

[Roll No. 1153]

YEAS—226

Abercrombie	Gutierrez	Ortiz
Ackerman	Hall (NY)	Pallone
Allen	Hare	Pascrell
Altmire	Harman	Pastor
Andrews	Hastings (FL)	Payne
Arcuri	Herseth Sandlin	Perlowski
Baca	Higgins	Perlmutter
Baird	Hill	Peterson (MN)
Baldwin	Hinchee	Pomeroy
Barrow	Hirono	Price (NC)
Becerra	Hodes	Rahall
Berkley	Holden	Rangel
Berman	Holt	Reyes
Berry	Honda	Richardson
Bishop (GA)	Hoyer	Rodriguez
Bishop (NY)	Inslee	Ross
Blumenauer	Israel	Rothman
Boswell	Jackson (IL)	Roybal-Allard
Boucher	Jackson-Lee	Ruppersberger
Boyd (FL)	(TX)	Rush
Boyd (KS)	Jefferson	Ryan (OH)
Brady (PA)	Johnson (GA)	Salazar
Braley (IA)	Johnson, E. B.	Sánchez, Linda
Brown, Corrine	Jones (OH)	T.
Butterfield	Kagen	Sanchez, Loretta
Capps	Kanjorski	Sarbanes
Capuano	Kaptur	Schakowsky
Cardoza	Kennedy	Schiff
Carnahan	Kildee	Schwartz
Carney	Kilpatrick	Scott (GA)
Castor	Kind	Scott (VA)
Chandler	Klein (FL)	Serrano
Clarke	Kucinich	Sestak
Clay	Langevin	Shea-Porter
Cleaver	Lantos	Sherman
Clyburn	Larsen (WA)	Shuler
Cohen	Larson (CT)	Sires
Conyers	Lee	Skelton
Cooper	Levin	Slaughter
Costa	Lewis (GA)	Smith (WA)
Costello	Lipinski	Snyder
Courtney	Loeb sack	Solis
Cramer	Lofgren, Zoe	Space
Crowley	Lowe y	Spratt
Cuellar	Lynch	Stark
Cummings	Mahoney (FL)	Stupak
Davis (AL)	Maloney (NY)	Sutton
Davis (CA)	Markey	Tanner
Davis (IL)	Marshall	Tauscher
Davis, Lincoln	Matsui	Taylor
DeFazio	McCarthy (NY)	Thompson (CA)
DeGette	McCollum (MN)	Thompson (MS)
Delahunt	McDermott	Tierney
DeLauro	McGovern	Towns
Dicks	McIntyre	Tsongas
Dingell	McNerney	Udall (CO)
Doggett	McNulty	Udall (NM)
Donnelly	Meek (FL)	Van Hollen
Doyle	Meeks (NY)	Velázquez
Edwards	Melancon	Visclosky
Ellison	Michaud	Walz (MN)
Ellsworth	Miller (NC)	Wasserman
Emanuel	Miller, George	Schultz
Engel	Mitchell	Waters
Eshoo	Mollohan	Watson
Etheridge	Moore (KS)	Watt
Farr	Moore (WI)	Waxman
Fattah	Moran (VA)	Weiner
Filner	Murphy (CT)	Welch (VT)
Frank (MA)	Murphy, Patrick	Wexler
Giffords	Murtha	Wilson (OH)
Gillibrand	Nadler	Woolsey
Gonzalez	Napolitano	Wu
Gordon	Neal (MA)	Wynn
Green, Al	Oberstar	Yarmuth
Green, Gene	Obey	
Grijalva	Olver	

NAYS—193

Aderholt	Bonner	Cannon
Akin	Bono	Cantor
Alexander	Boozman	Capito
Bachmann	Boren	Carter
Bachus	Boustany	Castle
Baker	Brady (TX)	Chabot
Barrett (SC)	Broun (GA)	Coble
Bartlett (MD)	Brown (SC)	Cole (OK)
Barton (TX)	Brown-Waite,	Conaway
Bean	Ginny	Crenshaw
Biggert	Buchanan	Culberson
Bilbray	Burgess	Davis (KY)
Bilirakis	Burton (IN)	Davis, David
Bishop (UT)	Buyer	Davis, Tom
Blackburn	Calvert	Deal (GA)
Blunt	Camp (MI)	Dent
Boehner	Campbell (CA)	Diaz-Balart, L.

Diaz-Balart, M.	Kuhl (NY)	Reichert
Doolittle	LaHood	Renzi
Drake	Lamborn	Reynolds
Dreier	Lampson	Rogers (AL)
Ehlers	Latham	Rogers (KY)
Emerson	LaTourette	Rogers (MI)
English (PA)	Lewis (CA)	Rohrabacher
Everett	Lewis (KY)	Ros-Lehtinen
Fallin	Linder	Roskam
Feehey	LoBiondo	Royce
Flake	Lucas	Ryan (WI)
Forbes	Lungren, Daniel	Sali
Fortenberry	E.	Saxton
Fossella	Mack	Schmidt
Fox	Manzullo	Sensenbrenner
Franks (AZ)	Marchant	Sessions
Frelinghuysen	McCarthy (CA)	Shadegg
Gallegly	McCaul (TX)	Shays
Garrett (NJ)	McCotter	Shimkus
Gerlach	McCrery	Shuster
Gilchrest	McHenry	Simpson
Gingrey	McHugh	Smith (NE)
Gohmert	McKeon	Smith (NJ)
Goode	McMorris	Smith (TX)
Goodlatte	Rodgers	Souder
Granger	Mica	Stearns
Graves	Miller (FL)	Sullivan
Hall (TX)	Miller (MI)	Terry
Hastings (WA)	Moran (KS)	Thornberry
Hayes	Murphy, Tim	Tiahrt
Heller	Musgrave	Tiberi
Hensarling	Myrick	Turner
Herger	Nunes	Upton
Hobson	Pearce	Walberg
Hoekstra	Pence	Walden (OR)
Hulshof	Peterson (PA)	Walsh (NY)
Inglis (SC)	Petri	Wamp
Issa	Pickering	Weldon (FL)
Johnson (IL)	Pitts	Weller
Johnson, Sam	Platts	Westmoreland
Jones (NC)	Poe	Whitfield
Jordan	Porter	Wicker
Keller	Price (GA)	Wilson (NM)
King (IA)	Pryce (OH)	Wilson (SC)
King (NY)	Putnam	Wolf
Kingston	Radanovich	Young (AK)
Kirk	Ramstad	Young (FL)
Kline (MN)	Regula	
Knollenberg	Rehberg	

NOT VOTING—13

Carson	Hooley	Neugebauer
Cubin	Hunter	Paul
Duncan	Jindal	Tancredo
Ferguson	Matheson	
Hinojosa	Miller, Gary	

ANNOUNCEMENT BY THE SPEAKER PRO TEMPORE

The SPEAKER pro tempore (during the vote). Members are advised there are 2 minutes left in this vote.

ANNOUNCEMENT BY THE SPEAKER PRO TEMPORE

The SPEAKER pro tempore (during the vote). Members are advised there is 1 minute left in this vote.

□ 1856

So the bill was passed.

The result of the vote was announced as above recorded.

A motion to reconsider was laid on the table.

REPORT ON RESOLUTION PROVIDING FOR CONSIDERATION OF H.J. RES. 69, FURTHER CONTINUING APPROPRIATIONS, FISCAL YEAR 2008

Ms. SLAUGHTER, from the Committee on Rules, submitted a privileged report (Rept. No. 110-492) on the resolution (H. Res. 869) providing for consideration of the joint resolution (H.J. Res. 69) making further continuing appropriations for the fiscal year 2008, and for other purposes, which was referred to the House Calendar and ordered to be printed.

CHILDREN'S HEALTH INSURANCE PROGRAM REAUTHORIZATION ACT OF 2007—VETO MESSAGE FROM THE PRESIDENT OF THE UNITED STATES (H. DOC. NO. 110-80)

The SPEAKER pro tempore laid before the House the following veto message from the President of the United States:

To the House of Representatives:

I am returning herewith without my approval H.R. 3963, the "Children's Health Insurance Program Reauthorization Act of 2007." Like its predecessor, H.R. 976, this bill does not put poor children first and it moves our country's health care system in the wrong direction. Ultimately, our Nation's goal should be to move children who have no health insurance to private coverage—not to move children who already have private health insurance to government coverage. As a result, I cannot sign this legislation.

The purpose of the State Children's Health Insurance Program (SCHIP) was to help low-income children whose families were struggling, but did not qualify for Medicaid, to get the health care coverage that they needed. My Administration strongly supports reauthorization of SCHIP. That is why in February of this year I proposed a 5-year reauthorization of SCHIP and a 20 percent increase in funding for the program.

Some in the Congress have sought to spend more on SCHIP than my budget proposal. In response, I told the Congress that I was willing to work with its leadership to find any additional funds necessary to put poor children first, without raising taxes.

The leadership in the Congress has refused to meet with my Administration's representatives. Although they claim to have made "substantial changes" to the legislation, H.R. 3963 is essentially identical to the legislation that I vetoed in October. The legislation would still shift SCHIP away from its original purpose by covering adults. It would still include coverage of many individuals with incomes higher than the median income in the United States. It would still result in government health care for approximately 2 million children who already have private health care coverage. The new bill, like the old bill, does not responsibly offset its new and unnecessary spending, and it still raises taxes on working Americans.

Because the Congress has chosen to send me an essentially identical bill that has the same problems as the flawed bill I previously vetoed, I must veto this legislation, too. I continue to stand ready to work with the leaders of the Congress, on a bipartisan basis, to reauthorize the SCHIP program in a way that puts poor children first; moves adults out of a program meant for children; and does not abandon the bipartisan tradition that marked the

original enactment of the SCHIP program. In the interim, I call on the Congress to extend funding under the current program to ensure no disruption of services to needy children.

GEORGE W. BUSH.

THE WHITE HOUSE, December 12, 2007.

□ 1900

The SPEAKER pro tempore (Mrs. TAUSCHER). The objections of the President will be spread at large upon the Journal, and the veto message and the bill will be printed as a House document.

MOTION OFFERED BY MR. HOYER

Mr. HOYER. Madam Speaker, I have a privileged motion at the desk.

The SPEAKER pro tempore. The Clerk will report the motion.

The Clerk read as follows:

Mr. HOYER moves that further consideration of the veto message and the bill, H.R. 3963, be postponed until January 23, 2008.

The SPEAKER pro tempore. The gentleman from Maryland (Mr. HOYER) is recognized for 1 hour.

Mr. HOYER. Madam Speaker, for the purposes of debate only, I yield 30 minutes to the gentleman from Texas (Mr. BARTON).

I ask unanimous consent that the gentleman from New Jersey (Mr. PALLONE) and the gentleman from California (Mr. BECERRA) each be allowed to control 15 minutes.

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

There was no objection.

Mr. BARTON of Texas. Madam Speaker, I would ask unanimous consent that we shorten the debate to 15 minutes on each side. We don't have that many speakers and the hour is late. I have a feeling people's minds are not going to be swayed by the eloquence on either side on this debate.

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

Mr. HOYER. Reserving the right to object, I thank the gentleman for his comments. I think perhaps we may not need to have a vote on this, I would agree, but there are some number of speakers on our side who would like to speak. I don't know whether we will have 10, maybe 15 speakers cumulatively. If the gentleman might prevail on his side, maybe we wouldn't ask people to come back for a vote, but we do have Members on our side who want to speak.

Madam Speaker, I object.

The SPEAKER pro tempore. Objection is heard.

The Chair recognizes the gentleman from California.

Mr. BECERRA. Madam Speaker, I yield 1 minute to the distinguished Speaker of the House.

Ms. PELOSI. I thank the gentleman for yielding.

I thank Mr. HOYER for his leadership on this very important legislation. He has worked very hard to try to achieve a level of bipartisanship on this legisla-

tion that could override the President's veto. In the United States Senate, there is a substantial bipartisan majority large enough to override the President's veto. I hope that we could achieve that in this House. We are not going to take up that vote tonight, as has been indicated by Mr. HOYER. That debate and that vote will take place on January 23.

It is just very interesting to hear the reasons why the President of the United States said veto to the children of America. Veto in Latin: I forbid. I forbid the children of America, the children of working families who play by the rules and want the best for their children, who are struggling to make ends meet and who need health care and the health care that keeps them in the workforce and off of welfare and off of Medicaid.

Madam Speaker, it is particularly interesting to hear in this debate on the omnibus bill where there is talk of hundreds of billions of dollars more for the war in Iraq. For 40 days in Iraq, we can insure 10 million children in America; 40 days in Iraq, 10 million children in America. This is not an issue. This is a value. This is an ethic of the American people. The Democrats and Republicans, people of no party affiliation, everybody cares about the children of America. Over 80 percent of the American people support the SCHIP expansion that we want to do to double the number of children.

So when the President says we have not met his objections, he is moving the goal post. In his first veto message, he said he is concerned about the fact that people making \$80,000 would be eligible for SCHIP. Not so. The only way they could be eligible is if the President of the United States himself gave them a waiver. The President has given waivers to families making 300 percent of poverty. The President himself has given that waiver. And now he is complaining about that level of income for families, hardworking families to receive SCHIP.

The President said he is concerned that there are still adults in the program. The Democratic response, bipartisan, strong, with 45 Republican votes, said that the adults would be phased out. The reason some of them are in there in the first place is that in order to get the children into the program, Governors had thought that it would be important to bring families into the program, and the President of the United States, President Bush's policy allowed that to happen. So he is turning his back on his own policy. He is turning his back on these children by saying their families should be off of SCHIP.

So when the President says he is opposed to the bill because it raises taxes, then we get to the heart of the matter. This bill is paid by an increase in the cigarette tax, and this is really why the President is vetoing the bill. The President is saying that rather than raise the cigarette tax, he would

prefer to prevent an additional 5 million children in our country from getting access to quality health care.

The President has also said in other comments about this legislation, everyone in America has access to health care; they can just go to the emergency room. That was probably one of the most ill-informed, with stiff competition for that honor, but nonetheless probably one of the most ill-informed statements that could ever be made by anyone dealing with public policy and access to health care.

So again, I think all the Members of Congress who voted for this in a very strong bipartisan way in the House and the Senate can take great pride in setting a high watermark for what this Congress should be doing for children of working families in America.

I salute Mr. HOYER, Mr. DINGELL, Mr. RANGEL, Mr. PALLONE, Mr. STARK for their exceptional leadership. I also salute Mr. LAHOOD for what he tried to do to bring bipartisanship to all of this. I commend Senator GRASSLEY and Senator HATCH for their courageous leadership in the Senate, in leading the way to a veto-proof majority of Democrats and Republicans in the United States Senate.

Whether you are talking about Easter Seals or the March of Dimes, the Association of Catholic Hospitals, AARP, AMA to YWCA, to everything alphabetically in between, everyone supports SCHIP except the President of the United States and those in this body who will side with him on this vote.

What a sad day. What a sad day that the President would say, rather than insuring 5 million children, I don't want to raise the cigarette tax. What a sad day when we would spend in 40 days in Iraq what it takes to insure 10 million children in America for 1 year. But we are not going to let this veto stand. We will act upon it and we will continue to fight the fight until 10 million children at a minimum in America have access to quality health care under the SCHIP program. It is the wish of the Governors.

Mr. BARTON of Texas. Madam Speaker, I yield 1 minute to the distinguished minority leader from the great State of Ohio (Mr. BOEHNER).

Mr. BOEHNER. Let me thank my colleague for yielding.

On the opening day of this Congress, the Speaker of the House said, let's have partnership, not partisanship. And over the course of this year, I have been looking for that partnership to occur. There is probably no better example that the partnership has never occurred over the course of this year than this bill.

On this bill, there were no hearings in the relevant committees. There was no markup through the regular legislative process in the Energy and Commerce Committee. And then the bill was brought to the floor in what I would describe as a very partisan way. The majority prevailed, but there was

a significant number of people opposed to the bill.

And we are talking about the Children's Health Insurance Program. We are talking about a program that was developed by Republicans and Democrats together to go out and serve the needs of the working poor in America. And yet over the course of the 10 years, I think the program has gone astray. We are starting to put more adults in a program than we did children. And what Republicans and I think Democrats want to do is reauthorize this program in a way that meets the needs of poor children first. That hasn't been happening, and I think all the Members know it hasn't been happening.

And so after this veto the first time was upheld, we began some bipartisan talks trying to find common ground to see if we couldn't reauthorize this program in a way that the American people expect of us. They expect us to come here, work together, and find a way to get this program reauthorized.

We had Members locked in a room for 2 months, a lot of conversation, a lot of very descriptive things that had to happen. We weren't expecting miracles. And at the end of the day, my Members looked up and said, there is no movement. No movement at all. And I think that this deadlock that we find ourselves in is unfortunate, because there is a population in America that need this program. We could have resolved the differences in this program in 10 minutes if the majority wanted to resolve the differences.

But as we see again tonight, there is no attempt to resolve the differences. This has become a partisan political game that we are involved in. The motion that we are debating here is to move the vote on overriding the President's veto until January 23. Hello. And this happens to be about 6 days before the President is going to come and give the State of the Union address.

We can have this vote right now and the outcome is certain. But no, no, we can't have an outcome that is certain; we have got to continue to play political games. That is exactly what the American people are disgusted with when they look at this Congress and we see the approval ratings where they are.

I think it is time for us to resolve our differences in a bipartisan way and reauthorize this program and make sure that poor children in America have the kind of health insurance that they deserve.

Mr. PALLONE. Madam Speaker, I yield myself such time as I may consume.

Madam Speaker, let me say it really pains me to listen to the minority leader say that no attempt has been made to resolve the differences on this legislation. I can't think of a single bill in this Congress where the Democratic leadership has been reaching out to the Republican side of the aisle on a daily basis. There have been so many meetings. I mean, there have literally been

hundreds of meetings trying to reach out to the Republican side in the House to try to reconcile differences on this bill and come up with a consensus piece of legislation. The Republicans in the Senate have always been willing. They have been out there to meet. Some Republicans here in the House have been as well. But the leadership on the Republican side has not been. So I think it is very unfortunate that, as stated today, that that has not been the case. We have been reaching out constantly, and I defy anyone to say differently.

Madam Speaker, today for the second time this year President Bush turned his back on the health care needs of 10 million children. It was just 2 months ago when the President vetoed the Children's Health Insurance Program Reauthorization Act, which had passed both the House and the Senate with overwhelmingly bipartisan support.

After that first veto we came together once again, Democrats and Republicans, and wrote a different bill that addresses many of the President's concerns, including enrolling lower income children first. Today, President Bush vetoed the second effort, saying that it was almost identical to the first bill. And I would say it was not, and the President knows better.

□ 1915

The President's second veto of CHIP legislation is a slap in the face not only to this Congress but to the millions of children who, without this bill, continue to be uninsured, or worse, basically lose the insurance they currently have.

Every day the parents of more than 9 million children worry when their kids have an earache, toothache, asthma, all this before they finally have to take them to the hospital emergency room. And the President seems satisfied with the status quo. In fact, in the past he has stated that every American has access to health care because they can always go to the emergency room.

Let me tell my colleagues, this fall I visited an emergency room in my district and it was not a great place for a kid to visit. It is the scene of trauma. Children are forced to share space with people who have overdosed on alcohol or drugs. Most emergency rooms are overwhelmed with real emergencies and have few resources to treat people who need regular family care.

The beauty of CHIP is that children get to see a doctor on a regular basis. And the President is deluding himself if he doesn't think this veto is going to hurt millions of children. And those Members voting to sustain the President's veto are just as guilty of turning their backs on millions of children who will be denied regular visits to see a doctor.

I urge my Republican colleagues to vote their conscience. Let's override the President's veto so that we can ensure that 10 million children receive the health care they need to grow up healthy and strong. This is the right thing to do for our country.

Madam Speaker, I reserve the balance of my time.

Mr. BARTON of Texas. Madam Speaker, I yield myself 3 minutes.

(Mr. BARTON of Texas asked and was given permission to revise and extend his remarks.)

Mr. BARTON of Texas. Madam Speaker, everybody has said all that needs to be said on this debate; we just haven't said it this third or fourth time that we are here on the House floor.

As the minority leader pointed out, at some point in time it still may be possible to reach a consensus on reauthorizing the SCHIP program because people on both sides of the aisle want to keep the program moving forward. The problem that most Republicans have is that we support the base program for near low-income children between 100 and 200 percent of poverty. We don't think that the SCHIP program, which was a children's health program, should be for adults. We don't think it should be for illegal aliens. We think it should be for children between 100 percent to 200 percent of poverty, and perhaps slightly higher than that if a good-faith effort has been made to cover children in that income bracket.

My friends on the other side of the aisle appear to want to use this as a surrogate for universal health care. In some versions, the original version that came out in the CHAMP bill, they wanted to go as high as 300 and 400 percent of poverty. They continue, although they say they don't want to cover noncitizens, they won't agree to enforcement measures that make that possible. And they don't want adults on the program to have to exit the program in some reasonable time period, so we have the impasse that we have today.

There haven't been many times in our Nation's history that we have postponed a veto override. I think less than 10 percent of the time, maybe even less than 5 percent of the time, but we have done it twice in a row on this particular bill. So we will postpone the bill until the week of the President's State of the Union so there can be more political posturing on the majority side right before the President comes before a joint session of Congress.

This majority is right to try to postpone that vote to that time. It would be better if we went ahead and voted on it tonight, sustained the President's veto tonight so we could then hopefully continue work or start working in a bipartisan way to actually get an SCHIP reauthorization that was more than a 1-month extension at a time.

If we have the vote tonight, the President's veto will be sustained. When we have the vote in January, the President's veto will be sustained. At some point in time we may yet get together and try to work out a compromise that both sides can agree to and have a 435-Member vote. Apparently that will not be any time in the near future.

Mr. BECERRA. Madam Speaker, I yield 1¼ minutes to the distinguished gentleman from Texas (Mr. DOGGETT), a member of the Ways and Means Committee.

Mr. DOGGETT. Let's be very clear about what is being postponed and who is doing the postponing. When this President exercised his second veto, he postponed our desire to see that children get the health care that they need. And tonight, when Republicans in this House and their nicotine-peddler allies stand in the way of the door at the doctor's office, millions of children are denied the care that they deserve.

This President's holiday season veto of our efforts to aid these ailing children is neither sound fiscal policy nor good medicine. And for the President to make the incredible statement that the children of the working poor should "just go to the emergency room," that is neither compassionate nor conservative. With his ideological blinders, he just doesn't seem to see the children of the working poor who are up all night with an aching ear, an abscessed tooth, or can't get antibiotics for strep throat. Those are the challenges working families face who do not have access to health care.

A healthy body, like an educated mind, is an opportunity that all of our children should be permitted to share. For as long as the President and a minority of this House stand between children and the lifesaving, pain-reducing care that they need, we will work to overcome their intransigence, whether it takes one time in January or another time thereafter. We cannot yield to those who would block our children from the care they need.

Mr. BARTON of Texas. I yield 3 minutes to the gentleman from Georgia (Mr. DEAL), a member of the Health Subcommittee.

Mr. DEAL of Georgia. Madam Speaker, well, here we are again. When the bill came up the first time, we had not had a chance to mark it up in the committee. We were not allowed amendments on the floor. And the process has been a take-it-or-leave-it because it appears that the issue is let's talk about children going to emergency rooms rather than doing something about extending the SCHIP program.

And here we are again saying we don't want to do anything tonight; we want to reserve the time to talk about it in January.

Well, there is an old saying that we ought to mean what we say and say what we mean.

If the Democrats really want an SCHIP program, which I think they do, and Republicans do as well, then there ought to be some principles which have been on the table all along that should be able to be agreed to. One is that this is children's health insurance plan, and there ought not to be either a continuation of nor an expansion of the addition of adults into that program. And yet that continues to be one of the issues on which there is no agreement.

Another issue is that it was intended to be for children at the below 200 percent of poverty level. We have said we should have been a saturation below 200 percent of poverty at 90 or 95 percent of those children before States start moving up the ladder, not to the working poor, but in some cases by many States' standards to the very rich or at least the middle income when you get to 300 and 350 and 400 percent of poverty. There has never been an agreement to say let's saturate the low-income children and cover them first as a prerequisite.

And lastly, it is a program for American children and the continued efforts to create loopholes so that people who are not citizens, who are not legally in our country, who are not entitled to be covered under this plan which is for American citizens, they continue to insist that that loophole should not only be continued but also expanded.

I would urge us to go ahead and vote now. Let's don't just talk about it. Let's do and say what we mean.

Mr. PALLONE. Madam Speaker, I yield 2 minutes to the gentleman from Wisconsin (Mr. KAGEN).

Mr. KAGEN. Madam Speaker, I thank our leadership for offering an opportunity, not just this evening, but during this next month for our Nation to begin to answer the question of our time, and that question is this: What kind of Nation are we when we turn our back on our children on whose future we all depend? And what kind of President would turn more towards saving the profits of a corporation than the lives of our children?

The SCHIP bill is good for our Nation's health. It is good for our children. It is far more economical to have children be seen by their physicians in their doctor's offices than in the emergency room. It just makes sense. But sometimes I am coming to find here, if it makes sense, it may not happen while we have the President that we do.

I have been witnessing a great deal of misinformation about this bill. I have read every single page of the SCHIP bill, and I have heard the opposition in the minority speak up regarding with what I call misinformation. The fact is that this bill provides for children who are 19 years and under, and yet I have heard them say age 25.

I have read the bill and it says it is two times poverty, \$41,000 of annual income, and yet I have heard them stand up and claim that it will cover people up to \$83,000. That is misinformation.

I have heard them claim it is not really private health care but the slippery slope to socialized medicine. Well, we don't need socialized medicine in America. This is private health care. It is private doctors, private clinics and insurance companies, private hospitals providing the care that these children require.

It does not cover any illegal immigrants. It covers people who are here legally. So no more misinformation, no

more lies. SCHIP is good for our children. It is good for our economy. It is good for our Nation's soul.

Madam Speaker, I ask everyone to understand that the people of Wisconsin sent me here because they feel the same as we all do. We want our country back. People all across Wisconsin are saying the same thing, they want their country back. They want a country that has a border they can see and defend, and they want a country that believes in providing access to affordable health care for all of our children, no matter their economic means. We must have this time to discuss SCHIP all across the Nation and answer the question: Whose side are we on and what kind of Nation are we?

Mr. BARTON of Texas. Madam Speaker, I want to yield 3 minutes to the gentlewoman from Illinois (Mrs. BIGGERT) who has been one of the Republican negotiators on this issue in the informal talks that have been occurring at various times over the last month.

Mrs. BIGGERT. Madam Speaker, as many of my colleagues know and as the gentleman from Texas has said, I have been part of a group of Members from both sides of the aisle and from both Chambers who have been meeting actually over the past few months to try to find common ground on SCHIP legislation.

I am afraid that some of the facts that the gentleman from Wisconsin stated, he made some statements that I would hope he would join our group and we could go over those facts, such as the \$83,000.

For my colleagues who have taken part, they know very well that these discussions that we have been having were productive at times and less productive at other times. But despite our disagreements and the bumps in the road, I think we persisted and continued to meet because we believe this is one of the most important issues that Congress will address.

The genesis of these meetings originated from a letter that 38 House Republicans sent to the President on October 18, and in that letter we laid out principles that we believed would be necessary to secure our votes on the legislation and make this truly a bipartisan reauthorization of SCHIP. These basic principles included covering low-income children first, SCHIP for kids only, SCHIP should not force children out of private health insurance, SCHIP is for American children, and the funding should be stable and equitable.

It is important to note that the letter did not mention the tax increase or the \$35 billion in additional spending, two significant concerns for many Members on this side of the aisle.

□ 1930

Democrats also had their principles for the reauthorization. With these principles, we agreed to discuss how we could change the bill in a way that would gather the support of a significant number of House Republicans and

still have the support of the Members on the other side of the aisle. After weeks of negotiations, we came to a point where I think both sides realized that if a deal was going to be possible, we both had to give some ground for the benefit of a bill.

I think that we are and were very close to agreement in principle and a framework that both sides can support. To be frank, the agreement isn't a bill that I would write if I had the choice. I am sure that my friends on the other side of the aisle feel the same way. But this is how a negotiation works. I think if we both came away with a little bit of feeling like we hadn't won, then that's a true negotiation and both sides have compromised.

Unfortunately, I think we've run out of time for this year, and given that the current reauthorization ends on the 14th and there are a number of States projected to run out of SCHIP funding next year, I hope we can agree to an 18-month extension with additional funding to ensure that States will not have to drop children from the program.

But I would also ask that we continue working on a final bill when we return in January. I have spoken with the leadership on both sides and expressed my desire to do so. We need to put partisanship aside, and I would hope that we can continue to discuss this issue.

Mr. BECERRA. Madam Speaker, at this point I yield 1½ minutes to the chairman of the Democratic Caucus, a member of the Ways and Means Committee, the gentleman from Illinois (Mr. EMANUEL).

Mr. EMANUEL. Madam Speaker, the President and the Republican leadership in Congress never miss an opportunity to not miss an opportunity. There was a bipartisan consensus for 10 million children to have health care, and because the President didn't agree with it, he vetoed it.

Now, some people here say that we could have this vote now. We can have this vote in January.

The truth is the real vote will be in November of 2008. Some of us disagreed with the President of the United States on stem cell research. There was an election, and now we have a new Senator from Missouri, we have a new Congressman from Arizona, all because of that issue.

And the real vote, and people don't want to talk about it, say it's political, that's what a democracy is about. And there will be a vote about this, and the American people will vote on this. And those Members of Congress that are happy about denying 10 million children health care will get a chance and an opportunity to explain that vote. Those of us who think it's important will get that.

My own view, I wouldn't want to mix politics with policy, if there's going to be a few less Members who vote against 10 million children because the American people will make a judgment

about that. And we shouldn't deny that.

And so I give you credit. You never miss an opportunity to miss an opportunity. So, remember, some have talked about for 40 days in Iraq you could fund 10 million children's health care. Forty days in Iraq.

President Kennedy once said, "To govern is to choose." Well, you've made your choice. We've made our choice. And the American people in November are going to make their choice.

Mr. BARTON of Texas. Madam Speaker, I'm going to yield myself 2 minutes.

I want to thank my friend from Illinois for being honest. This is all about politics. It's not about policy. It's not about the children. It's about politics. So I commend him.

Mr. EMANUEL. Will my good friend yield?

Mr. BARTON of Texas. I'll yield for 30 seconds, sure.

Mr. EMANUEL. Okay. I come from a family. I believe politics is a good thing, because we have differences, and you work them out on election day and the American people make a decision, except for when you do special redistricting. But usually you let it out on election day. And I believe in that. I don't have a problem with that.

It's not about scoring points. There's differences. You don't support this. And I won't go through this. I was in the room when we negotiated this in 1997. When President Clinton proposed this, the Republican leadership at the time, and he said there will be no balanced budget without a children's health insurance program that had eye, dental and pediatric. The Republican leadership said at that point it was welfare. President Clinton said there will be no balanced budget agreement without this. Finally, you guys offered pediatric care but no eye and dental. And then the deal we cut was the SCHIP we have today. And the very flexibility that you oppose that our Governors are exploring was what you demanded back in 1997. But the original children health proposal wasn't a bipartisan agreement. It was President Clinton saying there will be no balanced budget agreement without 6 million children getting their health care. I believe that politics is a good thing, and that's what it proved.

Mr. BARTON of Texas. I respect the gentleman from Illinois. I think we should do more of this, quite frankly.

Madam Speaker, I'm going to yield myself such time as I may consume now to respond to my good friend from Illinois. I was in the House when SCHIP was passed. I was not in the leadership, but I was on the committee. My recollection is a little bit different than my friend from Illinois.

There were some Republicans, I think Senator HATCH was one of the ones in the Senate; Congressman Archer, who was the chairman of the Ways and Means Committee. This did come out of the effort to reform wel-

fare as it was then. There was a concern that as we tried to move primarily women who were single head of households off of welfare, if they didn't have a job that had health care, their children, in order for them to work, transition to work, that they needed health care. And President Clinton and the Republican leadership in the House and the Senate did agree that SCHIP was the answer. And it was a bipartisan agreement. I would give the President credit for supporting it, but I would also give the Republican leadership in the House and the Senate credit for supporting it also at that time.

The bill that is before us tonight is not the bill that passed in 1997. We have over 600,000 adults on SCHIP, a children's health insurance program. Rhetorically, my friends on the majority side say they really don't want adults to be covered. But nothing in this bill moves those adults off of SCHIP.

We don't know how many hundreds of thousands of noncitizens are covered. But most people agree that there are hundreds of thousands, if not millions. Nothing in this bill has an enforcement mechanism to move children who are not U.S. citizens off the rolls. Not one thing moves that. And the 200 percent of poverty, the original SCHIP bill was between 100 and 200 percent of poverty. That's still a good principle. There are not 10 million children in America between 100 and 200 percent of poverty that qualify for SCHIP. The most authoritative number is that there may be an additional 800,000.

Now, the current SCHIP bill covers about 6 million children. In order to get to the 10 million number, you have to go way above 200 percent, probably above 300 percent and maybe even as high as 400 percent. So this 10 million number, there are about 80 million children in America. Most of those children, luckily, have health insurance through some sort of a private sector employee-sponsored health insurance program. Six million have it under SCHIP, and then there are several million that have it under Medicaid. But there are not 10 million between 100 and 200 percent of poverty.

Those of us on the Republican side, we support SCHIP. We support the original program. We may even support something expanding it beyond the original program. But we don't support some of the ideas that take it up to as high as 300 to 350 percent of poverty, that cover noncitizens and that cover adults. That's what this debate is all about.

So we hope that we have an opportunity. We hope that we have a veto vote and that we sustain the President's veto, and then maybe my friend from Illinois and myself can actually enter into a bipartisan negotiation that does exactly what he wants to do and what people like myself want to do.

Mr. EMANUEL. Can I ask the ranking member to yield?

Mr. BARTON of Texas. I would yield for 30 seconds.

Mr. EMANUEL. First of all, it wasn't part of welfare reform. Welfare reform had a 1-year transitional for Medicaid. It wasn't part of that, which is a point you made.

Second is, SCHIP was so successful, while the rest of the population actually had an increase in uninsured, the only group in America for the last 7 years that had actually a decrease in the uninsured was children until last year. This is a product of answering the shortcomings between Medicaid and private insurance.

Mr. BARTON of Texas. We support that.

Mr. EMANUEL. The fact is there have been a million additional children in the last year and a half whose parents work full-time who don't have health care and this would cover.

And to the other point you said, actually there have been Democratic and Republican Governors and principally signed by this President where the adults have come from. This President signed those waivers for Democratic and Republican Governors.

Mr. BARTON of Texas. That doesn't mean that we need to continue those waivers.

With that, I would reserve the balance of my time.

Mr. PALLONE. Madam Speaker, I yield 2 minutes to the gentleman from Connecticut (Mr. MURPHY).

Mr. MURPHY of Connecticut. Madam Speaker, I'm a new Member of this Chamber, and so I don't know all the history of SCHIP. I don't know all of the reasons why the bill was written, why it was, the history of negotiations, and with all due respect to my friends who were here, I don't really care, because what I know is that right now there are millions of children throughout this country who go to bed each night ill, simply because they can't afford to see a doctor. And let me tell you why I think it's a good thing that we should wait a couple of weeks in order to take this vote. Because, frankly, I'm a hopeless romantic when it comes to this House, the people's House's ability to impose the will of the vast majority of Americans. Call me crazy, but I think that when 80 percent of Americans, as the CBS News poll told us some weeks ago, support advancing children's health care, then maybe, maybe, this House should do something about it. I'm also unapologetically idealistic about our moral obligation as a society and as a Congress, because I know every single one of us, if we were walking down the road and we saw a sick child on the side, we would stop everything we were doing and try to help that child. And I don't understand why that argument isn't extrapolated to those children throughout this country who are sick only because they can't afford health care. We have a moral obligation to help those kids. And we have a fiscal obligation as well, because that system

of universal coverage that extends only to people that go to emergency rooms when they get so sick that that's the only place that they can go, that costs us money. As moral and fiscal custodians of this great Nation, we have an obligation to pass this bill, to override this President's veto and to give all the time in the world to your constituents and our constituents to make that case over the next 4 weeks.

Mr. BARTON of Texas. Let me inquire how much time I have remaining, Madam Speaker.

The SPEAKER pro tempore. The gentleman from Texas has 14 minutes remaining.

Mr. BARTON of Texas. I want to yield 4 minutes to a member of the committee and also a member of the ad hoc negotiation team, Mr. WALDEN of Oregon.

Mr. WALDEN of Oregon. Madam Speaker, I think it is important to start by noting there is not, I don't think, a Member on either side of the aisle that doesn't support continuing the existing SCHIP program, continuing providing insurance coverage for 4.04 million American children. What we're debating is how you pay for an expansion beyond that, how you go from 200 percent of poverty level to a family of four that would be at 300 percent of poverty level. For the record, that's \$61,950. Some of us believe that before you expand to 300 percent of poverty, or a family of four making nearly \$62,000 a year, we should make sure that those kids who are in families that make enough that they don't qualify for Medicaid, that those from there on up to 200 or 250 percent of poverty actually are being insured by the States to whom we send this money back to.

There has been discussion that 10 million kids will be covered under the bill that the President vetoed. I wish somebody would give me a Congressional Budget Office summary that says that, because what CBO found when they analyzed this bill was that by 2012 there would be a total of 7.4 million kids insured under SCHIP under the bill we're debating tonight. If you've got a different document from CBO, I'd love see it. I've not seen it.

Further, CBO claims that the way this bill is structured, there would be 2 million children in America, 2 million of this 7.4 that either already have health insurance or have access to health insurance through their families or their families' employers. Two million. This is Congressional Budget Office data.

The effect of the way this bill is structured, those 2 million kids would probably be shifted onto a government plan. We ought to be trying to get kids who don't have access to health insurance first, and we should be trying to get the kids who are at the lower end of the economic scale insured first. Those are principles that we're fighting for in this.

Finally, two other points. I don't think it's asking too much that when a

parent brings in their children and their children don't have ID, that the parent simply present ID, a driver's license, something that proves who they are when they certify these are their kids. That's something we're asking for.

The third and final point, this program, the way it's crafted under this legislation, even with the tax that's proposed, by the next 10 years, the end of 10 years, you have borrowed forward \$80 billion, with a B, that has been borrowed, and in 2013, the program's out of money.

□ 1945

We have got enough of those Federal programs today. I mean Members on both sides of the aisle would have to agree that we haven't fixed the Medicare fix yet for docs. Their funding is going to be cut. I've got seniors in my district who can't get access to a physician.

Why would we enact a program today that we know, based on independent analysis, comes up \$80 billion short? You take the money for 10 years and you spend it in the first 5. What happens after that? Isn't it better to create a program that takes care of kids who are on the lowest end of the economic scale but whose parents make too much to be in Medicaid, make sure they're covered first, make sure we're not crowding out people who have access to health insurance for their kids through their employer or some other way, and that they don't shift to save money for themselves from a government-run program?

At the end of the day, I think we all want to take care of kids' health needs. We want to do it in a responsible way, fiscally responsible, that can be sustainable so that we don't end up with kids on a cliff in 5 years because you spent the money that was allocated over 10 in the first 5 because you borrowed. That doesn't make sense.

I never knowingly in 21 years in small business entered into a contract that I knew I couldn't fulfill. This is a contract that can't be fulfilled the way it is crafted. We can do better than this. It doesn't have to be a campaign and political issue. It can be a policy issue that works.

Mr. BECERRA. Madam Speaker, I yield 1 minute to the gentleman from California (Mr. THOMPSON), a member of the Ways and Means Committee.

Mr. THOMPSON of California. Madam Speaker, this is about health care for kids. It's an important and humane bill that's illustrative of who we are as Americans. It's paid for, and moreover, it saves us money. It saves us money by keeping kids out of the emergency room, and anytime that you can prevent or cure an illness before it becomes acute, that saves us money as well.

It's bipartisan, not only in the House and the Senate, but 43 Governors have endorsed this measure. Over 80 percent of the American people support the SCHIP program.

We should not let the President deny health care to 10 million kids of working moms and dads. We're better than that. We need to override this veto.

Mr. BARTON of Texas. Madam Speaker, I believe we only have two more speakers, so I'm going to reserve my time at this point.

Mr. PALLONE. Madam Speaker, I yield 2 minutes to the gentlewoman from New Hampshire (Ms. SHEA-PORTER).

Ms. SHEA-PORTER. Madam Speaker, a while ago the President of the United States looked out in front of a very elite crowd and said to all of them: Some people call you the elite. I call you my base.

You know, we should have listened a little more carefully because he really wasn't kidding. They were his base. The President has said "yes" to them ever since. Yes to Big Oil. Yes to Big Pharmacy. Yes to anything they want. Yes to tobacco companies. Yes to their tax cuts. And no to the middle class and no to the poor except for one yes. Yes, you can pay for them.

And so the President of the United States, with his helpers on the other side, have made it extremely difficult for the middle class and the poor not only to pay for their energy bills, not only to pay for all the other essentials, but now to take their children to the doctor or to the hospital.

What is wrong with us that we are having an argument about whether children should be insured and how many children should be insured?

I'm a former social worker. Every single day of my life I had stories, tragic stories, stories that should embarrass all of you that you're standing here fighting against these children, and how hard it was for these families to get their prescriptions, how hard it was for them and how they had to decide exactly at what temperature do you take a child to the doctor, at 101, 102 or 103 degrees, because we don't have the money, and so we're not going to take our child to the doctor unless we absolutely must.

And yet we stand here tonight and the President tells us that he is going to not allow this program. Why? Why? Because we put a tax on the tobacco company. Shame on all of us that are standing in the way of the children of this country. There's just no excuse for it.

And how many children are we talking about? Somebody on the other side said there really aren't that many children, maybe 1 million. Well, the Congressional Budget Office said to the Senate Finance Committee in July or August that there are about 5 to 6 million children.

The Democrats are dead on target with this, and the American public knows that and stands with us.

Mr. BARTON of Texas. Madam Speaker, I continue to reserve.

Mr. BECERRA. Madam Speaker, may I inquire as to the time remaining on both sides?

The SPEAKER pro tempore. The gentleman from California (Mr. BECERRA) has 10¼ minutes remaining. The gentleman from New Jersey (Mr. PALLONE) has 5½ minutes remaining.

Mr. BECERRA. Madam Speaker, at this time I yield 1½ minutes to the gentleman from Georgia (Mr. SCOTT).

Mr. SCOTT of Georgia. Madam Speaker, this issue boils down to a practicality of ideology. The Republicans and the Bush administration has repeatedly shown that they really quite honestly do not get it when it comes down to health care, and particularly for those who need the health care the most. This is not just the beginning of this. This argument started back during the winter when there were 17 States who came up short, and we fought and we fought to try to get that shortage fixed. But there was no help until I drafted an amendment, went to the gentleman from Pennsylvania (Mr. MURTHA), and we attached it to the Iraq war supplemental. That is the only way President Bush and the administration signed it.

Now, let me just point out two important points. There are scare tactics being used here. Anytime the Republicans and those on the other side want to score a point, they bring up the bogeyman of illegal immigration; these people are going to be illegal aliens. There's nothing in this bill. As a matter of fact, there's express language that prohibits in this bill any illegal immigrant or undocumented person from being eligible for this children's health program.

You talk about there are adults on the bill. There are no adults on this bill except an adult who happens to be pregnant with child for prenatal care. Should they not have that care? That strikes at the heart of this bill.

I urge everyone to not go with this sad argument and let's sustain and override this veto coming up on January 23.

Mr. BARTON of Texas. Madam Speaker, I yield myself 1 minute.

I appreciate the gentleman that just spoke, but let's be factually accurate. There are over 600,000 adults under current law on SCHIP right now. They're not all pregnant women. Now, some of them may be, but not all 600,000, and nothing in this bill moves any adult off of SCHIP. Nothing.

Madam Speaker, with that, I reserve the balance of my time.

Mr. PALLONE. Madam Speaker, I yield 2 minutes to the gentleman from Pennsylvania (Mr. SESTAK).

Mr. SESTAK. Madam Speaker, when I heard that the President vetoed this bill today, I asked to speak.

After about three-and-a-half decades in the U.S. military, I owe both Republicans and Democrats a lot. About 2, 2½ years, little over 2 years ago, my daughter, 4 years old, was struck with a malignant brain tumor. I'd never had a personal challenge in my entire life, having only gotten married 9 years ago. I'd had a lot of professional ones,

but after three brain operations, chemotherapy and radiation, she's here today. I thank you all for that because I had the best health care plan in America.

We took a pathology slice at Johns Hopkins, Mass General's Hospital. We took it everywhere. We took it to the ends of the Earth, and you gave me that health care plan.

But I will never forget living in Children's Hospital oncology ward down the street, and there was a young 2½-year-old boy the day my daughter started chemotherapy after her brain operations, and for 6 hours my wife and I could not help but overhear, because you all have been in those hospital rooms, social workers come and go to talk to the parents of the young 2½-year-old boy from Washington, DC, who had been diagnosed with acute leukemia that morning, to see whether that young boy could stay and have the same opportunity my daughter had because of you.

So this is the reason I got into the race for Congress a little less than 2 years ago. I owed you. I owed this Nation. You gave me an opportunity to have my daughter be here today. I didn't get in for Iraq. I got in for this bill. While it may not be perfect, neither was TRICARE, and I would just ask everyone to truly think about the opportunity to give our children, every child, this young boy, the same opportunity you gave me and my daughter.

Mr. BARTON of Texas. Madam Speaker, I yield 2½ minutes to the distinguished gentleman from the 5th District of the Garden State of New Jersey (Mr. GARRETT).

Mr. GARRETT of New Jersey. Madam Speaker, "I forbid," the Speaker, Democrat Speaker of the House, came to the floor and gave a translation of the Latin "veto" and explained to us that it means "I forbid."

Well, I can tell you the only veto that is occurring with regard to children's health care and care for the indigent poor is occurring here tonight at the hands of the Democrat majority.

The Democrat majority is vetoing. They are saying I forbid to move forward on this legislation. Republicans have expressed the desire to move forward and reached out and said in willingness to work together.

Just a moment ago, a freshman of the Democrat side of the aisle came to that podium and cited a figure that 80 percent of the American public, as he said, quote, wishes to advance children's health care for indigent poor children. The word "advance" means to move forward.

But Speaker PELOSI came to the floor and said, I forbid. I will veto moving forward tonight. Instead, put it on abeyance, put it on hold and say we have to put it off for another month.

What are they putting off? Well, they are trying to move forward later on on a bill that brings us socialized health care for illegal aliens, for adults, for children, for adults. No one has denied

that it's for adults. It is for childless couples and, by definition, is not for the poor. It is for middle class because, as we know, the median income in this country is \$42,000. This bill will allow people upwards to \$62,000 or \$70,000 to be eligible for this program. By definition, therefore, it will provide for a middle-class program for universal health care.

Now, in conclusion, the Democrat conference leader explains why they are saying that they are forbidding moving forward and is very clear. He said, I enjoy politics, and that's what this bill is all about. It is about politics.

So to those who come to the floor tonight from the other side of the aisle and with a heartfelt passion that I believe is in their heart that they wish to move forward on moving advanced care for our children, I would ask your rank-and-file Members of that side of the aisle to talk to your leadership and say, Do not veto this effort. Do not say I forbid moving forward, and allow us to move forward on providing health care for indigent, poor children in this country tonight and vote "no" on this motion.

Mr. BECERRA. Madam Speaker, I yield 1 minute to the majority leader, the gentleman from Maryland (Mr. HOYER).

Mr. HOYER. Madam Speaker, I thank the gentleman for yielding.

I was not going to participate in this debate, but the gentleman from New Jersey doesn't fully understand what we've been about for the last 2 months. He talked about the rank and file. Mr. DINGELL, the senior Member of this House, myself, Senator BAUCUS, Senator HATCH, Senator GRASSLEY, Members of the rank and file on your side of the aisle who had not voted for this bill and didn't vote to override the veto. Mr. BARTON was in some of those meetings. Mr. DEAL was in some of those meetings. We met for almost 100 hours with rank-and-file Members on your side because we felt so strongly we wanted to address some of the issues of concern.

We haven't gotten there yet, but I want to tell the gentleman, first of all, he says this bill is not for indigent children.

□ 2000

Medicaid is for indigent children. This is for children of hardworking Americans who are not making enough because either their employer doesn't provide insurance or they can't afford the insurance to cover their children. We tried very, very hard. I defy you, and you haven't been here that long, I understand that, but I defy you to find another instance where that many hours has been put in by such senior Members, including two of the most senior Republicans in the United States Senate who voted for this bill, as did 18 of their colleagues in the United States Senate, and 44 of your colleagues here voted for this bill, and

45 for the previous bill. This is a very significant bipartisan bill.

And this bill responded to some of the concerns raised by the President. You continue to talk about adults. There are parents on here at the States' choice, as you know. Your State's choice, my State's choice. However, we precluded, as you know, in this bill nonparents, and rather than a 2-year phaseout, we did a 1-year phaseout. We responded to the President's concern about \$83,000. We capped it at 300 percent. We responded to the question of trying to identify and to make sure that we add people who are authorized to be in this country.

So I think the gentleman's comments about the Democratic Party, or Democrat, as he likes to refer to us, is totally inaccurate, I will tell my friend. We've worked very hard. Why have we worked very hard? Because we think that 4 million children who the President of the United States in 2004 got on the Republican National Convention floor seeking the votes of all of his fellow citizens to be re-elected as President of the United States, said, I want to add millions of children currently eligible to this program who are not yet served. I tell my friend that's what this bill does. That's why we are so surprised and disappointed that the President rejected this bill and vetoed it and said, as the Speaker said, I forbid this bill going into effect and adding those 4 million children.

Mr. GARRETT of New Jersey. Madam Speaker, will the gentleman yield?

Mr. HOYER. I yield to the gentleman from New Jersey.

Mr. GARRETT of New Jersey. I thank the gentleman.

I appreciate that, and as I said in my remarks, I believe that there is heartfelt desire on the other side of the aisle to provide for, and I may have said indigent, poor children in this country. I do honestly believe that, from both sides of the aisle that the goal is the same thing, to try to provide care for that particular class of individuals.

What I disagree with the gentleman with is on a couple points you said. One specifically as far as the issue of a good, fair effort of negotiations on moving forward in this legislation.

Mr. HOYER. Reclaiming my time, I suggest that the gentleman refer to Mrs. BIGGERT to see whether or not she thought they were good-faith or extensive negotiations and discussions.

I yield to my friend.

Mr. GARRETT of New Jersey. I thank the gentleman.

I am informed that our side of the aisle, whether through Mrs. BIGGERT or otherwise, has presented to you or through your staff or otherwise a proposal back on November 15 of five pages of recommendations or suggestions as far as positions that could be done in this bill to move us both together. And here we are on December 12 and we have yet to receive a response from that.

Mr. HOYER. Reclaiming my time, and I am not going to get into further debate on this, I refer the gentleman to Senator HATCH and Senator GRASSLEY and ask them whether they thought good-faith negotiations were pursued and whether or not they thought that we had gone as far as we possibly could in order to accommodate the adding of 4 million children.

Mr. BARTON of Texas. Madam Speaker, what is the order of closing?

The SPEAKER pro tempore. It will be the Members in reverse order: Mr. PALLONE, Mr. BARTON, and Mr. BECERRA.

Mr. BARTON of Texas. I am ready to close after Mr. PALLONE.

Mr. PALLONE. Madam Speaker, I just want to reiterate and contradict some of the things that the President said in his veto message today.

He said that this is the same bill that we sent him that he previously vetoed. And it's simply not true. We made substantial changes to it to allay concerns about higher income families enrolling, adults being enrolled, or even undocumented immigrants being enrolled. I just want to point out some of the flaws with the President's message in closing.

First, the President says that our goal should be to move kids into private coverage and not into public programs. That is exactly what the CHIP program does, Mr. President. CHIP provides money to States, which in turn contract with private insurance companies to provide insurance coverage to kids. It's not socialized medicine, it's not government-run health care, and the President should know that.

Second, the President says his proposal to reauthorize CHIP would increase funding by 20 percent. What he doesn't tell you is that his plan would not help provide coverage to the 6 million kids who are uninsured and eligible to enroll in either CHIP or Medicaid. I would point out that the Senate Finance Committee in July received a letter from the CBO where they said that they estimate between 5 million and 6 million children who are uninsured are eligible for Medicaid or SCHIP. So there are a lot of kids out there, almost twice as many that are in the program now, that could be insured.

And then the President said that we allow adult coverage. Well, let me say our bill phases out adult coverage faster than the President would do by just disapproving his waiver renewals.

Fourth, the President says we don't focus on the lowest income kids, and that's not true. We provide financial resources for States to go out and find the lowest income kids first.

Finally, the President has said he's been willing to work with us to reauthorize SCHIP, and the Republicans in the House said the same thing. Well, the fact of the matter is that, as our majority leader said, we have reached out. We have had hundreds of hours of meetings. We have reached out to the

President. It's simply not true that we haven't reach out, and the fact of the matter is that the President has been unwilling to budge even 1 inch from where he wants to go with the SCHIP legislation. Instead of working with us to provide health insurance to 10 million kids, he's given us two vetoes now.

All I can say, Mr. President, the holiday season is upon us, but you are basically becoming the Grinch who stole Christmas from these 10 million kids, in this case at least 5 or 6 million, that don't have health insurance. It's a shame that we have come to this position today, and I would urge my colleagues to cast a vote to override the President's veto.

ANNOUNCEMENT BY THE SPEAKER PRO TEMPORE

The SPEAKER pro tempore. Members are reminded to address their remarks to the Chair.

Mr. BARTON of Texas. Madam Speaker, there's a great movie from the sixties or maybe the seventies called "Cool Hand Luke." Paul Newman is Cool Hand Luke, and he gets imprisoned for some minor infraction and he just doesn't conform with the regulations of the prison. And finally in exasperation the prison warden is talking to him in front of the chain gang and utters the famous line, "What we have here is a failure to communicate."

Well, what we have here tonight apparently is another failure to communicate. The Republicans in the House of Representatives want to reauthorize SCHIP. Some of the Republicans in the House of Representatives even want to expand SCHIP. But what we don't want to do is make SCHIP the surrogate for universal health care for children that are not in low-income or moderate-income families. We don't want to do that. And the bill before us would do that.

It would cover children up to 300 percent of poverty, explicitly, which is above the median income in this country. And it would not have any substantial reform on what are called "income disregards." An income disregard is, some States have said, well, we're going to disregard this amount of income or we're going to disregard that particular expense. So for all practical purposes if a State chooses to disregard income, then there is no cap, and the bill before us doesn't have reforms in that measure.

The bill before us, in terms of illegal aliens, does have a paragraph that says no illegal alien can receive the benefit. It has that. But it has no enforcement. It's toothless. It's like saying don't go over 55 miles an hour or 60 miles an hour but you don't have a radar policeman to enforce the speed limit.

So what we are saying and what the President of the United States is saying in his veto message is pretty straightforward. Let's continue the SCHIP program. Let's find the children that are below 200 percent of poverty, and let's get them enrolled in the program and perhaps even go as high as

250 percent or 275 percent. Let's find some way to have a real enforcement to make sure that SCHIP is for children and for children of citizens. And then let's find a way to get the adults on the program off the program.

There are some States that cover more adults than children. And, again, my friends on the majority agree that that's not an appropriate thing, but they don't do anything in the bill to reform that.

So when my friend from New Jersey, the distinguished subcommittee chairman, talks about there may be as many as 6 million additional children that could be covered, I very carefully listened to what he said, and I would agree with what he said because he used the words "Medicaid" and "SCHIP." Well there are 25 million children covered under Medicaid right now. There may well be another 5 or 6 million children that are eligible for Medicaid that we need to work with on a bipartisan basis to get in Medicaid. But according to HHS, there are only 800,000 eligible for SCHIP. Even according to the CBO, there are only an additional maybe 1.3 million that would be eligible for SCHIP under the bill that the majority is putting on the floor.

So I wish we wouldn't postpone this veto. I wish we would go ahead and have the veto override tonight because we will sustain the veto. And then I wish my good friend JOHN DINGELL from Michigan and Mr. RANGEL from New York would work with Mr. MCCRERY and myself and other Members to really come together on a bipartisan basis.

I would like to point out that these negotiations that Mr. HOYER alluded to did, in fact, happen, but those negotiations were not a conference. This bill is not the result of a conference committee between the House and the Senate. The bill before us is the result of some backroom negotiations and then an effort on an ad hoc basis of some of the senior Members of the majority in this House and some Members of the other body to work with some of our junior Members who had really no official standing but did negotiate in good faith to come up with a compromise. And as Mr. GARRETT pointed out, the written proposal the Republicans put forward, I think, to this day has never been answered. Now, I could be wrong on that, but I don't think it has ever been formally addressed.

So I sat in on those negotiations for several days, and what we got was a lot of good feeling talk. But when it came time to put it on paper, the majority wouldn't put it on paper.

So let's not postpone this override. Let's vote down the motion to postpone, and let's have the veto override tonight. And then in the next week or so if we are still in session, let's really start a bipartisan process that is based on the formal processes of the House and the Senate.

With that, I would yield back my time, Madam Speaker.

□ 2015

Mr. BECERRA. Madam Speaker, I yield myself such time as I may consume.

Madam Speaker, let's remember why we're here. Less than 2 weeks before Christmas, and we're talking about whether or not 10 million children, the children of hardworking American families, when we know that the cost of health care has increased, we're talking about whether or not 10 million children, 2 weeks before Christmas, will have access to health care.

Madam Speaker, the bill we're attempting to override is a responsible bill. It does not increase the deficit in providing health care access to our children. It is completely paid for.

Madam Speaker, this bill speaks for itself. Regardless of what's been said by either side, read the bill, it speaks for itself. This is about children's health care. And it's only for children who are citizens, who are legally in this country. And it is for modest-income Americans who are in this country.

Madam Speaker, let some numbers speak for themselves: 43, 100, 10 million. Forty-three, that is the number of our Republican colleagues who voted on a bipartisan basis to override President Bush's veto of this children's health care bill. One hundred, we have been in the process of talking to our Republican colleagues and trying to resolve our differences for over 100 days, as the gentlelady from Illinois (Mrs. BIGGERT) herself stated. Ten million, that's the price. Ten million children in this country who will not have access to health care if we don't do anything. They simply want to have the same access to health care, to a doctor, to a clinic or to a hospital the way the children of every Member of this Congress has access to health care.

No Member of Congress stands up and complains that, at taxpayer expense, we are making available to each and every one of us a health care policy which today and on Christmas Day will ensure that our children will be insured if something should happen and they need to go to a doctor or to a hospital. Is there any reason why hardworking Americans who just don't earn enough money to pay for the full cost of that health insurance shouldn't have the same access as each and every Member of Congress has for his and her children today?

Madam Speaker, I hope we all keep our eye on the prize; 10 million children, 10 million children who we're trying to make sure have access to health care. If Members of Congress can guarantee our children health care, then we should be prepared to guarantee that anyone who works in this country can provide health care to their children. That's what this is about.

We're going to return to the people of this country the Congress that they feel they've lost. We said a while ago that this Congress would take a new direction. That's what we mean when we mean to override the President's veto.

I urge my colleagues to vote today, to think about 10 million kids right before Christmas and say to the President, We will override your veto.

Madam Speaker, I yield back the balance of my time.

The SPEAKER pro tempore. Without objection, the previous question is ordered on the motion to postpone.

There was no objection.

The SPEAKER pro tempore. The question is on the motion.

The question was taken; and the Speaker pro tempore announced that the ayes appeared to have it.

Mr. BARTON of Texas. Madam Speaker, I object to the vote on the ground that a quorum is not present and make the point of order that a quorum is not present.

The SPEAKER pro tempore. Evidently a quorum is not present.

The Sergeant at Arms will notify absent Members.

Pursuant to clause 8 of rule XX, this 15-minute vote on the motion to postpone will be followed by a 5-minute vote on suspending the rules on H.R. 3985.

The vote was taken by electronic device, and there were—yeas 211, nays 180, not voting 40, as follows:

[Roll No. 1154]

YEAS—211

Abercrombie	Donnelly	Lee
Ackerman	Doyle	Levin
Allen	Edwards	Lewis (GA)
Altmire	Ellison	Lipinski
Andrews	Ellsworth	Loeb
Arcuri	Emanuel	Lofgren, Zoe
Baca	Engel	Lowey
Baird	Etheridge	Lynch
Baldwin	Fattah	Mahoney (FL)
Barrow	Filner	Maloney (NY)
Becerra	Frank (MA)	Markey
Berkley	Giffords	Marshall
Berman	Gillibrand	Matsui
Bishop (GA)	Gonzalez	McCarthy (NY)
Bishop (NY)	Gordon	McCollum (MN)
Blumenauer	Green, Al	McGovern
Boren	Green, Gene	McIntyre
Boswell	Grijalva	McNerney
Boucher	Gutierrez	McNulty
Boyd (FL)	Hall (NY)	Meek (FL)
Boyd (KS)	Hare	Meeks (NY)
Brady (PA)	Harman	Melancon
Brale (IA)	Hastings (FL)	Michaud
Brown, Corrine	Herseth Sandlin	Miller (NC)
Butterfield	Higgins	Mitchell
Capps	Hill	Mollohan
Capuano	Hinche	Moore (KS)
Cardoza	Hirono	Moore (WI)
Carnahan	Hodes	Murphy (CT)
Carney	Holden	Murphy, Patrick
Castor	Holt	Murtha
Chandler	Honda	Nadler
Clarke	Hoyer	Napolitano
Clay	Inslie	Neal (MA)
Cleaver	Israel	Oberstar
Clyburn	Jackson (IL)	Obey
Cohen	Jackson-Lee	Olver
Conyers	(TX)	Ortiz
Cooper	Jefferson	Pallone
Costa	Johnson (GA)	Pascarell
Costello	Johnson, E. B.	Pastor
Courtney	Jones (OH)	Payne
Cramer	Kagen	Perlmutter
Crowley	Kanjorski	Peterson (MN)
Cuellar	Kaptur	Pomeroy
Cummings	Kennedy	Price (NC)
Davis (AL)	Kildee	Rahall
Davis (CA)	Kilpatrick	Rangel
Davis (IL)	Kind	Reyes
Davis, Lincoln	Klein (FL)	Richardson
DeFazio	Kucinich	Rodriguez
DeGette	Lampson	Ross
Delahunt	Langevin	Rothman
Dingell	Larsen (WA)	Roybal-Allard
Doggett	Larson (CT)	Ruppersberger

Rush	Snyder	Velázquez
Salazar	Solis	Visclosky
Sánchez, Linda T.	Spratt	Walz (MN)
Sarbanes	Stark	Wasserman
Schakowsky	Stupak	Schultz
Schiff	Sutton	Waters
Schwartz	Tanner	Watson
Scott (GA)	Tauscher	Watt
Scott (VA)	Taylor	Weiner
Serrano	Thompson (CA)	Welch (VT)
Sestak	Thompson (MS)	Wexler
Shea-Porter	Tierney	Wilson (OH)
Sherman	Towns	Woolsey
Sires	Tsongas	Wu
Slaughter	Udall (CO)	Yarmuth
Smith (WA)	Udall (NM)	
	Van Hollen	

NAYS—180

Aderholt	Gallegly	Pearce
Akin	Garrett (NJ)	Pence
Alexander	Gerlach	Peterson (PA)
Bachmann	Gilchrest	Petri
Bachus	Gingrey	Pickering
Baker	Gohmert	Pitts
Barrett (SC)	Goode	Platts
Bartlett (MD)	Goodlatte	Poe
Barton (TX)	Granger	Porter
Biggart	Graves	Price (GA)
Bilbray	Hall (TX)	Pryce (OH)
Bilirakis	Hastings (WA)	Putnam
Bishop (UT)	Hayes	Radanovich
Blackburn	Heller	Ramstad
Blunt	Hensarling	Regula
Bonner	Herger	Rehberg
Bono	Hobson	Reichert
Boozman	Hoekstra	Renzi
Boustany	Hulshof	Rogers (AL)
Brady (TX)	Inglis (SC)	Rogers (KY)
Broun (GA)	Issa	Rogers (MI)
Brown (SC)	Johnson (IL)	Rohrabacher
Brown-Waite,	Johnson, Sam	Ros-Lehtinen
Ginny	Jones (NC)	Roskam
Buchanan	Jordan	Royce
Burgess	Keller	Ryan (WI)
Burton (IN)	King (IA)	Sali
Buyer	King (NY)	Schmidt
Calvert	Kingston	Sensenbrenner
Camp (MI)	Kline (MN)	Sessions
Campbell (CA)	Knollenberg	Shays
Cannon	Kuhl (NY)	Shimkus
Cantor	LaHood	Shuler
Capito	Lamborn	Shuster
Carter	Latham	Simpson
Castle	LaTourette	Smith (NE)
Chabot	Lewis (KY)	Smith (NJ)
Cole (OK)	Linder	Smith (TX)
Conaway	LoBiondo	Souder
Crenshaw	Lucas	Stearns
Davis (KY)	Lungren, Daniel E.	Sullivan
Davis, David	Mack	Terry
Deal (GA)	Manullo	Thornberry
Dent	Marchant	Tiahrt
Diaz-Balart, L.	McCarthy (CA)	Tiberi
Diaz-Balart, M.	Drake	Turner
Drake	McCaul (TX)	Upton
Dreier	McCotter	Walberg
Duncan	McHenry	Walden (OR)
Ehlers	McHugh	Walsh (NY)
Emerson	McKeon	Wamp
English (PA)	McMorris	Weldon (FL)
Everett	Rodgers	Weller
Fallin	Mica	Westmoreland
Feeoney	Miller (FL)	Whitfield
Flake	Miller (MI)	Wicker
Forbes	Moran (KS)	Wilson (NM)
Fortenberry	Murphy, Tim	Wilson (SC)
Fox	Musgrave	Wolf
Franks (AZ)	Murry	Young (AK)
Frelinghuysen	Nunes	Young (FL)

NOT VOTING—40

Bean	Fossella	Neugebauer
Berry	Hinojosa	Paul
Boehner	Hoyle	Reynolds
Carson	Hunter	Ryan (OH)
Coble	Jindal	Sanchez, Loretta
Cubin	Kirk	Saxton
Culberson	Lantos	Shadegg
Davis, Tom	Lewis (CA)	Skelton
DeLauro	Matheson	Space
Dicks	McCrery	Tancredo
Doolittle	McDermott	Waxman
Eshoo	Miller, Gary	Wynn
Farr	Miller, George	
Ferguson	Moran (VA)	

ANNOUNCEMENT BY THE SPEAKER PRO TEMPORE

The SPEAKER pro tempore (during the vote). Members are advised there are 2 minutes remaining on this vote.

□ 2039

Mr. EHLERS changed his vote from “yea” to “nay.”

So the motion was agreed to.

The result of the vote was announced as above recorded.

A motion to reconsider was laid on the table.

OVER-THE-ROAD BUS TRANSPORTATION ACCESSIBILITY ACT OF 2007

The SPEAKER pro tempore. The unfinished business is the vote on the motion to suspend the rules and pass the bill, H.R. 3985, on which the yeas and nays were ordered.

The Clerk read the title of the bill.

The SPEAKER pro tempore. The question is on the motion offered by the gentleman from Minnesota (Mr. OBERSTAR) that the House suspend the rules and pass the bill, H.R. 3985.

This will be a 5-minute vote.

The vote was taken by electronic device, and there were—yeas 374, nays 0, not voting 57, as follows:

[Roll No. 1155]

YEAS—374

Ackerman	Campbell (CA)	Engel
Aderholt	Cannon	English (PA)
Akin	Cantor	Etheridge
Alexander	Capito	Everett
Allen	Capuano	Fallin
Altmire	Cardoza	Fattah
Andrews	Carnahan	Feeney
Arcuri	Carney	Filner
Baca	Carter	Flake
Bachmann	Castle	Forbes
Bachus	Castor	Fortenberry
Baird	Chabot	Fox
Baldwin	Chandler	Frank (MA)
Barrett (SC)	Clarke	Franks (AZ)
Barrow	Clay	Frelinghuysen
Bartlett (MD)	Cleaver	Gallegly
Barton (TX)	Clyburn	Garrett (NJ)
Bean	Cohen	Gerlach
Becerra	Cole (OK)	Giffords
Berkley	Conaway	Gilchrest
Berman	Conyers	Gillibrand
Biggart	Cooper	Gonzalez
Bilbray	Costa	Goode
Bilirakis	Costello	Goodlatte
Bishop (GA)	Courtney	Gordon
Bishop (NY)	Cramer	Granger
Bishop (UT)	Crenshaw	Graves
Blackburn	Crowley	Green, Al
Blumenauer	Cuellar	Green, Gene
Blunt	Cummings	Grijalva
Bonner	Davis (AL)	Gutierrez
Bono	Davis (CA)	Hall (NY)
Boozman	Davis (IL)	Hall (TX)
Boren	Davis (KY)	Hare
Boswell	Davis, David	Harman
Boucher	DeFazio	Hastings (FL)
Boustany	Delahunt	Hastings (WA)
Boyd (FL)	Dent	Hayes
Boyd (KS)	Diaz-Balart, L.	Heller
Brady (PA)	Diaz-Balart, M.	Hensarling
Brady (TX)	Dingell	Herger
Brale (IA)	Doggett	Herseth Sandlin
Broun (GA)	Donnelly	Higgins
Brown (SC)	Doyle	Hill
Brown, Corrine	Drake	Hinche
Brown-Waite,	Dreier	Hirono
Ginny	Duncan	Hobson
Buchanan	Edwards	Hodes
Burgess	Ehlers	Hoekstra
Burton (IN)	Ellison	Holden
Butterfield	Ellsworth	Holt
Buyer	Emanuel	Honda
Camp (MI)	Emerson	Hoyer