

I thank the Speaker for the time, and we will always remember Shannon.

REVITALIZING OUR ECONOMY

The SPEAKER pro tempore. The Chair recognizes the gentleman from Oregon (Mr. BLUMENAUER) for 5 minutes.

Mr. BLUMENAUER. Madam Speaker, the challenge for all America, not just the new administration and Congress, but our communities, our businesses, especially American families, is how to revitalize our economy. There is a great deal of contention occasionally here in Washington, D.C. about the best approach, but this problem takes on a new urgency as the experts now tell us that while the economy appears to be recovering, the jobs aren't. A jobless recovery, posing special problems for Americans from coast to coast.

But beyond the problems with the economy, there are serious issues dealing with the state of repair of America; our electrical grid is inadequate and unreliable, too many roads and bridges are in serious disrepair, and there are problems with inadequate or non-existent sewage collection and leaking water mains. And there is environmental damage in sites from coast to coast with Superfund, brownfields, even unexploded ordnance and military toxics on military defense locations.

The opportunity and the challenge is to combine the problems with the economy with what we need to do to rebuild and renew America. Luckily, this is a solution that is overwhelmingly supported by the vast majority of Americans—Republicans, Democrats, and Independents. This is a solution that in times past has been able to bring together people in Congress to deal with the revitalization of our infrastructure.

We have opportunities right now. There is pending a reauthorization of the Surface Transportation Act. If Congress acts, and the administration signs it, this could mean 6 million jobs revitalizing transportation from coast to coast, border to border.

I have legislation, House bill 3202, a water trust fund, that would enable communities to deal with serious problems like leaking water mains. We lose 6 billion gallons of water a day, enough to fill Olympic size swimming pools from here to Pittsburgh. Coincidentally this bill can help fix these problems while putting hundreds of thousands of more Americans to work dealing with those problems.

The administration has requested, and we have introduced, legislation to reintroduce the Superfund tax to deal with the problems of Superfunds again that are found in every State of the Union. Left unattended, the pollution actually gets worse and migrates, becoming more expensive to clean up over time. This is an opportunity to solve the environmental problem and return this land to productive use.

This is something that America supports. The time for the Obama adminis-

tration and this Congress to unite on a vision to rebuild and renew America is now, to enact it into law and provide appropriate funding. This action will pay dividends to Americans for decades to come, making our communities more livable and our families safer, healthier, and more economically secure.

AARP GETS FREE PASS IN HEALTH CARE DEBATE

The SPEAKER pro tempore. The Chair recognizes the gentlewoman from North Carolina (Ms. FOXX) for 5 minutes.

Ms. FOXX. Madam Speaker, does America's biggest senior citizens organization, AARP, get a free pass in the ongoing health care reform debate?

Speaker PELOSI recently called insurance companies "immoral villains," and Senator JAY ROCKEFELLER derided their tactics as "rapacious," yet the majority has simultaneously relied on an organization that has received billions of dollars in windfall profits from those same insurers as an "independent" source to support their government takeover of health care—AARP.

The Democrat majority has even relied on AARP's support for legislation, S. 1776, that would increase the Federal debt by nearly \$250 billion to fund physician reimbursements, even though the bill would raise seniors' Medicare premiums by over \$60 billion. AARP opposed unpaid-for legislation as recently as December for the very same reason.

An analysis of Democrats' rhetoric and actions provides evidence why AARP may have changed its position. In exchange for its support of a government takeover of health care, AARP has received special considerations regarding several provisions in health reform legislation that could benefit the organization quite handsomely.

While the AARP Web site claims that the organization supports "guaranteeing that all individuals and groups wishing to purchase or renew coverage can do so regardless of age or pre-existing conditions," a review of the New York State Insurance Commissioner's Web site finds that AARP-branded Medigap coverage imposes a 6-month waiting period for individuals with preexisting conditions. Yet section 111 of H.R. 3200 would exempt Medigap policies from new limits on preexisting condition restrictions, thus allowing AARP to continue to deny Medigap individuals with serious health conditions.

The health reform bill approved by the Senate Finance Committee would eliminate the tax deductibility for all insurance company executive salaries over \$500,000. However, as drafted by the committee, the legislation would exempt AARP from this requirement, even though fully 38 percent of its \$1.1 billion in 2008 revenue came directly from royalty fees paid by United

Health Care—more than AARP received in membership dues, grant revenue, and private contributions combined.

But for Chairman BAUCUS' exemption, AARP salaries would in fact be subject to the penalties in the Finance bill. In 2008, then CEO William Novelli received total compensation of \$1,005,830, more than 78 times the average annual Social Security benefit of \$12,738.

According to a story published today in the Washington Post, AARP collected \$650 million in royalties and other fees last year from the sale of insurance policies, credit cards, and other products that carry the AARP name. One of the main products that AARP pushes are so-called Medigap insurance policies for senior citizens. These policies supplement existing Medicare policies that seniors already have.

So what's the big deal? Well, in case you missed it, AARP is helping push the Democrats' big government version of health care reform. They've been a vocal proponent of the government-run health care proposal before Congress. Interestingly, the proposal before Congress slashed funding for a Medicare program called Medicare Advantage. This program is especially popular with seniors in my district. About 40,000 seniors in my district enjoy the benefits of a Medicare Advantage plan, but these plans will be killed off under the Democrats' government takeover of health care, and AARP has been pushing this brand of health care reform.

AARP has the right to offer services to its members, but pushing for a version of health care reform that will hurt millions of seniors who have Medicare Advantage plans and that will almost certainly increase shares of AARP's Medigap policies is a very dangerous conflict of interest.

AARP has hundreds of millions of dollars in insurance revenue on the line in today's health care debate. I think America's seniors deserve to know the facts about how health care reform will affect them, and it appears that AARP may have a few too many dogs in this race to be an impartial source of information.

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CHOOSING HEALTH CARE REFORM

The SPEAKER pro tempore. The Chair recognizes the gentleman from Virginia (Mr. CONNOLLY) for 5 minutes.

Mr. CONNOLLY of Virginia. I thank the Speaker.

I rise today to support the economic engine of America—our small businesses. Small businesses represent more than 99 percent of all businesses in this country and employ more than 50 percent of the private sector, non-farm workforce. In fact, 25 percent of the total job growth from 1992 to 2005 came from those small businesses with

fewer than 20 employees. For all businesses, large and small, the employment growth rate during that period was 19 percent, demonstrating that small businesses led the way to economic growth. Simply put, the health of America's small businesses is the health of the American economy.

Unfortunately, the cost of keeping the employees of small businesses healthy is imperiling the financial health of many of these same businesses. Under our current health care system, where larger companies pool their risks over larger workforces to purchase insurance for lower rates, small businesses are paying up to 18 percent more per employee for health care coverage than their larger competitors. Sadly, it's easy to see how this happens. Indianapolis small businessman Bruce Hetrick testified at a House committee hearing earlier this year that his wife and business partner, Pam, got cancer and the insurance company said that the premiums for the 15-person firm would rise 28 percent. When his wife tragically passed away 1 month prior to the higher premium taking effect, the insurance company still increased the entire firm's premium by 10 percent. Due to the current health care system, one illness in a small business can have drastic consequences for everybody.

In fact, from 1999 to 2007, for all businesses, large and small, the employer contribution for health insurance coverage for families increased 120 percent, from \$4,247 to \$9,325. Employees did not fare any better, as their own individual premiums increased almost 118 percent in that time period. While large businesses were better situated to keep costs down due to bigger risk pools, reduced administrative costs and lower insurance broker fees, small businesses often have but one unpalatable option with respect to health care.

More and more small businesses are unable to afford health insurance for their employees. In 1995, 68 percent of small businesses offered health care. Only 38 percent offered health care this year. While just 10 percent of employees at large businesses are uninsured, 29 percent of employees at firms with fewer than 25 employees have no health insurance. Those small businesses that currently offer health care often are forced to reduce benefits due to those increasing costs. Family deductibles are roughly 60 percent more for companies with fewer than 50 employees.

Without reform, Madam Speaker, small businesses will have to continue reducing benefits and increasing costs. According to the National Business Group on Health, in 2010, and I quote, employers and employees will face shockingly higher health care costs. Madam Speaker, those premiums are projected to increase another 10 to 20 percent—next year. This year, small businesses will pay \$156 billion for their employees' health care. Without reform, those costs will more than double

to \$339 billion by 2018, just 9 years hence. Over the next decade, small businesses will suffer the cumulative impact of these increased costs of between \$546 billion and \$855 billion. In other words, absent reform, small businesses' health care costs will hit \$2.4 trillion in this time period.

As they have done over the last few years, small businesses will be forced to choose between their economic health and the health of their employees. Without health care reform, the increased costs over the next decade will force many small businesses to lay off employees. Those increased costs represent up to 178,000 employees—178,000 Americans who can lose their jobs because their employers can no longer afford the cost of health care.

Fifty-seven percent of existing small businesses already have had to eliminate health care coverage, and more soon will be forced to do the same. Twenty-nine percent of small business employees have no insurance of any kind. According to the Kaiser Family Foundation's recent survey, 8 percent of existing businesses said they will eliminate health care entirely this next year.

Increasing health care costs are crippling our small businesses and small business employees. Although every company faces increasing costs, under the existing health insurance system the economic burden falls disproportionately on small businesses.

Madam Speaker, I support health insurance reform that will lower the cost of health care to these small businesses and their employees; and I urge adoption of reform.

HEALTH CARE

The SPEAKER pro tempore. The Chair recognizes the gentleman from California (Mr. DANIEL E. LUNGREN) for 5 minutes.

Mr. DANIEL E. LUNGREN of California. Madam Speaker, we are engaged in a serious debate on health care reform in this country, and there are those who believe that the only way to solve this problem is through a Washington, D.C. Federal Government takeover of health care. And I say that advisedly because I've looked at the bills that are the serious bills in the Senate and the House that are going to be presented to us at some point in time, or at least parts of them are.

One of the things that is obvious to me is that these bills stand on a number of different principles, and one of them is that there will be a requirement that every living man, woman and child must have health care insurance as defined by the Federal Government or be subject to a fine. Now they call it a tax but it is truly a fine. And the question is whether that is an appropriate exercise of authority by the Federal Government.

Some people say, Why do you even get involved in this sort of thing? Why would you even ask that question?

Well, because the history of this Nation is a history of a nation that was established on the concept of individual liberty, freedom with responsibility. And because it was, our Constitution gave us a limited Federal Government, a Federal Government that could not do everything and anything it wishes to do. It is perhaps the inconvenient truth in this debate, or perhaps I should say the Constitution is the inconvenient truth.

Let me just cite what James Madison, often called the Father of the Constitution, said in the Federalist Papers, the documents that were written and then placed upon the public in order to get States to ratify the Constitution. This is what he said:

In the first place, it is to be remembered that the general government is not to be charged with the whole power of making and administering laws. Its jurisdiction is limited to certain enumerated objects.

Congress, in other words, can't get up in the morning and just say, Well, we see a problem; therefore, we're going to fix it and we're going to impose the authority of the Federal Government upon this problem by way of our solution.

Think of this: The President of the United States spoke here from the rostrum behind me in his joint session to the Congress a little over a month and a half ago; and at that time he argued that an individual mandate was constitutional, or was lawful because, he said, it is similar to what you have to do to drive in this country. You have to have insurance to drive on the public road. But there's a fundamental difference. If you analyze all the legal authority on this question, it is not that you have a right to drive on public roads, it is a privilege, and therefore it can be conditioned by the purchase of insurance.

What we're saying here is your right to breathe in the United States, to continue to exist in the United States, will now be conditioned on you buying health insurance; and if you don't, you will be fined, we are now told \$1500, and if you don't pay the fine you can be jailed; not because you want to enter into the United States as an immigrant, not because you're asking anything of the United States but, rather, for the right to exist in the United States.

There are those who say that the commerce clause is so expansive, it can include everything. Well, the courts have told us it is not that expansive. Even as they have broadened its application, they have said it is limited to an economic activity that affects interstate commerce. And if we are going to say that the right for you to breathe in the United States, the right for you to exist in the United States, is an impact on interstate commerce, there is nothing left that the Federal Government cannot do.

That's why this debate over health care is important for many different