

glitches. The first portion of the bill focuses on voter verification and auditing procedures.

CEVA would require that all voting systems produce or require the use of voter-verified paper ballot or record suitable for manual audits.

We must ensure that all Americans, including those with disabilities or language barriers, retain their right to cast a ballot. To that end, CEVA asks that the Federal Government require that at least one machine per precinct must allow voters with disabilities and language-minority voters to cast a vote in a private and independent manner.

I believe that the Federal Government should require all States to offer early voting. CEVA makes this proposal to encourage people to vote by allowing them to vote at times convenient for them and avoiding long lines on election day. As I mentioned before, for our democracy to function well, all Americans must have a pathway to participate in the election process. To that end, the bill proposes that all States end the practice of prohibiting convicted felons who have completed their prison term, parole or probation to vote. After all, they have served their time.

CEVA further proposes that we study the impact of making election day a Federal holiday. Creating such a day would give more voters time to cast ballots and allow more qualified people to serve as poll workers.

Our leadership and moral strength is only enhanced when we help others. We lift as we rise. To have a vibrant democracy, we must encourage the participation of all citizens and fight against efforts to disenfranchise voters. We must work to ensure that our citizens do not encounter barriers to their full participation in the election process. Whether it is seniors who need transportation to the voting booth or ex-offenders who are unaware of the reinstatement of the right to vote, we cannot sit by while our fellow Americans are excluded from the democratic process. We must also encourage voters to be educated and organized citizens in order to strengthen and empower our communities. At the end of the day, civic participation is both a duty and a right.

The legislative process affects all aspects of our lives and we cannot afford to remain silent. Your vote is your voice, so speak loud and clear. Members of Congress and all elected officials will hear you.

Next Tuesday is election day for many. Use the power of your one vote. When you do not vote, by default you cast a ballot against the person or proposal you prefer. Your missing vote is one less that the opposition has to overcome. Thus, your vote is for those with whom you disagree. Get out, use your voice, and vote.

FREE ENTERPRISE, THE FOUNDATION OF AMERICA'S ECONOMIC SYSTEM

The SPEAKER pro tempore. Under the Speaker's announced policy of January 6, 2009, the gentleman from Iowa (Mr. KING) is recognized for 60 minutes as the designee of the minority leader.

Mr. KING of Iowa. Thank you, Madam Speaker. It is a privilege to address you here tonight on the floor of the House of Representatives in this great deliberative body that we once were and sometimes are and perhaps one day will be again in honor of the traditions that we have in this Congress. It has been a difficult year for this deliberative body, and one of the reasons for that I believe is the leadership of this House and the leadership of the majority party seem to be quite concerned about open public debate, quite concerned about limiting the amendments that come to the floor, and quite concerned about pushing a new President's agenda. This new President's agenda follows through a whole series of major moves from a business perspective. Some of them actually started before his election and some of them happened after his election and many of them happened after the President's inauguration. But we have witnessed here within the last 15 months or so the nationalization of huge business entities in America. It is framed by the \$700 billion TARP bailout and the \$787 billion stimulus plan. In the middle of all of that came the nationalization of three large investment banks, AIG, Fannie Mae, Freddie Mac, General Motors, and Chrysler. All of that adds up to about one-third of America's private sector being nationalized, much of it under the watch of this administration, but not all of it, in fairness, Madam Speaker.

The American people are nervous. They know that free enterprise is the foundation of America's economic system. That is so basic to the American people, the value of free enterprise, and it is so basic to the values of, let me say USCIS, the United States Citizenship and Immigration Services, that they have a whole stack of flashcards that are prepared for those who would study for the naturalization test, those immigrants who go through the process to become American citizens, the people we celebrate as Americans by choice, a whole series of flashcards, the history of America is on those flashcards. They are stacked that deep, and you can turn one after another over and you can understand about what George Washington and the Constitution and the Declaration and the Bill of Rights and the Fourth of July and the list goes on and on.

One of those flashcards, Madam Speakers, asks what is the economic system of the United States of America? You flip the card over and it says free enterprise capitalism is the economic system of the United States of America. Yet one-third of it has been nationalized by the Federal Govern-

ment, and no exit strategy seems to be in sight. As the American people watch this rush towards the socialization/nationalization of one-third of our economy, they also saw a cap-and-trade bill pushed through, about 12 hours from the time the bill was dropped until such time it was on the floor for debate without legitimate amendments.

The American people watched this and they understood intuitively, if not articulated on the streets, that they understood that freedom was being compromised. The principles of our free market system were being compromised. They also understood that a prudent government with people that hold the gavels that are fiscally responsible and a future President that might be fiscally responsible, I believe I have given up hope on this one, could actually set things up so we could work our way through the trillions of dollars of debt that we now have and work our way through the nationalization and begin to privatize, sell those shares back to General Motors, sell them back to Chrysler, privatize Fannie Mae, Freddie Mac, and require them to be capitalized like other lending institutions, regulate them like other lending institutions and sell those shares back in the marketplace, and for the Federal Government to divest themselves from their investment in this huge nationalization, AIG included.

□ 2100

Now, that could all happen under a future President and under a Congress that is dominated by people that just believe simply the opposite side of that flashcard that asks the question of anybody that wants to become an American citizen, what is the economic system of the United States? Flip it over, free enterprise capitalism. That compels the Federal Government to divest itself if, of course, we believe in the tenet that we require people to know if they're to become an American citizen and naturalize an American citizen.

So the American people saw this rush, they saw this push that went towards this nationalization of our one-third of our economy and the rush through cap-and-trade in the House, and now it is stalled in the Senate, thankfully. I hope it doesn't get brought up again. It is a tax on all of our energy. It is cap-and-tax.

But all of this went through in a rush, and the American people didn't have an opportunity to weigh in. Before they could catch up with what was going on, decisions were made. Those decisions were made behind closed doors—and sometimes the irrevocable decisions of the nationalization of these entities. And once they saw all that happen and they saw the President push hard for \$787 billion in bailout money—and, Madam Speaker, they saw every Republican vote “no” on that \$787 billion and they thought, at least there's a sign for hope here; Republicans are sticking together. But

behind that came cap-and-trade, 12 hours from the bill drop until it was up on the floor for debate, no legitimate amendments allowed. And then they saw health care, a complete overhaul of the health care system coming at them as fast as a freight train of all the other things that came at them.

Now, thankfully, there was a delay for the break in August and the American people came together. There were hundreds and hundreds of town hall meetings that were held by many Members of Congress. I believe every Republican, and many Democrats, held numbers of town hall meetings and constituents filled the rooms. There is a case of a town hall meeting in Oklahoma that brought about 3,000 people. And there were many meetings around in my part of the country that brought in several hundred when a normal town hall meeting for a low intensity period of time might bring, oh, a couple dozen people in to talk to their Senator or their Congressman. But this was hundreds. And it's because the American people finally had an opportunity to step in and weigh in after they had seen this slide towards socialism that had taken place and the nationalization of these eight huge entities and one-third of our private sector economy nationalized.

The American people stood up and they filled the town hall meetings. They had their say, and they rejected this idea of a government option that would go directly in competition against our health insurance industries. They said, We don't need it. We don't want it. We don't want the Federal Government taking over our health care. They understand what happens. When you have a government-run insurance system, it becomes, often, the only insurance system that's there. We've seen this happen, Madam Speaker, with the case of the national flood insurance.

In 1968, the property and casualty companies were providing 100 percent of the flood insurance in America. Now, it wasn't a developed market like it is today, and I don't mean to characterize it that way because it wasn't. It was a lesser developed market. There was a lot less real estate in the floodplains in 1968 than there is today, a lot less developed real estate in the floodplains. But Congress decided that they wanted to engage in this to protect those homes and businesses that were occasionally flooded by high waters, so they passed the National Flood Insurance Act in 1968.

Today, 100 percent of the flood insurance available for purchase in America is the Federal flood insurance program. There is not one single policy in the private insurance industry that you can buy flood insurance from. And the reason is because the Federal Government went in and dominated the market. They passed the National Flood Insurance Program—and I'm drawing this analogy, this comparison of what happens if we have a national health

insurance public/government option, or, as Speaker PELOSI called it today, the "competitive option," or as, let me see—no, I need to correct that. Speaker PELOSI called it the "consumer option." It was Representative DEBBIE WASSERMAN SCHULTZ of Florida who called it the "competitive option."

So you have a public option, a government option, a government-run health insurance, the consumer option by PELOSI's language, or the competitive option by WASSERMAN SCHULTZ's language. But we know what happens when the Federal Government steps into an industry, as they did in 1968 in the flood insurance. In a few years, it had swallowed up the entire private sector flood insurance program and replaced it with the Federal flood insurance program.

In order to compete, the Federal Government also passed legislation which required that anyone who was borrowing money from a national bank and had property that was anywhere in the floodplain, they were compelled to buy the insurance. So, in order to get the loan, the people that were investing had to buy the flood insurance. So the Federal Government set the premiums, set the rules, required that people buy the flood insurance, and they lowered the premiums out of proportion to the risk and they squeezed out all the private sector. Once the private sector was squeezed out, then the Federal Government sitting there, charging premiums lower than the risk, had to come back here to this Congress to get money to backfill the hole in their budget.

So from 1968 until today, we've gone from no Federal flood insurance in 1968, at the moment the bill was passed, to 100 percent of the flood insurance in the United States is all federally owned and run. The premiums are lower than the actual claims, and so the Federal flood insurance program is \$19.2 billion in the red, with no daylight in sight. That's the way the Federal Government runs an insurance program, and that's the way the Federal Government may well run this public option that was announced today.

Now, I'm going to take you through a little bit of history, Madam Speaker, and then we will go to current events today. This is some history. This is 1993, 1994. This is HillaryCare. This is a chart that was in *The New York Times* back then, 15 years ago. And this is the government agencies that are created or linked by the Clinton health care plan, which was a takeover in our health insurance industry and would have resulted, I believe, in a complete takeover of our delivery system as well.

All of these charts that are in here, you don't have to study them to understand. We should be very concerned. We should be very concerned about the kind of government and the kind of bureaucracy and the kind of hoops that patients would have to jump through in order to do business with the Fed-

eral Government that was going to step in and solve a problem that was urgent in 1993, supposedly so urgent that President Clinton had to come here to the floor of the House and from the well of the House address a joint session of Congress, September 22, 1993, House and Senate Members, gallery is full, pleading that they would adopt and pass HillaryCare.

I will say, to President Clinton's credit, even though they met behind closed doors and even though there was a lot of suspicion and a lot of frustration and people got angry, they at least wrote a bill. President Clinton had a bill. And when you have a bill, you've got something that you can at least either support or shoot at. You have some specificity. But what we're dealing with now is still a matter of concepts. We have concepts.

Now, we do have a bill, H.R. 3200, that passed out of the Energy and Commerce Committee here in the House, but in the Senate they're still dealing with concepts. They passed concepts out of the Senate Finance Committee. And it's pretty hard to shoot holes in people's concepts, and it's pretty hard to support them because they are amorphous and they can change.

So HARRY REID announced today that he will have a bill, and he told us a little bit about that, and the Congressional Budget Office is going to score it. But this is 1993. This is the black-and-white scary flowchart of what happens to our freedom if we turn our health care over to the government.

Madam Speaker, this is the modern flowchart. This is the flowchart that was created at the direction of Congressman KEVIN BRADY of Texas, a Ways and Means Committee member who drilled down into this language word by word, line by line, sentence by sentence, concept by concept to verify that this flowchart is accurate, that it does reflect H.R. 3200, it does reflect the bill that passed out of committee in the House.

When you look at the chart, Madam Speaker, you will see these organizations in white, these are existing, with the blue letters—the President, the Congress, Treasury, HHS, Veterans Administration, Defense Department, Labor Department, all of this exists. Any of these white boxes here exist, and those in color are all new. This is all new government agencies:

The Advisory Committee on Health Workforce and Evaluation, new. Insurance mandate, health affordability credits, the Health Insurance Exchange Trust Fund, the Clinical Preventive Services Task Force; new ideas that people get in there because they've got some leverage. Health Benefits Advisory Committee, the Public Health Investment Fund here. Anything in color is all new, Madam Speaker.

So when the President says—and many of the Democrats say—that we need to provide competition in the health insurance industry, I would remind them, Madam Speaker, that this

competition would be—the Federal Government would be one new health insurance company.

Today, we have 1,300 health insurance companies in America. Now, some of them may be operating under multiple labels in multiple States, but we have over 1,300 health insurance companies in America, and they offer approximately 100,000 different varieties of policies that one can purchase. Now, that is a lot of choice and it is a lot of competition.

So the President's argument that we need more competition in the health insurance industry, I think that is a legitimate criticism, especially in some of the States where there is almost, let me say, a de facto monopoly where one insurance company might provide 70 or 80 percent of the policies in that State. And so where that exists, it would be good to see more competition to help keep those prices down. But there is also a reason why a single company has gotten such a large market share, and that's because they have the leverage to be able to negotiate lower compensation rates because of the volume that they have.

But the best solution to this is not for the government to create an insurance company and to write new insurance policies, Madam Speaker. The best solution for this is to adopt the JOHN SHADEGG policy, his legislation, which allows for people in America to buy insurance across State lines. Some of the data that came out used New Jersey, for example; very, very high insurance premium rates and a lot of unreasonable mandates have to be included in New Jersey's premiums. But a young man about 25 years old—in fact, exactly 25 years old—that would buy a policy in New Jersey that would be comparable—and I put that comparable, it has to be a qualified statement—but a comparable policy in Kentucky, a young 25-year-old man would pay \$6,000 in annual premiums in New Jersey and \$1,000 in annual premiums in Kentucky.

Now, as it's envisioned by the federalist philosophy, each of the States would be incubators that would experiment. And in the real world, in an ideal world, people would look at the cost of that premium and they would move from New Jersey to Kentucky. JOHN SHADEGG's bill bypasses that and it recognizes that Congress has the constitutional authority to regulate interstate commerce and to break down those barriers and allow people in New Jersey to buy insurance in Iowa or Kentucky or wherever they may decide. If we open this up so people can buy insurance across State lines, then you have all 1,300 health insurance companies competing against each other and you have all 100,000 policies that are all available for everybody in the United States. A simple fix.

The legislation is here. It has a good number of cosponsors. I will say the lion's share of the Republicans, I am confident, are on that bill. Why

couldn't we do the simple solution to this complex problem of how you create competition and allow insurance companies to sell health insurance across State lines? Fix this problem of some States that have a little bit of competition and others that have a lot of competition. Give everybody the same competition. That will drive insurance prices down.

□ 2115

We don't have to create a government entity and stock it with billions of dollars in capital to get it jump-started and then undersell the premiums so they can pick up a market share in the Federal insurance plan; all we have to do to put competition in. If that's what the President sincerely wants, competition, then all he has to do is give the nod and tell the people who tend to follow whatever he might suggest, that he would like to see JOHN SHADEGG's bill move. We could do that in this House in a day, send it over to the Senate, and I think it could be passed over in the Senate in a short period of time, too.

Although I won't say it's an emergency like a war, it's something that has come to the point where the American people understand the necessity of allowing Americans to buy insurance across State lines.

Well, instead, here is what Democrats in Congress and liberals want to do instead. If you look at these boxes of private insurers—those are the 1,300 insurance companies that I mentioned, and they're producing to this box. These are 100,000 health insurance policies, traditionally health insurance plans. Well, if H.R. 3200 becomes law, or many of the versions that we've seen, including, I believe, the version in the United States Senate, then you get a Health Choices Administration commissioner. This commissioner will write the rules for all of the insurance companies and for all of the insurance policies in America.

That just can't stand. That just can't hold, Madam Speaker, because then you have one of the competitors, which would be the Federal health insurance, this Health Choices Administration and the public option people, writing the rules to regulate their competition.

Now, I would have liked that. Let's just say you're a football coach and you get to go out and recruit the players in the fashion you'd like and get to offer the scholarships that you'd like and get to keep as many people on the roster and on the team as you'd like and get to spend any amount of money for indoor practice and for travel and recruiting, but you get to write the regulations for your competition, which would be that you can't do any of these things. Who is going to win the tournament? Who is going to win the national championship? The entity which is competing and writing the rules for the people it's competing against.

It goes on here. It's ever thus in this Congress. People come to this Con-

gress, and they say, I seek a level playing field, but in fact, many of them are seeking an advantage. Well, I suggest the advantage needs to go to the people who are seeking more freedom, and that's what's being diminished by this health care endeavor which is unfolding.

So briefly, Madam Speaker, before I yield to my good friend from Texas, who has been a relentless and undaunted opponent of, let me say, this government option that is coming at us, here are the things that unfolded in the Senate.

Just to recap, at the press conference at about 3:15 today which was held by the majority leader in the Senate, HARRY REID, he said that, in the proposal that he has put together—and he has pretty much had an ability to mix and match and write his own bill in the Senate—the States would have the choice of opting out of the program. They would have the choice to opt out. I think I know how that works. Then the States have to pass legislation to opt out. There could be a debate in the State House and in the State Senate. They'd have to get a Governor's signature to opt out. Then let's just say, for example, a State like, oh, Texas or Minnesota or Iowa decided to pass legislation to opt out of the government option.

Well, they don't get to opt out of the taxes that will be funding the government option. They would just opt out of being able to tap into the benefits that would be funded by the taxes. So it's unlikely anybody is going to opt out, because it's giving away something to other States, and it's subsidizing the other States.

Then he also leaves it open for non-profit co-ops to sell insurance in competition with private companies. We know how that will work. Nonprofit co-ops, I presume that's open by the State-by-State version again, and it's not the co-ops that we understand. These would be set up as nonprofit organizations, and they would still be, eventually, a camel's nose under the tent.

Another component of this says it would require most individuals to purchase insurance, and large businesses would not be required to provide insurance to their workers, but they would face penalties of as much as \$750 per employee if their employees qualified for Federal subsidies. Huh. So, if you don't provide the insurance and if you don't pay enough money to your employees so that they qualify, then an employer would be penalized \$750 per employee who qualified for public benefits. It's a little murky, but it sure looks to me like this is a high amount of leverage.

Then it also says that HARRY REID had a virtual free hand to craft this new measure.

So, as I look at the things that unfold, they have a filibuster proof majority in the Senate. I've continually heard, Madam Speaker, the criticism

from Democrats that Republicans are obstructing and are holding up the show. Well, I would like to do that. I would like to kill this bill—dead, dead, dead. I'd like to tell the American people that the entire framework is wrong-headed, that it's rooted in socialized medicine and that it's not rooted in freedom. I'd like to obstruct this bill. I will try to do that. If I can, I'll surely take the blame or even the credit, and I'd be happy to share that credit with all of the others who might step up.

Truthfully, it's the Democrats' obstruction going on within their own caucus that's the problem. It's not a problem to me. I'm happy when they reach indecision because they will make a bad decision. They are determined to go down the path of socialized medicine, but they have a 79-vote advantage in the House of Representatives. There are 79 more Democrats than Republicans, and they're pointing their fingers at Republicans. The Democrats can't get their act together to pass legislation, but they point their fingers at Republicans.

The Senate is the same way. Obstructing Republicans—with what?—40 votes on a good day? There are 60 votes of Democrats in the Senate. This scenario has never been reached in the history of the United States of America—massive majorities for either party.

With Democrats in the House and with a filibuster-proof majority for Democrats in the Senate and with the most liberal President in the history of America, what possibly could come out of this that would be good for America's freedom? I pose that question not just rhetorically but literally, Madam Speaker.

I would be very happy to yield so much time as he may consume to my good friend, Doctor and Congressman MIKE BURGESS from Texas.

Mr. BURGESS. I thank the gentleman for yielding.

You know, I was on a conference call a little while ago when you started, and I saw you going through those charts. They do look terribly complex, and lest anyone who is watching your discussion of those charts thinks that, well, perhaps the good gentleman from Iowa is just engaged in a little political hyperbole or perhaps that he is overstating the case for the purposes of discussion, when you look at the bill, H.R. 3200, there are a lot of words contained in here.

We had this bill in my Committee on Energy and Commerce. It was also debated and voted on in the Committee on Ways and Means and in the Committee on Education and Labor. We all had the same bill. We all ended up with a little bit different product at the end. Well, this bill ended up being about 1,000 pages in my committee, so you could just imagine, with 1,000 pages, there is room for lots of twists and turns and rabbit runs and dead ends, as the gentleman from Iowa so eloquently

expressed. That was July 31, and here we are near the end of October. So we have volume 1 and volume 2 of the same bill.

I would submit that the gentleman, if anything, is guilty of, perhaps, not having a graph that's complicated enough, because this bill has expanded beyond anyone's reasonable belief of what this bill should be.

Now, Madam Speaker, I would submit to you that 1,000-page bills scare people, and they scare people for a good reason. They scared people when we were in charge, and they scare people now. They scare people because they don't think we're going to read this. They don't think we're going to take this insurance ourselves. They know that their taxes are going to go up and that their freedoms are going to go down. So 1,000-page bills scare people.

We all agree that something needs to be done. Reform is necessary.

It would be so straightforward to pick those things that need attention, to work on those problems, to deliver for the American people, and not to scare them so close to Halloween with now a 2,000-page bill—or actually, it turns out to be about 2,400 pages. I realize parts of this are duplicative and that parts of this are even contradictory because no one has really gone through and has sorted out what Ways and Means did and what Energy and Commerce did. It's just kind of a merged product that we have now.

It really doesn't matter because this bill that was delivered to me on Friday afternoon really could go straight into the round file. The actual bill is being written in the Speaker's rooms even as we speak. I suspect the gnomes who work on bills are over there, crafting away on the legislative language, probably with heavy doses of input from down at 1600 Pennsylvania Avenue. Certainly, if you looked around the room, I'll bet you wouldn't find any Republicans, and I'll bet you wouldn't even find any backbench Democrats.

Isn't it ironic that the President, who stood on the floor of this House and who said he'd be open and straightforward with the American people and who said that all of these processes would be aboveboard—in the daylight, on C-SPAN—has this all being conducted in the dark in the Speaker's office? The doors are closed and locked. Mr. KING is not allowed in the room. I'm not allowed in the room. No Republicans are in the room. Again, I rather suspect many of the rank-and-file Democrats are not allowed in the room as well.

What will happen now is this bill, which will be written in the Speaker's office, will come to us at some point. They have graciously consented 72 hours for us to read the bill. Will it be this big? I don't know. It certainly could be. It was 1,000 pages when it left our committee. It was 1,500 pages when it left the Senate committee. It's not likely that it has diminished in size with all of these people working on it.

We have 72 hours to review the bill. Madam Speaker, the people of America will have 72 hours with the bill up on Thomas to review what's in there. Then we'll vote.

We'll vote, and it will be a vote we will cast not just to affect the rest of health care in the rest of our natural lifetimes but in the rest of our children's natural lifetimes and in the lifetimes of our children's children. That is the implication of what is contained herein. The American people don't trust us with a 1,000-page bill. They don't trust us with a 2,000-page bill, but there are some things they want fixed.

Isn't it ironic we've got over 50 pages in this bill which are dealing with the types of language services you must offer in hospitals and in doctors' offices, but there is not a single word about liability reform? Yet the Congressional Budget Office, in a letter to ORRIN HATCH last week—or in a letter to a member of the other body last week—said that we could save \$54 billion if we would enact the right kind of liability reform. Why wouldn't we do that?

We also had the event last week where the Nation's doctors were told, Sorry, we can't help you. You're going to get some bad pay cuts over the next 10 years, but there's just nothing we can do to stop it because we don't have the money to do so.

Well, why not take that \$54 billion? There's also other money we could find in other places. Why not find that money and why not help the doctors rather than say we can't do it?

So here we're going to ask our Nation's doctors to be our partners with us as we go through this. They're going to have to live with whatever we pass for the next two or three generations of physicians, and we won't do those two simple things that are so important to the Nation's physicians—liability reform and payment reform in Medicare. It seems so simple. I would just have to ask:

Why is that too much trouble with all the king's horses and all the king's men working on this legislation?

I yield back to my friend from Iowa.

Mr. KING of Iowa. Reclaiming my time, as I listen to my friend from Texas talk, it occurs to me that I had one of those last weekend. I sat down, and I did an odd, surrealistic thing. I read through President Obama's campaign speeches, as Senator Obama, which went through the summer of 2008 right on up to the election on November 4 of last year. It was soaring rhetoric. It was moving. I didn't quite have a tingle go up my leg, but I was moved by the language. I had to stop sometimes and mentally pinch myself to ask: What has happened now compared to what I heard then?

Well, one of the things that really stands out is Barack Obama's pledge to unconditionally sit down with the Iranians—with Ahmadinejad. Without conditions, you know—dialogue is progress. That's what they think. So he

made that pledge during his campaign. He has not backed off of that pledge to unconditionally sit down with Ahmadinejad. Yet I just ask the question:

Is anybody sitting down with President Obama who has an "R" behind his name and talking health care? Is there anybody in the House of Representatives, out of 178 Republicans, who is in negotiations with President Obama and who is having a discussion on health care? Is there anybody really reaching across the aisle from over there to look for some Republican components and solutions? Is there anybody in the United States Senate with an "R" behind his name who has been invited to the White House or who is sitting down with HARRY REID, or is it all NANCY PELOSI's office, HARRY REID's office and the Oval Office—all Democrats—all clustered together?

They do have the votes, you know, but this was the President who was going to bring in a new era of bipartisanship. When he found out that he didn't need Republican votes and that he didn't need Republican philosophy either, we ended up with this lurch to the left that continually comes at us over and over again out of this administration.

The gentleman spoke about liability reform and the proposal of \$54 billion in savings.

□ 2130

Here are some numbers that stand out to me. I think those numbers are conservative. The lowest numbers that I have seen, as the percentage of the overall health care costs that are attributable to malpractice premiums, the litigation and defensive medicine that's a component of this, the lowest number I have seen is 5½ percent of the overall medical cost. Health insurance underwriters place that at 8.5 percent. That's \$203 billion a year. Now you won't save it all, but that's how big the pot, I think, likely is. Other numbers go on up to 10.1 percent; and then talk to your orthopedic surgeons and they will take you right on up to 35 percent because they are faced with it, and the OB/GYNs, the highest level of malpractice.

And we're losing places for women to have babies. The access to health care has been diminished because of the liability, but it's in the tune of hundreds of billions of dollars driven by the trial lawyers, and we can't find \$1, not one mention of lawsuit abuse reform in any of the legislation that's passed out of the committees here in the House or in the Senate. I think that's the starkest component of this. It's the most obvious that this isn't legislation that's designed to be good for the American people, it's designed to be good for the American Democrat politicians and the people who are brokering this behind those closed doors.

Again, I would yield to the gentleman from Texas.

Mr. BURGESS. I think you are accurate in your assessment. I spent the

weekend talking to a good number of doctors back in Texas, and I will tell you there is a great deal of concern, a good deal of anxiety on the part of America's physicians as they watch us go through this process and recognize that at the end of the day their two biggest problems are no closer to being solved than they were when the President came to the American Medical Association and spoke to them in June of this past year.

It is, the gentleman mentioned, the monetary issues involved with liability reform. Those are truly significant, but there is no way to calculate the emotional toil, the emotional wear and tear that it takes on physicians and their families as they go through every episode of litigation. It is an unfortunate by-product of our system and, again, it is something where the Nation's doctors thought if nothing else, we'll give up a lot of our freedom, we'll give up a lot of our autonomy, but at least we'll have these two problems solved. It looks like at the end of the day they get to give up all that autonomy and all that freedom, and their problems are no closer to being solved than they were when we started this process.

Mr. KING of Iowa. As I mentioned on Medicare reform, just briefly before I yield, and that is, the President and the White House have identified—well, they haven't identified, they have alleged, that there are billions of dollars that can be gathered together in savings in Medicare fraud and abuse. In order to gain those kinds of savings, they insist that the legislation be passed, H.R. 3200 or some version of that legislation. They also want to cut \$500 billion out of Medicare reimbursement rates; and nationally, Medicare is underfunding the cost of delivery by, they pay about 80 percent of the costs of delivery.

I happen to represent, I believe, the most senior congressional district in all of America. Iowa has the highest percentage of its population over the age of 85 of any of the States. In the 99 counties in Iowa, of those 99, 10 of the 12 most senior counties are in my district. I believe I represent the most senior district in America, and our Medicare reimbursement rates are last in the Nation. The President proposes to cut them another half a trillion dollars in order to pay for and fund this growth in this huge national health care plan that they have.

Madam Speaker, America's seniors will not sit still for that kind of draconian cut into the health care that we have pledged to them. By the way, I will add one more point, and I think Congressman BURGESS will recognize this. Essentially it is the President's position, you'll find out what the savings will be in Medicare fraud when you pass my legislation. Then we'll use that to fund it.

That's what you call holding a right hostage to an ultimatum. We have a right to legitimate government. The

ultimatum is pass my socialized medicine plan, and then we'll give you a legitimate government. We know where the secret is to all of this, but they won't happen to tell us. It's holding a right hostage to an ultimatum.

I would be happy to yield to the gentlewoman from Minnesota, who has made her mark on this Congress and on this country, MICHELE BACHMANN.

Mrs. BACHMANN. I thank the gentleman from Iowa and appreciate all that he has contributed to this conversation this evening, as well as my colleague, MIKE BURGESS from Texas, who did the very kind favor of coming to Minnesota and speaking as an expert on the health care issue. I know my constituents still tell me how much that meant to them, and I appreciated it as well.

I was very interested when the gentlemen were speaking about the lack of bipartisanship on this current bill. I would agree. I recall when all of us were filling this Chamber during the President's joint session to Congress, and he stood here in this room, addressed us, and he said if any of us have suggestions, we should come in and sit down with him, and he wants to hear those suggestions.

I was so pleased, I took him up on that. I wrote him a letter, told him about positive alternatives that I had, bills that I had presented. I still haven't had the courtesy of a reply yet. I know there are a number of other Members that took the President up on that offer as well. I don't know what the President would be waiting for. I'm here. I'm ready. A lot of other Members have been anxious to go and meet with the President and give our positive alternatives. There's one that is actually fairly simple that we can do and it's this: Rather than the government owning our health care, rather than our employer owning our health care, we could change the Tax Code so that every American could own their own health care.

Quite simply, we would erase the boundaries between the various States. People could purchase any health insurance policy from any State in any amount. People could do that with their own tax-free money that they have set aside, and any expenses over and above what's in the tax-free account that they fully fund themselves, they can fully deduct on their income tax return. People can take their tax-free money, roll it over year after year and, upon their death, will it to their children.

Then we have true lawsuit abuse reform. That takes care of over 95 percent of the people in this country without spending trillions of dollars and getting our country more bankrupt than what it already is. Those who truly, through no fault of their own, can't afford to purchase health care, that's something we can take care of. Not a problem.

But why not offer and why not embrace first, before we build yet one

more big government bureaucracy, why not try a simple, positive alternative that is free market oriented, that makes sense to people. Everywhere I go in Minnesota and talk to people about this option they say, Yes, why not offer that? Why not do it? Why not? Why not do that first before we embrace something that will cost so much money?

There are really two questions that we need to ask ourselves. With the current Democrat proposals that are before Congress, we just ask ourselves this: Will this bill give me more control over my health care? Or will it give government more control?

The bill that Dr. BURGESS held up in the air was about this thick. What was that, about 6 inches, perhaps, thick? That bill would give government almost all, virtually all control over a person's health care, rather than the individual. Then let's ask ourselves this question, and I think Congressman KING alluded to this: Will this cost me more money or less money?

Well, the government plan we know will cost more money. Estimates that have come out so far have said people's health insurance premiums could be estimated to rise by as much as \$4,000 a year; \$4,000 a year more.

How is this going to benefit the average family? The average family would be getting less health care, more rationing of care, and they would spend \$4,000 a year more. What about senior citizens? Senior citizens are paying attention to this debate. They're hearing that the Democrats that control the Senate, the Democrats control the House, the Democrats control the White House, they control every lever of power in Washington as Congressman KING rightly said. The Republicans aren't the one holding this bill up. We don't have the votes.

The Democrats have the majority of votes. But what do they plan to do? They plan to cut Medicare. That's right, Mr. Speaker, they plan to cut Medicare by \$500 billion. What does that mean for citizens? Less care, more cost, less care, rationing. That is not the future that they want to have.

What about people under 30? What do they have to look forward to in this bill? People under 30 are looking at having, perhaps, 8 to 12 percent of their income taken away to go to pay for health care. That's a direct new cost that government would impose on young people.

What about businessmen? Businessmen are looking at an 8 percent payroll tax. Most businesses don't even have an 8 percent profit margin. They don't know where they are going to get that 8 percent to pay for that additional amount.

What about the job creators in our country? They are looking at a 5.4 percent surtax on their income. That won't help right now and also, a 40 percent tax on insurance premiums. How do you like them apples?

That doesn't do anything to help anyone in this country bring down

costs and expand care because here's the context of our time. Congressman KING had mentioned we are currently sitting at 9.8 percent unemployment, and the White House has told us that we will see probably 10 percent unemployment by the end of 2009, and we will see this level of employment on into next year.

The White House is telling us, high unemployment is the new normal. Well, maybe for this White House it's the new normal, but not for those of us on the Republican side of the aisle. We know it's possible to have lower unemployment and to create jobs in this country, and we can do it by having government spend less money and cut taxes.

Well, this bill would add 5½ million to the unemployment rolls if it goes through. Also, we have seen that the dollar has dropped 16 percent in the last 7 months in value. We have seen China, Russia, the United Nations call to take the dollar away as being our international currency and create some new form of currency. That's going to increase the lowering of our dollar.

We saw this year that the government has spent \$1.4 trillion more than what they took in. That's more debt than all previous 43 Presidents put together. President Obama increased the size of the spending in the Federal Government 22 percent this year. In fact, he is increasing what we are spending on welfare next year by a third. How big is that number? That increase is more than what we spent on 8 years of the Iraq war. In fact, it's 25 percent more than what we spent on the Iraq war. We are burying ourselves and our kids in debt, and we are getting nothing to show for it. In fact, the Inspector General said in a report last week that there are untold billions of dollars that he can't account for out of that \$700 billion bailout that went to the banks and the auto companies and AIG. Billions. They can't even account for it.

In this context, we are going to give Members of this Congress 3 days to read the bill, and it might be over 6 inches high. This is not only an insult to Congress, this is an insult to the American people. We should have 3 months to read this bill so that we can truly debate and see, will this help America or will this hurt America? Will this take us out of debt? Will this put us more in debt? Will this give the average American more control over their health care or less control? Will this cost the average American more in their income or will it allow them to save? That's the context that we need to discuss this in and not just Republicans in the Chamber, but Democrats working together to truly craft the best possible solution that we could have.

But right now what we need to do is fix our economy and get people back to work. The rest of this will take care of itself. There are people out there tonight, Madam Speaker, who are suffering. They don't know if they are

going to have a job tomorrow. They don't know where they are going to go to find food for the table. Well, let's rev up this economy. We can do that with our positive solutions, and let's move forward in the debate.

I will now hand it back to Stunning STEVE KING of Iowa.

Mr. KING of Iowa. I embarrassingly, modestly thank the gentlewoman from Minnesota for that delivery that covered so much territory and laid out so many facts.

I would like to take us back to a couple of principles, Madam Speaker, and that is this: Why did we start down this path? What has been the objective? What was the objective back here when it was HillaryCare, and what is the objective here when it is the color coded jellybean chart that we have from the Ways and Means Committee? The objective was two things. Here are the problems that they wanted to address.

□ 2145

The problems being—this is the President's position—health care costs too much money in America as premise number one; and as premise number two, we have too many uninsured in America.

All right, let's take first the subject of health care costs too much in America. Well, it costs around 14.5 percent of our gross domestic product. Some have numbers that go a little higher, maybe 16 percent, or maybe a little more. Then we are advised, the most consistent data we see, the average for the industrialized world is about 9.5 percent of the GDP.

Well, we get the best results, so it isn't too expensive when you need it to save the life of a loved one. And we produce more than anybody else, also, and once that is indexed back to the overall average gross domestic product of the American people, that adjusts that number a little bit.

But be that as it may, Madam Speaker, do we spend too much money? That is debatable. Maybe we do, maybe we don't. But the solution is not, as the President proposes, to throw 1 or 2 trillion dollars at the problem. If you have a problem of spending too much money, it would go without saying that the solution is to spend less money, not more.

So I will submit that they premised the analysis on spending too much money for health care. That, supposedly, is worthwhile to transform the entire health insurance industry and the health care delivery system in America, because they allege we are spending too much money. They have a point on the money that is being spent. We can discuss that. We can save a lot of that just within the lawsuit abuse reform.

But, the American people know, if you are spending too much money, the solution is not to spend more. That should have never gotten a pass. As soon as a statement like that was uttered, it should have been cut off at the

beginning, cut off at the pass, so-to-speak. So I hope that has dispatched that erroneous idea. If we spend too much money on health care, if that is the President's position, then let him propose a policy that spends less, not more.

Then, the second premise is we have too many in America that are uninsured. Well, everybody in America has access to health care. Somehow we have traveled down this road where a position has been taken that everyone in America has a right to first-class, high-quality health care.

Now, that is nice. If we decide to do that, then we should have an open, legitimate debate about it. But it is not a right. It is not a right. It is a benefit that Congress has agreed to make sure it was available for humanitarian reasons. We spend billions overseas in humanitarian aid, and we spend billions in this country to provide health care to anybody that shows up, because we don't want to turn someone away and have them get sicker or die. That is the policy in America, but it is not a right.

Our rights are enumerated pretty clearly in the Bill of Rights. But when FDR, Franklin Delano Roosevelt, gave his famous "four freedoms" speech, he was stretching the rights; the freedom of speech, freedom of religion, freedom from want, and freedom from fear.

The freedom from want and freedom from fear are not rights. They never were rights, and they never can be turned into rights, because if they do, can you imagine freedom from want? Well, if we lose all of our wants, we lose all of our desires to make the world a better place. We lose our desire to make our life a better life and that of our family. If you don't want for anything, you sit around and whatever you need shows up. Who is going to provide that? Our entire economy would collapse around that kind of thing.

Freedom from fear. Fear of what? Freedom from want, perhaps. But those two were erroneous components of FDR's philosophy. But they live today, somehow, in the minds of the majority of the United States Congress and, it looks like, the majority of the United States Senate, but I don't believe the majority of the American people.

But even though everyone in this country has access to health care, no one has a right to it. They are trying to argue that everybody has a right now to a health insurance policy of their very own. Now, imagine a society that gets to that point and what that does to a society. But the argument is too many in America are uninsured.

So, Madam Speaker, here are the real numbers about those in America that are uninsured. This little pie chart shows the chart of 306 million Americans. Eighty-four percent, in this blue, those are those that are insured, that have a policy through their employer or they take care of it personally, whatever it might be. But they are insured. Then these little slots are the other categories.

One would think that we were trying to address uninsured Americans without affordable options. Well, here is the list of those Americans that are in this 47 million uninsured. That is the number we constantly see, 47 million.

In yellow, illegal immigrants, about 5.2 million. In black are the legal immigrants that are barred by law for a 5-year period. So you end up with 10.2 million of those.

Then you have individuals earning more than \$75,000 a year without health insurance that didn't bother to write a check for their premium. Presumably they could manage that with the money they are making. That is about 6 million.

Then you have those eligible for government programs. That is in green. That is 9.7 million.

Then you have those eligible for coverage under the employer but didn't sign up or opted out. That is 2 percent here. That number is actually 6 million.

Then the other category, eligible for government programs, 9.7 million.

We get down to this number. When you subtract from the 47 million all these categories that I have listed, those that would be covered under their employer if they would just sign up; those that are insurance eligible for government programs but don't bother to sign up; those that earn more than \$75,000; those that are immigrants, that are legal and illegal, disqualified for one reason or other; you add that all up and subtract it from 47 million, you get over to this red.

This would be the list, Madam Speaker, of the Americans without affordable options. That represents 12.1 million Americans, less than 4 percent of America's population, and that less than 4 percent are the people that presumably the President and the majority party, and in fact the minority party, would like to encourage that they get insured.

But they would upset and transform and overhaul 100 percent of the health insurance in America and 100 percent of the health care delivery system in America for the purposes of reducing this 4 percent number down to what, 2 percent? Maybe on a good day. That is what is going on here.

So, I believe it was Socrates that said if you start with a flawed premise, you end up with a flawed conclusion. If he didn't say that, Einstein did, or some other smart person. You don't have to be very smart to figure out that if you put the wrong formula in, you are going to get the wrong results out. Garbage in, garbage out.

We have, Madam Speaker, we have got garbage here. The idea that first we spend too much money on health care, and being able to spend more, 1 to 2 trillion dollars more is a solution, that is garbage. The garbage underneath it, certainly there is truth to spending too much money on health care in America. Let's debate that. Let's debate how we address that. We don't address it by

spending more money. We address it by ending the lawsuit abuse that takes place in this country. We have got to reform that.

We passed that out of the House here in 2005. It came out of the Judiciary Committee where I and Mr. GOHMERT sat. We passed that here on the floor, and it was limited, the noneconomic damages, to \$250,000. That was a policy that was modeled after California at the time. Since then, Texas has adopted it and has seen their doctors that were leaving Texas turn around and come back, because now they can practice in Texas without a penalty.

So, just the tort reform component of this would save at least \$54 billion. But I am suggesting the numbers I am looking at show that lawsuit abuse costs in the neighborhood of \$203 billion a year.

Now, over a 10-year span where these bills are estimated, that would be over \$2 trillion that goes to the trial lawyers and some of the plaintiffs, and also goes to the people that are doing the tests, the unnecessary tests that are part of the defensive medicine that takes place.

So, if health care costs too much money, Madam Speaker, the first solution would be to address lawsuit abuse. That is number one. We should be able to agree on that. But there is not one word in any of these bills about reforming the abuse of lawsuits that could be somewhere between the \$54 billion savings that was identified by Dr. Burgess a little earlier, on up to what I say is \$203 billion, and probably more, and \$2 trillion over the life of the bill. But not one dollar is going to be saved. In fact, there will be more spent because of this.

VACATING 5-MINUTE SPECIAL ORDER

The SPEAKER pro tempore. Without objection, the ordering of a 5-minute Special Order speech in favor of the gentleman from Texas (Mr. GOHMERT) is vacated.

There was no objection.

TALKING ABOUT TRUTH, HONESTY, AND INTEGRITY

The SPEAKER pro tempore. Under the Speaker's announced policy of January 6, 2009, the gentleman from Texas (Mr. GOHMERT) is recognized for 60 minutes.

Mr. GOHMERT. Thank you, Madam Speaker. I do appreciate this time, and I do appreciate the comments from my friend Mr. KING from Iowa, and I do want to follow up on that subject, a little different approach from a little different angle, because I think it is important that we talk about truth, honesty, and integrity.

It is inappropriate on the House floor to accuse anybody else of lying who is a Member of Congress or the President. We are not going to do that tonight. But we are going to talk about what