

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.

JOBES 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.

□ 1230

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.

HEALTH CARE

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

Mr. TURNER. Mr. Speaker, if the government's handling of the outbreak of H1N1 flu, known as swine flu, is any indication of how it will administer a public health care option, we should all be greatly concerned. With the media reporting that lines of hundreds of people wait for H1N1 vaccinations, it took a Presidential national emergency declaration just to cut through the bureaucratic red tape.

If this Congress is serious about health care reform, why not start with simple principles on which most of us can agree, such as prohibiting insurance companies from denying coverage based on preexisting conditions, portability of health care coverage, investing in medical research to ensure quality care, deductibility of health insurance premiums, ensuring access to health savings accounts, limiting frivolous lawsuits which raise health care costs, and allowing small businesses to group together to negotiate insurance plans.

Instead of the President's sweeping overhaul, which will likely result in pitfalls, we should look at simple reforms to adhere to mutually agreed upon principles ensuring that those who have health insurance can keep it and those who don't can obtain it.

PROTECT COWORKERS FROM ASSAULT AND ATTACK

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

Mr. MELANCON. Mr. Speaker, many of us have heard the terrible story of Jamie Leigh Jones, the employee of a U.S. defense contractor who was brutally attacked and sexually assaulted by coworkers while working in Iraq in 2005. Instead of being allowed to seek justice, Jamie Leigh was held in a shipping container by company employees so she couldn't report the crime.

When Jamie Leigh returned to the United States, she learned that a clause in her contract barred her from taking her case to court. Instead, it forced her into a company-run arbitration process; the same company that failed to protect her in the first place.

It is our responsibility to make sure that this horrific story can never happen again. No American citizen should ever have to sign away his or her rights to justice in order to get a job. Not a dime of taxpayer money should go to companies that would rather sweep an assault under the rug than allow our justice system to work.

The Franken amendment will forbid Federal dollars from going to companies that engage in these practices. If we fail to enact this measure, we have failed to protect the rights and values we were sworn to uphold when we took

our oath of office. We cannot let this happen again.

U.S. DOLLAR ALARM BELLS

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

Mr. LANCE. Mr. Speaker, for decades the U.S. dollar has been used to price virtually all of the world's commodities, with nearly every country having U.S.-backed securities in reserve; yet this could all change.

There is growing evidence suggesting that foreign investors are losing faith in the dollar as a secure instrument. Several important countries like China, India, Russia, France, and the Arab States voiced their concern over the role of the U.S. dollar as the reserve currency in world trade. Many have suggested a new world currency take its place.

A primary concern for those investing in the United States is the growing U.S. debt and staggering deficits. Yet, despite this, the majority party continues to push ahead with an agenda that taxes, spends, and borrows, including a health care proposal that could cost as much as \$800 billion to \$1 trillion over the next decade.

How many alarm bells must be set off before Washington gets serious about tackling our ever-growing debt and budget deficits?

BREAKING THE STALEMATE ON PUBLIC OPTION

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

Ms. WATSON. Mr. Speaker, we need to stop ranting and start reasoning. Health care providers have pushed against the public option, citing payment as one of their primary concerns. Instead of seeing the issue within the lens of payments based on Medicare rates versus negotiated ones, I believe we can attract health care providers to the public option with a new incentive to break the stalemate. Malpractice is a primary psychological, emotional issue with doctors, dentists, hospitals, administrators, and pharmacists.

Additionally, it is a principal issue of economic obsession with providers who bitterly resent paying for liability insurance. When it comes to you, it is not petty. If there is malpractice, you certainly want to contact an attorney.

Progressives have always championed community health centers. My proposal expands the liability program used by these community health centers.

HEALTH CARE

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

Mr. BONNER. Mr. Speaker, there is an old saying, common in south Ala-

bama, that we need to practice what we preach. Well, if reports are accurate, it sounds like Congress will be moving forward with health care legislation that contains a government-run public option, no matter how hard the Democratic leadership might try to rebrand this poison pill.

Well, I am going to oppose with every ounce of me a Federal takeover of our health care system. I couldn't agree more with our friend Dr. JOHN FLEMING of Louisiana, who has introduced a resolution that says that any Member of Congress who votes for a public option should be the first one to sign up for it. After all, if a public option is good enough for you, Mr. and Mrs. Taxpayer, then your elected Representative should be the first to try it out.

This is especially true for our seniors who are looking at draconian cuts to Medicare, cuts to Medicare Advantage, and, according to the CBO, a 20 percent increase in their prescription drug premiums over the next decade, not to mention higher taxes for all Americans, just to help pay for this major step towards socialized medicine.

Practicing what we preach means just that. Congress won't ask the American people to take any poison that we don't take first.

HEALTH CARE

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

Mr. YARMUTH. Mr. Speaker, our Republican colleagues continue to amaze me with the creativity that they display in finding new ways to say "no" to health care reform.

First, a few weeks ago, it was Senator JOHN ENSIGN who said in the Finance Committee in the Senate, I am against the public option because—get this—it might work; people will like it. He was against it because people will like a public option.

Now, when we find out that the Senate has proposed an opt-out for the States, we are hearing from our opponents who say, well, they won't opt out, they just won't opt out. I wonder why. Probably because it would be effective in providing competition and choice for their constituents, for citizens of America who need affordable, secure health care.

That's what our efforts are for. That's what this bill is about. We need Republicans to stop saying "no" and to say "yes" to the health care that Americans deserve.

DON'T ROB SENIORS OF THEIR HEALTH CARE

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

Mr. FLEMING. Mr. Speaker, as a family physician for over 30 years, I could have never imagined that the Democrats would come up with such a crazy idea as ObamaCare paid for on the backs of the American seniors.