis. It is a national nightmare. We should consider health care access more like hunger. If every Member of Congress was hungry, we would solve this problem in a week. If every single Member of Congress had no coverage, with the bills you can get in the emergency room or if you get cancer, we would solve this problem in several weeks.

Again, I come back to believing in hope. I do believe that we will have an

opportunity to take this Nation in a different direction, a positive change. My only hope is that it happens sooner than later. But mark my words, it may not occur until we paint the White House door a different color, from red to blue.

Ms. CLARKE. We are already moving in a new direction. Under the leadership of our Speaker NANCY PELOSI, this Congress has risen to a new level of stridency and of focus with regard to the issues that are impacting every district across this Nation. So we have to be very clear. We may not see the tangible results right this second, but they are all lined up and we have already seen a number of really extraordinary pieces of legislation passed here in the House. We have even seen the College Cost Reduction Act signed into law.

We should not overlook those things, and understand that none of that came easy for us. We had to put ourselves on the line. We had to stand up and be counted. We will do that again with SCHIP. This is just another bump in the road, but I believe without struggle there is no progress. We need to make sure that the American people, the parents, the grandparents, tune in and let their voices be known.

Mr. ELLISON. I agree with both of you, my colleagues. We have to believe. We have to believe we can make a change in the same way people believed that we could have workers' rights, and we believed that we could have civil rights, and we believed that we could have a freer and better America.

Ms. CLARKE. And women's rights.

Mr. ELLISON. Let's never forget women's rights. People who made those things happen believed they could happen even though they didn't exist at the time. We have to believe, as Dr. KAGEN says.

But it wouldn't hurt anything if we wrote in to our local newspapers and church bulletins to let people know how we felt about this issue. It wouldn't hurt to talk to our rabbis and our ministers and our imams in our faith communities to talk about this issue, make it sort of an issue that we talk about and make sure that people understand what is going on.

It wouldn't hurt to have a coffee klatsch. Invite some people over to talk about it. It wouldn't hurt to talk to the teachers and the principals in the local community about it. That wouldn't hurt a thing. Build awareness. Help get a teacher's perspective on what it is like to teach a child who is coughing and sneezing and wheezing and can't really focus on his or her studies.

We can e-mail and write and call in to our elected officials. That is something we certainly should do. It is time for people to come together and demand an override to this awful veto.

I would invite my colleagues to make some final concluding remarks.

Ms. CLARKE. Let me start by thanking you, Representative KEITH ELLISON of Minnesota, for leading the class of

2006 on the floor as we really get to the substance of a real disappointment to the American people today, which was the veto of our SCHIP legislation, the bipartisan SCHIP legislation, and just to say that when we provide for the least of these in our society, we are building a stronger Nation. When we recognize that no one is disposable in our society, we have an obligation to reach out and to provide for those who can't provide for themselves.

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If we take care of a child today who's low income, that child becomes a productive part of our society. They will be taking care of us as we grow older, and it's a cycle and it's a circle, and when we understand that, then we know how important this vote is coming up. And we want to urge our colleagues across party lines, hold the line on SCHIP, hold the line on SCHIP. Our low-income children, our children in our communities, our families who are just struggling to make ends meet need us to be there for them to override this veto.

I want to thank my colleagues for having me in the class of 2006 and speaking out today and turn it over to my colleague, Dr. KAGEN of Wisconsin.

Mr. KAGEN. I thank my colleague, and some have said you ain't going nowhere; there's more work to be done.

Ms. CLARKE. That's right.

Mr. KAGEN. I want to thank you for the opportunity, Mr. Speaker, for sharing with the American people what's happening here in their House, the House of Representatives.

I would remind everyone here on the floor and at home that we are all in this together. As the poorest among us go, so go we all. We have an obligation to care for all those who are in need right here and right now, and by working together I'm absolutely convinced we have the opportunity to change America, but we can't do it without the people's help.

They should call their Representatives. They should e-mail and write, but bear in mind, we have writing that's slow mail. Send an e-mail. Call your local Congressperson. Express yourself. Your voice will be heard.

It is our duty to listen to the American people. That is exactly what we've been doing, and their voice has been heard tonight in the House of Representatives. We must stand up and fight for the health care for our children on whose future we depend.

Mr. ELLISON. The Members of the difference makers, the majority makers, the class of 2006 who are in this 110th Congress ran on a platform of change, succeeded on that platform as Americans all across the country endorsed that platform of change, coming together from diverse parts around the country, all for one thing, which is to elevate and uplift the public good and the interests of the American people. Whether it's on the issue of war and peace or disease and wellness, or what-

ever it may be, education, workers' rights, civil rights, environmental sustainability, whatever it is, we will continue to raise our voices because we were brought here to bring change.

We're fresh off the campaign trail, knocking on doors, talking to folks at the doorstep about what they need and what they care about. Our idealism is high. Our energy is high. Our resolve is strong, and we will be here for the American people.

Mr. KAGEN. Together, we will.

Mr. ELLISON. Together, we will.

Ms. CLARKE. Together, we will.

Mr. ELLISON. That's right.

ENERGY

The SPEAKER pro tempore. Under the Speaker's announced policy of January 18, 2007, the gentleman from Pennsylvania (Mr. PETERSON) is recognized for 60 minutes as the designee of the minority leader.

Mr. PETERSON of Pennsylvania. Mr. Speaker, it's a pleasure to join you this evening and talk about an issue that I think is vital to America's future.

We're in the beautiful time of year. My favorite time of year is the fall season, and it's arrived. We have now a week of fall behind us. The cool days and cold nights will soon be here all so quickly, and the home heating season will begin where Americans will struggle this year to keep their homes warm, and American factories and businesses and manufacturers will struggle to pay their very high energy bills to continue to compete in a global economy, manufacturing, processing and distributing their goods.

Home heating oil prices this year will be record highs with the \$80 oil that's upon us and that has been with us for more than a week now. Home heating oil prices will have the largest increase, and those who heat with home heating oil will be under severe pressure to be warm affordably. Propane and natural gas prices are scheduled to go up again this year, propane a little more than natural gas, but both of them, and that's barring no storms in the gulf.

We've been very fortunate in the country. For a year and a half now, we have not had a major storm in the gulf, and why that's a problem is 40 percent of America's energy comes from the gulf. And when we have a major storm there like Katrina and Rita in the same year, there's huge disruptions in the ability to produce both gas and oil and refine it and process it and ship it around this country, and it will help prices to raise drastically.

I guess the question I ask tonight is, what is Congress doing? Is it a discussion? I don't know about you. I've listened to the last two Presidential debates, one Republican, one Democrat, and the press asks the question, but not one question while I was listening was asked about energy. I find that amazing because here we are with \$80 oil. Is it a new floor?

My chart, which goes through 2006, has this up as high \$60, but we're clear up here in the \$80s. Most people were very concerned that \$60 and \$70 oil would put us into recession, but when you look at the constant increase in the last 5, 6 years of oil prices just skyrocketing and no stopping, and the scary part on oil is that historically in the world marketplace we had slush. I mean, we had extra oil. There were 10, 12, 15 million barrels of oil that were available to be produced daily if we needed them. I'm told today that we're lucky between 1 million and 2 million barrels a day is available if we have a crisis.

So, if we would have a storm in the gulf that could take a few million barrels off the market and you had one of our Third World countries that ship a lot of oil have a governmental problem or a terroristic attack one of their sending stations or their pipeline systems, then we could lose 4, 5, 6 million barrels of oil a day. You would see prices at \$100 very quickly. \$100 oil will have a severe crisis in this country.

We now have \$7.50 gas. It's going up weekly now. The season is here. We're through the soft season, and much of the gas in the ground for this year's storage was put in at much higher prices than that. Then you have the storage costs and the distribution costs, and we're talking about a sizeable increase in natural gas prices this year.

As I was showing you the oil chart, oil prices continue to spike, and yet we hear nothing from Congress. We don't hear questions and much discussion in the Presidential campaigns, and I find that confounding because energy, reasonable, affordable energy, is why America is what it is today.

Natural gas prices, you know for a long time natural gas prices were around \$2 or less, and then we had spikes, and then we came back down. And now we are on the same path as oil. We're right up here about here now, \$7.50. That's out-of-the-ground price. That's not the price you and I pay at home or the companies pay. Pipeline charges, storage charges, distribution costs, I mean it's clear up in here, \$12, \$13 gas when it gets to us as a consumer.

But the price out of the ground, this is the price out of the ground that we start at. We're up here. We will be soon approaching \$8, and that will continue to rise as heating season comes and industry continues to use.

Well, why is this? Why is America having this constant skyrocketing prices in energy? Well, here's one of the reasons.

About 26 years ago, the President of the United States and two Presidents since and Congress both put moratoriums on producing offshore. That's called our Outer Continental Shelf. The States control the first three miles, and then the United States Government controls the next 197 miles to 200.

Now, the only place we've historically produced is right here. 40 percent