

Secretary Duncan have changed the tone in the education community. Last Friday, David Brooks used his column in the New York Times to praise the President and the Secretary for their efforts in raising the bar on education reform. Partnering with Congress, they have set high standards and are providing \$5 billion in competitive grants to those States that can best demonstrate their commitment to reform. As a result, there is real excitement among the States to put their best education reform foot forward as they gear up for the competition for these grants.

At a time when the U.S. is falling behind other countries in educational attainment and at a time when State budgets are stretched thin, we need to focus more, not less, on strengthening education in our country to enable us to compete in the global economy.

HEALTH CARE

(Mr. DREIER asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. DREIER. Mr. Speaker, last month, President Obama stood right behind me here in our Chamber and delivered an address to a joint session of Congress in which he said, "Anyone who mischaracterizes our bill, we will call you out." His next line was, "I will not accept the status quo."

Well, Mr. Speaker, we all know that no one—no one—wants to accept the status quo. I've been listening to my California constituents, and they've been saying that we need to have exactly what our colleague from Washington (Mrs. McMORRIS RODGERS) described as a step-by-step approach. They know and understand that a massive government takeover of health care is not the answer to our problem; in fact, it could exacerbate the problem, especially with the proposed Medicare cuts that will hurt our seniors.

We need to do things like allow people to purchase insurance across State lines, giving them a chance to have the best quality product at the lowest possible price. We need real medical liability reform, which, according to the Congressional Budget Office, will bring about a savings of \$54 billion. We need to have the step-by-step approach that Mrs. McMORRIS RODGERS said that we need. Let's make it happen.

HEALTH CARE

(Ms. EDWARDS of Maryland asked and was given permission to address the House for 1 minute and to revise and extend her remarks.)

Ms. EDWARDS of Maryland. Mr. Speaker, we are so close to achieving quality, affordable and accessible health care for all Americans.

If we were playing football, the team in support of consumer choice, the public option, is in the red zone, and we are determined not to go three-and-out as we've done for the last six decades.

At last, we are going to take health care reform with a robust public option right across the goal line. Yesterday, the Senate Majority Leader helped "move the chains" when he inserted a strong public option in the Senate health care bill. This move down the field positions us one step closer to meaningful reform.

Now my colleagues in the House and I are keeping our offensive line strong in support of a robust public option, but it's time to score this touchdown for the American people, for the middle class, for working people and the young people, including those in the Hillside program at Central High School who bear the burden and brunt of this failed health care system.

The status quo is unacceptable and it's a losing strategy. Including a robust public health option is real consumer choice; it's the logical option to scoring the goal and achieving success.

FUTURE ACCESS TO QUALITY HEALTH CARE

(Mr. SESSIONS asked and was given permission to address the House for 1 minute.)

Mr. SESSIONS. Mr. Speaker, I rise today to address the looming health care debate here in Washington, D.C.

The American people know the truth about the Democrat health care proposal. We know that it's full of mandates, full of taxes, and will result in further job losses, but it also cuts reimbursement to physicians and hospitals and creates an even larger access problem.

In the proposed health care reforms, congressional Democrats are racing to create an unsustainable government-run health care plan that would reimburse physicians and hospitals no more than 30 to 60 percent of market rates.

Public safety-net hospitals like Parkland Hospital—which serves as a critical health care provider to many in Dallas, Texas—need to keep their doors open to make this plan successful. My Republican colleagues and I believe that we need to guarantee physicians and hospitals adequate reimbursement for their services to ensure the American people have access to a delivery system that works—not mandates, not taxes, and not job losses.

HEALTH CARE

(Mr. TONKO asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. TONKO. Mr. Speaker, I rise this afternoon to tell you about a constituent of mine who is waiting on Congress to pass comprehensive health insurance reform.

Karen Rozzell resides in Colonie, New York. She had to quit her job as a cashier because her diabetes got so bad she couldn't stand and she hasn't been able to find other work. When she left her job, she and her husband lost their in-

surance. They thought they could rely on COBRA, but it cost them too much and they were forced to let their insurance lapse. Her husband, a painter, doesn't have access to health insurance through his employment.

As a diabetic, Karen should be seeing a doctor regularly, but she doesn't. A couple of years ago she was hospitalized for a staph infection; she was only able to stay in the hospital until the infection was cleared up. She signed herself out before her doctors wanted her to because she knew she couldn't afford the cost. It took her years to pay that bill.

After living without insurance, her husband was diagnosed with chronic obstructive pulmonary disease, but the cost of his treatment and medication is out of reach for them. She told me she worries every time her husband sneezes.

No one in this country deserves to live in fear like this. We need health care reform.

CONGRESS—LISTEN TO THE VOICES OF THE AMERICAN PEOPLE

(Mr. McCOTTER asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. McCOTTER. In Michigan, the people know what the most important issue facing this Congress is: It's called jobs. My State has a 15.3 unemployment rate; it is expected to rise. And yet what we see in Congress is an unwillingness of the majority to listen to the concerns of the American people. They want this economy fixed; they want to provide for the livelihood of their families; they wish to pursue their happiness. And yet they watch a Congress that is willfully intent upon passing a partisan, government-run health care bill despite the voices of the American people.

I suggest that if we are to restore sanity and prosperity to these uncertain times, that this Congress start to listen to the voices of their constituents and start to act accordingly. That is why we have a representative government.

HEALTH CARE

(Mr. ELLISON asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. ELLISON. Mr. Speaker, need I remind this body that between the years 2000 and 2006, the party apposite controlled the White House, the House of Representatives, and the Senate. What did they do for the American people regarding health care? Nothing; nothing at all. They didn't do anything to help the American people. And now that the Democratic Caucus is within a hair's breadth of delivering real reform, all we hear about is death panels, sex school clinics, and now, oh, my

God, the Democrats are after the seniors.

Seniors of America, in 1965, when Medicare was passed, only 22 Republicans voted for it; probably none will vote for health care reform now. Remember that at the polls.

JOB'S AND HEALTH CARE

(Mr. MCCARTHY of California asked and was given permission to address the House for 1 minute.)

Mr. MCCARTHY of California. Mr. Speaker, as a former small business owner, I know that success is measured by results. If you don't achieve results, you have to rethink your approach to make your business successful. The same cannot be said of this Congress. Bipartisan stimulus ideas to help small businesses grow jobs were ignored. Instead, a \$1 trillion spending bill was crafted behind closed doors with the stated purpose to create 3.5 million jobs. The results? We now find ourselves with an unemployment rate not seen in over 25 years. In my home State of California alone, the White House predicted that 396,000 jobs would be created. Well, 336,000 jobs, and counting, have been lost. So where are the jobs?

Now in addressing health care, the Democratic majority is again crafting a bill behind closed doors. Can we expect the same lack of results? Likely. Because how do you save money for American families and small businesses by raising taxes and once again ignoring bipartisan ideas, like lawsuit abuse reform?

Our families deserve better; our small businesses deserve better; America deserves better.

HEALTH CARE REFORM

(Mr. PIERLUISI asked and was given permission to address the House for 1 minute.)

Mr. PIERLUISI. Mr. Speaker, I rise in strong support of Congress' efforts to reform our Nation's health care system. Too many Americans have no health insurance or are a job loss away from losing their insurance, and reform will give them access to secure, affordable coverage.

The House bill will also benefit the vast majority of Americans who already have insurance. Your insurance company will no longer be able to deny you coverage or raise your rates because of a preexisting condition. Your insurance company will no longer be able to drop or reduce your coverage when you get sick.

Mr. Speaker, I represent nearly 4 million U.S. citizens from Puerto Rico. My fellow delegates from the territories and I have fought hard to make certain that the House bill is fair to our constituents who are no less American than their fellow citizens in the States and are no less deserving of care.

Thanks to the determined efforts of our leadership, I am confident that the

House bill will ensure that quality health coverage will be available for all Americans, whatever their financial means and wherever they happen to reside.

GOVERNMENT TAKEOVER SLASHES MEDICARE FUNDING

(Ms. FOXX asked and was given permission to address the House for 1 minute.)

Ms. FOXX. Mr. Speaker, what does a government takeover of health care mean for seniors? It's simple. According to the Congressional Budget Office, the Democrats' health care and tax increase bill slashes funding for Medicare Advantage plans used by millions of seniors across the country.

All told, the Democrat plan cuts \$162 billion from Medicare Advantage. That will directly affect the 40,000 seniors in my mostly rural North Carolina district who enjoy Medicare Advantage plans. With such huge cuts, Medicare Advantage plans are expected to disappear, limiting seniors' choices and causing real hardships for seniors in rural areas who simply don't have many options.

So much for the President's promise that "if you like your current plan, you can keep it." Sure, this promise is true, unless of course you're one of the millions who will lose their plan.

The bottom line is this one-size-fits-all government-run plan and tax increase combination is bad news for America's seniors.

HEALTH REFORM

(Mr. LANGEVIN asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. LANGEVIN. Mr. Speaker, I am very encouraged by the progress being made on health insurance reform in this Congress. Where we are in this health care debate is truly historic. However, we're not there yet, and we cannot let this opportunity pass us by.

For millions of people without insurance, health reform will mean access to affordable, quality coverage. But what will it mean for people who already have coverage? For them, health reform will create stronger consumer protections that ensure coverage isn't dropped or scaled back when they get sick. It will ensure a lower out-of-pocket cost to make coverage more affordable, and it will provide greater access to routine checkups and preventive care. It will ensure real competition and transparency in the health insurance market so the American people are getting the best plans at an affordable price.

In short, health reform will mean security and stability for millions of Americans, and we should not make them wait any longer for these commonsense reforms. The time to act is now. This is a historic opportunity for the American people, and this Congress cannot let them down.

DEMOCRAT HEALTH CARE PROPOSAL HARMS SENIORS

(Mr. WILSON of South Carolina asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. WILSON of South Carolina. Mr. Speaker, Democrats are proposing \$163 billion in cuts to the Medicare Advantage program as part of their government takeover of health care. A crucial program, Medicare Advantage offers seniors greater choice and affordability, the primary goal of health insurance reform. But Democrats want to cut funding for this program.

Squeezing senior citizens out of their current health insurance plan in order to impose new taxes and unworkable government mandates onto American families is not the way to reform health insurance. We need targeted reforms that will expand opportunities to get insurance, like association health plans and purchasing insurance across State lines.

The Republican Study Committee, led by Dr. TOM PRICE, has offered H.R. 3400 to promote affordability and accessibility for American families and small businesses.

The American people have a choice on how we reform. We do not need a big government takeover which will destroy 1.6 million jobs, according to the NFIB, the voice of small business.

In conclusion, God bless our troops, and we will never forget September the 11th in the global war on terrorism.

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HOUSEHOLD VIOLENCE

(Mr. QUIGLEY asked and was given permission to address the House for 1 minute.)

Mr. QUIGLEY. Mr. Speaker, October is Domestic Violence Awareness Month, and now, more than ever, it is time to draw attention to household violence that results in more than 2 million injuries and 1,200 deaths among women each year.

Estimates of assaults on women by partners range from approximately 2 million to 4 million annually. Sadly, we have no real idea of how many incidents of violence actually occur each year because so many go unreported.

Those unreported incidents are the reason Domestic Violence Awareness Month is so vital. Only when we are no longer afraid to speak out about domestic violence will we empower those who currently suffer in silence. In my State of Illinois alone, there were 114,921 reported cases of domestic violence in 2006.

It is for those thousands of women and the countless others who suffer silently that I speak today. It is for those women that I encourage my colleagues to pass House Resolution 817, which supports the goals and ideals of National Domestic Violence Awareness Month.