So even if all the substitutes are defeated, we will still be able to consider and debate this very important amendment.

Mr. Speaker, I would ask unanimous consent to have the text of the amendment and extraneous material printed in the RECORD just prior to the vote on the previous question.

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

There was no objection.

Mr. SESSIONS. Mr. Speaker, I yield back the balance of my time.

□ 1200

Ms. SUTTON. Mr. Speaker, I yield myself the balance of my time.

In a document released March 28, the Center on Budget and Policy Priorities stated: ''Some are claiming that the budget plan adopted last week by the House Budget Committee, which the full House is expected to vote on this week, would constitute 'the largest tax increase in history.' This claim is incorrect. The House plan does not include a tax increase.'' That is what the Center on Budget and Policy Priorities stated.

Mr. Speaker, last November the American people made it clear they are ready for a government that will be fiscally responsible. This Nation spoke loud and clear when it put a new party in power in Congress, asking for responsibility and a new direction in our fiscal priorities. Education, health care, the care of our children and our seniors and our veterans, these are issues that Americans are concerned about.

Our budget restores common sense to our national spending and sanity to our national priorities. It restores the President's attempt to cut children's health care programs and Community Block Grants, and it puts forth the single largest increase in veterans spending in our Nation's history, and not a moment too soon.

It funds math and science programs for our kids, and programs like Head Start and Pell Grants that provide access to education that so many of our children need. And this budget concerns itself with the need to create jobs and build a bright economic future. It restores funding for job training programs.

Mr. Speaker, it is time for Congress to be accountable to American taxpayers once again. It is time for Congress to be accountable to our children's future once again. I urge a ''yes'' vote on the previous question and on the rule.

The material previously referred to by Mr. SESSIONS is as follows:

(The information contained herein was provided by Democratic Minority on multiple occasions throughout the 109th Congress.)

THE VOTE ON THE PREVIOUS QUESTION: WHAT IT REALLY MEANS

This vote, the vote on whether to order the previous question on a special rule, is not merely a procedural vote. A vote against ordering the previous question is a vote against the Democratic majority agenda and a vote to allow the opposition, at least for the moment, to offer an alternative plan. It is a vote about what the House should be debating.

Mr. Clarence Cannon's Precedents of the House of Representatives, (VI, 308–311) describes the vote on the previous question on the rule as ''a motion to direct or control the consideration of the subject before the House being made by the Member in charge.'' To defeat the previous question is to give the opposition a chance to decide the subject before the House. Cannon cites the Speaker's ruling of January 13, 1920, to the effect that ''the refusal of the House to sustain the demand for the previous question passes the control of the resolution to the opposition'' in order to offer an amendment. On March 15, 1909, a member of the majority party offered a rule resolution. The House defeated the previous question and a member of the opposition rose to a parliamentary inquiry, asking who was entitled to recognition. Speaker Joseph G. Cannon (R–Illinois) said: ''The previous question having been refused, the gentleman from New York, Mr. Fitzgerald, who had asked the gentleman to yield to him for an amendment, is entitled to the first recognition.''

Because the vote today may look bad for the Democratic majority they will say ''the vote on the previous question is simply a vote on whether to proceed to an immediate vote on adoptinlg the resolution . . . . [and] has no substantive legislative or policy implications whatsoever.'' But that is not what they have always said. Listen to the definition of the previous question used in the Floor Procedures Manual published by the Rules Committee in the 109th Congress, (page 56). Here's how the Rules Committee described the rule using information from Congressional Quarterly's ''American Congressional Dictionary'': ''If the previous question is defeated, control of debate shifts to the leading opposition member (usually the minority Floor Manager) who then manages an hour of debate and may offer a germane amendment to the pending business.''

Deschler's Procedure in the U.S. House of Representatives, the subchapter titled ''Amending Special Rules'' states: ''a refusal to order the previous question on such a rule [a special rule reported from the Committee on Rules] opens the resolution to amendment and further debate.'' (Chapter 21, section 21.2) Section 21.3 continues: Upon rejection of the motion for the previous question on a resolution reported from the Committee on Rules, control shifts to the Member leading the opposition to the revious question, who may offer a proper amendment or motion and who controls the time for detiate thereon.''

Clearly, the vote on the previous question on a rule does have substantive policy implications. It is one of the only available tools for those who oppose the Democratic majority's agenda and allows those with alternative views the opportunity to offer an alternative plan.

AMENDMENT TO H. RES. 275

OFFERED BY REP. SESSIONS OF TEXAS

At the end of the resolution, add the following:

SEC. 3. Notwithstanding any other provision of this resolution, the amendment printed in section 4 shall be in order as though printed as the last amendment in the report of the Committee on Rules if offered by Representative Brady of Texas or a designee. That amendment shall be debatable for 30 minutes equally divided and controlled by the proponent and an opponent.

SEC. 4. The amendment referred to in section 3 is as follows:

Reduce the amounts on page 3, lines 10 through 12, and page 4, lines 1 through 3, by the following amounts:

Fiscal year 2008: $300,000,000.
Fiscal year 2009: $1,800,000,000.
Fiscal year 2010: $2,100,000,000.
Fiscal year 2011: $2,400,000,000.
Fiscal year 2012: $3,800,000,000.

Amend page 4, lines 7 through 12 to read as follows:

Fiscal year 2008: $300,000,000.
Fiscal year 2009: $1,800,000,000.
Fiscal year 2010: $2,100,000,000.
Fiscal year 2011: $2,400,000,000.
Fiscal year 2012: $3,800,000,000.

Insert at the end of Title VI (page 61, line 10), the following section:

SEC. 602. RECONCILIATION FOR ECONOMIC GROWTH AND TAX FAIRNESS.

(a) IN THE HOUSE.—The House Committee on Ways and Means shall report a reconciliation bill not later than May 8, 2008, that consists of changes in laws within its jurisdiction sufficient to reduce revenues by not more than $10,400,000,000 for the period of fiscal years 2008 through 2012.

(b) PURPOSE.—The reconciliation legislation reported pursuant to subsection (a) shall make the changes in the Internal Revenue Code such that the deduction of State and Local Sales Taxes shall not decrease during the fiscal years covered by this resolution.

Ms. SUTTON. Mr. Speaker, I yield back the balance of my time, and I move the previous question on the resolution.

The SPEAKER pro tempore. The question is on ordering the previous question.

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

Mr. SESSIONS. Mr. Speaker, on that I demand the yeas and nays.

The yeas and nays were ordered.

The SPEAKER pro tempore. Pursuant to clause 8 of rule XX, further proceedings on this question are postponed.

PROVIDING FOR CONSIDERATION OF H.R. 1538, WOUNDED WARRIOR ASSISTANCE ACT OF 2007

Ms. CASTOR. Mr. Speaker, by direction of the Committee on Rules, I call up House Resolution 274 and ask for its immediate consideration.

The Clerk read the resolution, as follows:

H. RES. 274

Resolved, That at any time after the adoption of this resolution the Speaker may, pursuant to clause 2(b) of rule XVIII, declare the House resolved into the Committee of the Whole House on the state of the Union for consideration of the bill (H.R. 1538) to amend title 10, United States Code, to improve the management of medical care, personnel actions, and quality of life issues for members of the Armed Forces who are receiving medical care in an outpatient status, and for other purposes. The first reading of the bill shall be dispensed with. All points of order against consideration of the bill are waived except those arising under clause 9 or 10 of rule XXI. General debate shall be confined to the bill and shall not exceed one hour and 20 minutes, with one hour equally divided and controlled by the chairman and ranking minority member of the Committee on Armed

Services and 20 minutes equally divided and controlled by the chairman and ranking minority member of the Committee on Veterans' Affairs. After general debate the bill shall be considered for amendment under the five-minute rule. It shall be in order to consider as an original bill for the purpose of amendment under the five-minute rule the amendment in the nature of a substitute recommended by the Committee on Armed Services now printed in the bill. The committee amendment in the nature of a substitute shall be considered as read. All points of order against the committee amendment in the nature of a substitute are waived except those arising under clause 9 or 10 of rule XXI. Notwithstanding clause 11 of rule XVIII, no amendment to the committee amendment in the nature of a substitute shall be in order except those printed in the report of the Committee on Rules accompanying this resolution. Each such amendment may be offered only in the order printed in the report, may be offered only by a Member designated in the report, shall be considered as read, shall be debatable for the time specified in the report equally divided and controlled by the proponent and an opponent, shall not be subject to amendment, and shall not be subject to a demand for division of the question in the House or in the Committee of the Whole. All points of order against such amendments are waived except those arising under clause 9 or 10 of rule XXI. At the conclusion of consideration of the bill for amendment the Committee shall rise and report the bill to the House with such amendments as may have been adopted. Any Member may demand a separate vote in the House on any amendment adopted in the Committee of the Whole to the bill or to the committee amendment in the nature of a substitute. The previous question shall be considered as ordered on the bill and amendments thereto to final passage without intervening motion except one motion to recommit with or without instructions.

SEC. 2. During consideration in the House of H.R. 1538 pursuant to this resolution, notwithstanding the operation of the previous question, the Chair may postpone further consideration of the bill to a time designated by the Speaker.

The SPEAKER pro tempore. The gentlewoman from Florida (Ms. CASTOR) is recognized for 1 hour.

Ms. CASTOR. Mr. Speaker, for the purpose of debate only, I yield the customary 30 minutes to the gentleman from Washington (Mr. HASTINGS). All time yielded during consideration of the rule is for debate only.

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

(Ms. CASTOR asked and was given permission to revise and extend her remarks.)

Ms. CASTOR. Mr. Speaker, House Resolution 274 provides for consideration of H.R. 1538, the Wounded Warrior Assistance Act of 2007, under a structured rule. The rule provides 1 hour and 20 minutes of general debate with 1 hour equally divided and controlled by the chairman and ranking minority member of the Committee on Armed Services, and 20 minutes equally divided and controlled by the chairman and ranking minority member of the Committee on Veterans' Affairs.

The rule waives all points of orders against consideration of the bill except clauses 9 and 10 of rule XXI. The rule provides that the amendment in the nature of a substitute recommended by the Committee on Armed Services shall be considered as an original bill for the purpose of amendment and shall be considered as read. The rule waives all points of order against provisions in the bill, as amended.

The rule makes in order only those further amendments printed in the Rules Committee report accompanying the resolution; in this case, eight Democratic amendments and four Republican amendments. The amendments may be offered only in the order printed in the report, may be offered only by a Member designated in the report, shall be considered as read, shall be debatable for the time specified in the report, equally divided and controlled by the proponent and an opponent, not be subject to amendment, and shall not be subject to a demand for division of the question in the House or in the Committee of the Whole. All points of order against the amendment except for clauses 9 and 10 of rule XXI are waived.

The rule provides one motion to recommit with or without instructions. Finally, the rule permits the Chair, during consideration of H.R. 1538, to postpone further consideration to a time designated by the Speaker.

Mr. Speaker, the American people and this new Congress demand, through this rule and this legislation, that the executive branch move beyond the rhetoric of ''support our troops'' to concrete actions that sustain our brave men and women in uniform and their families by providing the quality health care they deserve when they return from the battlefield.

Supporting our troops does not mean that you simply salute as you send them off to war, ask them to serve in sacrifice for our great country, but it also means that they are supported when they come home, their families are respected, and our wounded warriors receive superior health care for their physical injuries and mental scars.

This might sound familiar from the Washington Post: ''The conflict in Iraq has hatched a town of desperation and dysfunction, clinging to the pilings of Walter Reed. The wounded are socked away for months and years in random buildings and barracks in and around the military post. Mostly what the soldiers do together is wait: for appointments, evaluation, signatures and lost paperwork to be found. 'It's like,' one military wife said, 'if Iraq don't kill you, Walter Reed will.' While a part of Walter Reed has a full bar, there is not one counselor or psychologist assigned there to assist soldiers and families in crisis—an idea proposed by Walter Reed social workers but rejected by the military command that runs the post.''

To the other end of Pennsylvania Avenue, I say what a shame that the American people had to have their eyes opened by two dedicated Washington Post reporters as to the treatment of our veterans, the incompetence and the profound disrespect. These reporters spent hundreds of hours documenting the intimate struggles of the wounded warriors who live at Walter Reed. Their stories triggered others from across the country, like in my hometown paper, the Tampa Tribune.

The Tampa Tribune last week told the story of soldier John Barnes who was injured by a mortar in Iraq just last year. Barnes was fortunate, he had a mother who was a dedicated nurse who stood by him during his days at Walter Reed.

Barnes, now 23, was frequently left unattended, his mother, Valerie Wallace said, even though he had a severe brain injury. He fell repeatedly. Orderlies failed to arrive on time to wheel him to appointments. Medicines were given in the wrong doses; paperwork was lost or never filed.

'' 'I don't think anybody planned this war far out,' said Wallace, an energetic woman who looks younger than her 45 years. 'If you are going to invade a country and you are expecting to be there for years, you've got to know there are going to be thousands of casualties,' she said. 'How are you going to take care of them? Where are you going to put them?'

''Wallace is a registered nurse who has worked for more than a decade at Tampa General Hospital. She wasn't intimidated by the staff at Walter Reed, and she knew what questions to ask. Still, the layers of bureaucracy were overwhelming. The need to remain constantly vigilant was exhausting. Trust quickly evaporated.

'' 'Nobody tells you anything,' Wallace said. 'Nobody prepares you for anything. You're very much on your own in a world you don't know or understand, and you are so overcome with grief and worry that you can't think straight anyway.' ''

Well, these and other stories emboldened military families across the country and all Americans to stand up and demand better treatment for our troops and families who have sacrificed so much.

As Speaker PELOSI reminds us often, the support provided to our troops by the Bush administration has not matched their sacrifice, and, Mr. Speaker, we will rectify that today.

I wish, back in late 2003, when an Army specialist from Tampa named Corey Magee contacted my office, because I was a county commissioner before I was elected to Congress. His family contacted me and said Corey has been shot in the fire fight in Fallujah after an IED blew up his tank. He was shot in the neck and paralyzed and eventually flown to Walter Reed. In some God-given circumstance, I happened to be traveling to Washington that weekend and was able to assemble a care package from his family to deliver to Corey. But they couldn't find out what his situation was. We called and called. We enlisted the help of a United States Senator at the time who was on the Veterans' Committee. We

still couldn't get through the bureaucracy.

I had to travel with the Senator's staff to Walter Reed Hospital, and track down the doctor to find out what brave Corey Magee's prognosis was. He was a brave young guy, and really in his condition couldn't ask for help on his own. And do you know, after that he thanked us profusely for contacting his family and filling them in. He said, ''I am sure we won't have to call you again. They are going to take good care of me.''

He returned to Tampa, and I was surprised a few weeks later to get a phone call from this brave Army specialist because he was having trouble getting his physical therapy appointments at the Veterans Hospital.

□ 1215

So this bill, though it is a step in the right direction today, comes a bit too late. I wish this bill and I wish the attention had been focused earlier and the respect paid to these families by the Bush administration.

As I visited the Bay Pines VA Medical Center in St. Petersburg just a few weeks ago, you see there are a few brave soldiers there who are very symbolic of soldiers across the country that are suffering from post-traumatic stress disorder.

One of the soldiers was in his early 20s, had served in Iraq, come back, trying to get his life together, but it was too much. The mental scars were too much. The post-traumatic stress set in. His young marriage faltered. He lost his job, meaning he eventually lost his home, and ended up as an alcoholic, a homeless alcoholic in his early 20s because of post-traumatic stress disorder.

What he explained to me was what he needed when he came out of the service was a helping hand. He needed someone proactively to say, are you all right, son, rather than to give him a checklist to check off to make sure he was okay.

These are tough guys. They are not going to own up oftentimes to the fact that they cannot sleep at night and they want to drink their sorrows and memories away.

Fortunately, I think the American people can be very heartened today to know that this is a bipartisan effort. Under the leadership of our Speaker, NANCY PELOSI, I am very fortunate to serve on the Armed Services Committee under the leadership of Chairman IKE SKELTON, and I salute him and the ranking member for moving this legislation quickly. We salute the Veterans' Affairs Committee and Chairman BOB FILNER but, mostly, the leadership of the American people who have cried out for change.

Through this rule and this bill, we are going to improve the health care and mental health for our wounded warriors. We are going to tackle the bureaucracy on their behalf. We are going to establish a toll-free hotline so that families and soldiers and anyone who cares about them can report deficiencies in our system. We are going to require expedited action.

Thanks to the leadership of subcommittee Chair VIC SNYDER, now Members of Congress that have desired information about the soldiers returning to their districts are going to be notified. Members of Congress oftentimes can be the best advocates for these returning soldiers, and now it will be a requirement in the law.

We are going to provide medical advocates to these soldiers. We are going to improve support services to families; and, rather than mismanage resources, we are going to turn the White House's privatization initiative around and require accountability.

Coming from Tampa, the home of the Haley VA Center and one of the four polytrauma centers in the country, I am especially heartened by the provisions in this bill that improve veterans health care by providing more physician residents in those polytrauma centers. ABC's News anchor, Bob Woodruff, brought this to life in his hour-long expose a few weeks ago. He visited the Haley Polytrauma Center in Tampa. These are where the most critically injured soldiers are sent for their health care, the brain injuries, the spinal cord injuries.

What Dr. Robert Scott, the medical director at that medical facility, told me a few weeks ago is, even though the polytrauma center is directly across the street from the University of South Florida College of Medicine, they cannot get the physician residents in training. The Feds are not providing enough. We need these doctors in training to learn and train about these critical war injuries and the physical therapy that our soldiers need.

So, Mr. Speaker, I urge this new Congress to chart a new direction today and to erase the moral stain on our Nation's conscience.

Mr. Speaker, I reserve the balance of my time.

Mr. HASTINGS of Washington. Mr. Speaker, I thank the gentlewoman from Florida for yielding me the customary 30 minutes; and, Mr. Speaker, I yield myself as much time as I may consume.

(Mr. HASTINGS of Washington asked and was given permission to revise and extend his remarks.)

Mr. HASTINGS of Washington. Mr. Speaker, our men and women in uniform routinely risk their lives to protect ours. Along with their families, they make many sacrifices in service to America. There is no question that they deserve the very best care that our Nation can provide.

The situation at the Walter Reed Army Medical Center was unacceptable to all Americans, and I am encouraged that immediate steps have been taken to address the problems there. But it is just as important to take action to prevent similar problems from happening at any of our military health facilities.

Under Republican leadership, Mr. Speaker, recent Congresses have increased spending per veteran, expanded the concurrent receipt, written budgets that nearly doubled funding for veterans health care, and enhanced benefits for those returning from the war on terror.

Now, Congress is taking another step forward, and a proper step forward, in improving services for both our active military and our veterans.

Mr. Speaker, the underlying bill before us today makes commonsense improvements to ensure that our military men and women have access to the care that they have earned and to help maintain excellence throughout our military health system.

For example, this legislation creates a new toll-free hotline for reporting deficiencies at military health care facilities, calls for a study to identify infrastructure needs, and authorizes funding to support wounded warriors and their families. It assigns a medical case manager and a patient advocate to each servicemember receiving outpatient care and makes sure that these professionals are properly trained.

The process currently used to determine if a soldier can return to active duty is improved so that wounded servicemembers are afforded an opportunity to have input into the decision on whether they should retire from the service. Provisions are included to provide those separating or retiring from service with a seamless transition into the VA system, and the number of doctors at VA hospital facilities is increased.

Mr. Speaker, it is impossible to talk about military and VA health care systems without mentioning the unique challenges faced by veterans in rural areas. My district in central Washington has one of the highest concentrations of rural veterans in the Northwest. Although I am working with the VA to get a new outpatient clinic up and running in the northern part of my district, access to health care remains an issue of concern for me and my constituents who all too often are forced to drive hours and sometimes wait months to even get the most basic care.

So, Mr. Speaker, I am particularly disappointed that an amendment offered by Mr. PEARCE of New Mexico was rejected last night in the Rules Committee and will not be allowed to be considered on the floor today. We are missing an opportunity to make a good bill even better by improving care for our rural veterans. The Pearce amendment is based on a bill that I have cosponsored that would enable the VA to partner with existing hospitals and local communities on a case-by-case basis so that veterans in many rural areas can be cared for closer to home. This to me, Mr. Speaker, is a commonsense approach to get top-notch care to veterans without delay. I am at a loss to understand why anyone would oppose this improvement to caring for our veterans.

Similarly, Mr. MORAN of Kansas had an amendment that I also support; and,

unfortunately, it, too, was rejected by Democrats on the Rules Committee.

Our support for improving veterans health care should not be a partisan issue. I am pleased that both Democrats and Republicans on the Armed Services Committee have made the underlying bill, the Wounded Warrior Assistance Act, a priority and that the committee approved it by unanimous vote.

So, Mr. Speaker, I support the bill.

Mr. Speaker, I reserve the balance of my time.

Ms. CASTOR. Mr. Speaker, I am proud to yield 3 minutes to the distinguished gentleman from New York (Mr. ARCURI), a member of the Rules Committee.

Mr. ARCURI. Mr. Speaker, I thank my colleague from the Rules Committee for yielding.

Mr. Speaker, I rise today in strong support of the rule and the underlying bill, the Wounded Warrior Assistance Act.

Improvements in medical technology over the years allow for more servicemen and -women to survive injuries sustained in battle. During World War II, for every soldier that was killed, two were wounded. Now, this ratio is up to 16 to 1. These incredible medical developments allow many more men and women to return home to their families, but their injuries tend to be much more serious and, in many cases, require additional care for the rest of their lives.

Last month, I had the opportunity to visit with wounded soldiers recovering at Walter Reed Medical Center. I met several young men wounded in Iraq, one a constituent of mine from upstate New York. As I stood next to the mother of one of the soldiers, I saw a look of sadness on her face, and at that point it struck me, what if one of my two teenage children were lying in that bed? I know that I would want the absolute best treatment and care for my children, and our brave troops deserve nothing less.

Sadly, the administration's mismanagement of the war in Iraq has extended to the home front as well. The selfless men and women who volunteered to defend their country have been callously neglected and were not only sent into battle without adequate resources, they also returned home to inadequate resources. When they asked for help, no one answered.

We make a promise to our soldiers to provide for them when they return home from battle, and it is absolutely unacceptable that this promise has been broken.

The Wounded Warrior Assistance Act will ensure that more than 25,000 servicemembers who have sustained injuries in Iraq and Afghanistan receive the world-class treatment and care and services they have so bravely earned and deserve. This bill creates an efficient system for the transition of records from the Department of Defense to the Veterans Administration. It establishes a support system of counselors, advocates and case managers to ensure timely, comprehensive care; and it establishes a number to call to report problems in facilities so that when a soldier asks for help someone answers.

Mr. Speaker, our men and women in uniform deserve the absolute best care that this Nation has to offer. I urge my colleagues to renew our promise to our veterans by supporting this rule and the underlying bill.

Mr. HASTINGS of Washington. Mr. Speaker, I am pleased to yield 3 minutes to the gentlewoman from Michigan (Mrs. MILLER).

Mrs. MILLER of Michigan. Mr. Speaker, I certainly appreciate the gentleman yielding; and although I do question as well this very restrictive rule, I rise to speak in very strong support of the underlying bill.

Mr. Speaker, our Nation is blessed, indeed blessed, that we have produced the incredible men and women who defend our freedom through their service and through their sacrifice in our military, and every one of those who serve do so voluntarily and out of a deep love of America and a commitment to the freedom that our Nation bestows. They deserve every last measure of support to ensure that when they are wounded they receive the best possible care.

And let me say this. The military medical corps has in large measure provided absolutely incredible care to those wounded in battle. The advancements in battlefield medicine and the care of our wounded warriors after they are removed from the battlefield has allowed countless of our soldiers to survive and to recover fully who in past conflicts may not have survived. In fact, the statistics that are coming out of theater are really a remarkable tribute to the doctors and to the nurses who are engaged there, and those who provide care to our soldiers deserve our thanks and our praise and our gratitude.

However, the recent discoveries at Walter Reed Army Medical Hospital were disturbing and totally unacceptable. We cannot allow any more Building 18 incidents to occur, and we must do everything that we possibly can to ensure that it does not.

This legislation that we are going to be debating shortly is a huge step in the right direction. It will begin to streamline the bureaucracy of the military medical systems and lighten the caseload of case managers by providing more assistance. It will provide a hotline for those receiving substandard care to report the problems so that those situations can be dealt with quickly and that the patients receive the care that they deserve when they need it. And it will provide for a smooth transition from the Department of Defense health system to the Department of Veterans Affairs, cutting more red tape so that the focus can be on the patient and not on the paperwork.

We cannot allow those who have fought our foreign enemies in the defense of freedom to come home and fight the Federal bureaucracy to get the health care that they need.

As a member of the House Armed Services Committee, I am very proud to support this important piece of legislation that our committee produced in a bipartisan way, and I certainly want to thank Chairman SKELTON and Ranking Member HUNTER, who are both patriots and veterans who have served the cause of freedom, for their dedication to the care of our troops and for their work in bringing this legislation forward to the floor today.

Mr. Speaker, I strongly support passage of the underlying bill, the Wounded Warrior Assistance Act. Our brave men and women wounded in defense of liberty, democracy and freedom deserve no less.

□ 1230

Ms. CASTOR. Mr. Speaker, I yield 3 minutes to the gentlewoman from Ohio and distinguished member of the Rules Committee, Ms. SUTTON.

Ms. SUTTON. I thank the gentlewoman for yielding time for her leadership on this rule and in the Armed Services Committee.

Mr. Speaker, I rise in support of the rule and in strong support of H.R. 1538, the Wounded Warrior Assistance Act. It is an outrage that our brave men and women, who have served our Nation so honorably, have returned home, as recent press accounts have revealed, and faced problems getting the care they so rightly deserve.

As I said before, our troops must have, and we must provide, that which they need for any mission upon which they are sent. They must have and we must provide that which they need when they return home.

My home State of Ohio has 6,347 brave soldiers currently serving in Afghanistan and Iraq. If they are injured in any way, they must have the care they need when they return home. The roughly 60,000 veterans in my congressional district and over 1 million veterans in Ohio and all of our veterans across this Nation deserve better support and assistance than many of them have received.

The legislation before us arose out of a lack of oversight and transparency that should have been in place, but was neglected by the administration and past Congresses. This bipartisan bill ensures that our wounded soldiers and their families can feel secure in the knowledge that they will now be properly cared for and treated with the respect and dignity that they have earned and most certainly deserve. This bill will ensure that all of our veterans get the care and assistance they need and improves the overall veterans health care system to make it easier for them to access and use.

Lastly, this bill puts in place strong oversight and inspection requirements to ensure that the events of Walter

Reed and other facilities around this Nation never, ever happen again.

Let's pass this rule and pass this very important bill.

Mr. HASTINGS of Washington. Mr. Speaker, I reserve the balance of my time.

Ms. CASTOR. Mr. Speaker, I yield 2 minutes to the distinguished gentleman from Arizona (Mr. MITCHELL).

Mr. MITCHELL. Mr. Speaker, just weeks ago an outraged Nation learned about the terrible conditions many of our wounded warriors had to endure as they recovered from battlefield injuries at Walter Reed Medical Center. We have all heard the sad stories of mold and rat droppings at Building 18.

Even worse, we have learned that these dilapidated conditions extend beyond Walter Reed to other military facilities and even veterans facilities where troops turned veterans face a long, complicated and confusing process to get the benefits and care they have earned. Conditions like these and miles of bureaucratic red tape rob our troops and veterans of what they deserve the most, dignity, respect and honor.

It is absolutely unacceptable, and I am proud that this Congress is taking action. Just last week, the House approved more than $20 million to clean up the mess at Walter Reed. We approved more than $550 million to get rid of the backlog of maintenance requests at veterans facilities. That is a good start.

Last month, I introduced the Dignity for Wounded Warriors Act for 2007, which was the first legislation introduced in this House to prevent another episode like that of Walter Reed from ever happening again.

I commend the House Armed Services Committee for putting forward this legislation, which also establishes guidelines for how returning soldiers should be treated and measures of accountability. All of our troops, and all of our veterans, are entitled to quality health care and should be treated with the respect and dignity they deserve. These are great first steps, but we still have a long way to go to ensure our troops and veterans are treated properly. They have my commitment that we will continue to take care of them just as they have taken care of us.

Ms. CASTOR. Mr. Speaker, I reserve the balance of my time.

Mr. HASTINGS of Washington. Mr. Speaker, I yield myself the balance of my time.

Mr. Speaker, the bill that this rule makes in order is a good bill. It passed the Armed Services Committee unanimously. It is something that is needed now that we need are engaged in this war on terror. Bills like this, in my view, deserve an open rule, so that you can give the opportunity for Members on both sides of the aisle to try to improve this good product and make it better. I cited two examples for the Rules Committee to not make in order two bills that dealt specifically with our veterans in rural areas.

While I support the underlying bill, I am opposed to the rule, because I think the rule could have allowed more amendments to have been in order or, for that matter, have made this an open rule. I think that ought to be the standard when we have strong bipartisan support for legislation.

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

Ms. CASTOR. Mr. Speaker, 4 years after the start of the war in Iraq, and less than 100 days since the swearing in of this new Congress, this Congress will act today.

I urge my colleagues to support this rule and this legislation so we can pass the Wounded Warrior Assistance Act of 2007. Let's send a message, let's stand up for our brave troops in the field, not just when they are serving on the battlefield, but when they return home. Let's give the families the respect they deserve and make sure that we are providing superior health care whether it's a physical injury or a mental scar.

Mr. Speaker, I urge a ''yes'' vote on the previous question and on the rule.

Mr. Speaker, I yield back the balance of my time, and I move the previous question on the resolution.

The SPEAKER pro tempore. The question is on ordering the previous question.

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

Mr. HASTINGS of Florida. Mr. Speaker, on that I demand the yeas and nays.

The yeas and nays were ordered.

The SPEAKER pro tempore. Pursuant to clause 8 of rule XX, further proceedings on this question are postponed.

ANNOUNCEMENT BY THE SPEAKER PRO TEMPORE

The SPEAKER pro tempore. Pursuant to clause 8 of rule XX, the Chair will now put each question on which further proceedings were postponed, in the following order: ordering the previous question on House Resolution 275; adopting House Resolution 275, if ordered; adopting House Resolution 274; and passing H.R. 835.

The first electronic vote will be conducted as a 15-minute vote. Remaining electronic votes will be conducted as 5-minute votes.

PROVIDING FOR CONSIDERATION OF H. CON. RES. 99, CONCURRENT RESOLUTION ON THE BUDGET FOR FISCAL YEAR 2008

The SPEAKER pro tempore. The unfinished business is the vote on ordering the previous question on House Resolution 275, on which the yeas and nays were ordered.

The Clerk read the title of the resolution.

The SPEAKER pro tempore. The question is on ordering the previous question.

The vote was taken by electronic device, and there were—yeas 225, nays 196, not voting 12, as follows:

[Roll No. 202]

YEAS—225

Abercrombie	Grijalva	Neal (MA)
Ackerman	Gutierrez	Oberstar
Allen	Hall (NY)	Obey
Altmire	Hare	Olver
Andrews	Harman	Ortiz
Arcuri	Hastings (FL)	Pallone
Baca	Herseth	Pascrell
Baird	Higgins	Pastor
Baldwin	Hill	Payne
Bean	Hinchey	Perlmutter
Becerra	Hinojosa	Peterson (MN)
Berkley	Hirono	Pomeroy
Berman	Hodes	Price (NC)
Berry	Holden	Rahall
Bishop (GA)	Holt	Rangel
Bishop (NY)	Honda	Reyes
Blumenauer	Hooley	Rodriguez
Boren	Hoyer	Ross
Boswell	Inslee	Rothman
Boucher	Israel	Roybal-Allard
Boyd (FL)	Jackson (IL)	Ruppersberger
Boyda (KS)	Jackson-Lee (TX)	Rush
Brady (PA)	Jefferson	Ryan (OH)
Brown, Corrine	Johnson (GA)	Salazar
Butterfield	Johnson, E. B.	Sánchez, Linda T.
Capps	Jones (OH)	Sanchez, Loretta
Capuano	Kagen	Sarbanes
Cardoza	Kaptur	Schakowsky
Carnahan	Kennedy	Schiff
Carney	Kildee	Schwartz
Carson	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
Cramer	Loebsack	Solis
Crowley	Lofgren, Zoe	Space
Cuellar	Lowey	Spratt
Cummings	Lynch	Stark
Davis (AL)	Mahoney (FL)	Stupak
Davis (CA)	Maloney (NY)	Sutton
Davis (IL)	Markey	Tanner
Davis, Lincoln	Marshall	Tauscher
DeFazio	Matheson	Taylor
DeGette	Matsui	Thompson (CA)
Delahunt	McCarthy (NY)	Thompson (MS)
DeLauro	McCollum (MN)	Tierney
Dicks	McDermott	Towns
Dingell	McGovern	Udall (CO)
Doggett	McIntyre	Udall (NM)
Donnelly	McNerney	Van Hollen
Doyle	McNulty	Velázquez
Edwards	Meehan	Visclosky
Ellison	Meek (FL)	Walz (MN)
Ellsworth	Meeks (NY)	Wasserman Schultz
Emanuel	Melancon	Waters
Engel	Michaud	Watson
Eshoo	Miller (NC)	Watt
Etheridge	Mitchell	Waxman
Farr	Mollohan	Weiner
Fattah	Moore (KS)	Welch (VT)
Filner	Moore (WI)	Wexler
Frank (MA)	Moran (VA)	Wilson (OH)
Giffords	Murphy (CT)	Woolsey
Gillibrand	Murphy, Patrick	Wu
Gonzalez	Murtha	Wynn
Gordon	Nadler	Yarmuth
Green, Al	Napolitano	
Green, Gene		

NAYS—196

Aderholt	Blackburn	Calvert
Akin	Blunt	Camp (MI)
Alexander	Boehner	Campbell (CA)
Bachmann	Bono	Cannon
Bachus	Boozman	Cantor
Baker	Boustany	Capito
Barrett (SC)	Brady (TX)	Carter
Barrow	Brown (SC)	Castle
Bartlett (MD)	Brown-Waite, Ginny	Chabot
Barton (TX)	Buchanan	Coble
Biggert	Burgess	Cole (OK)
Bilbray	Burton (IN)	Conaway
Bilirakis	Buyer	Crenshaw
Bishop (UT)		Culberson