

what is in the legislation. They can not just go online, but the news accounts, television shows, and trade publications. In fact, yesterday, in the Wall Street Journal it was outlined again.

There are some sticking points yet to be resolved, as those are being debated, they're public knowledge. People know about the public option, options.

Indeed, the notion that somehow we could keep a secret in our little Capitol Hill village of 5,000 compulsive leakers is laughable. Everybody knows that to be the case. If Republicans were still confused or couldn't figure it out themselves they could have just listened to some of their colleagues who were talking about how they disagreed with what was in the bill. They should talk to each other.

THE BRIDGE LOAN TO NOWHERE

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

Mr. KIRK. Mr. Speaker, last December Treasury lent General Motors \$13 billion, another \$6 billion last spring, and in June, just days before GM declared bankruptcy, the White House gave another \$30 billion, just in time to convert taxpayer loans into government ownership.

That's \$49 billion given to GM, and taxpayers now own 61 percent of the company.

Last Wednesday, ex-car czar Steve Rattner estimated that the taxpayers' stake in GM has lost \$25 billion, a nearly 50 percent loss. While sales of the privately owned Ford Motors fell only 6 percent, the government-owned GM saw a 45 percent decline.

How much should taxpayers expect to lose from the "Bridge Loan to Nowhere"?

Despite pledges of transparency, the "Bridge Loan to Nowhere" comes with none. American taxpayers are in the dark about the basic details of \$49 billion given to GM.

Congress, and the American people, should see the financial and operating information for GM. Taxpayers should be treated like shareholders of any other major company.

HEALTH REFORM IS GOOD FOR SENIORS

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

Ms. SCHWARTZ. Central to finding a uniquely American solution to our Nation's health care challenges is a focus on strengthening Medicare for our Nation's seniors.

Our health care reform efforts renew our commitment to the health and security of America's seniors by ensuring the long-term fiscal health of Medicare and improving the quality of care for our seniors. The House bill adds valuable new benefits for our seniors and improves access to primary care.

I strongly advocated for ending the copayment that seniors pay for preventive services. Right now seniors pay up to 20 percent of the cost of services such as mammograms, colonoscopies, and vaccines. As of January 1, 2011, seniors will no longer have to pay the copay for preventive services. This is a major win for America's seniors.

Health care reform also sets us on a path to close the coverage gap in the Medicare part D prescription drug plan known as the "doughnut hole." In 2011, Medicare will pay \$500 more and will continue to add benefits until we eliminate this gap in coverage for drug services.

Health care reform is a win for seniors. Now is the time to act.

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HEALTH CARE

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

Mr. FLEMING. Mr. Speaker, as a doctor for over 30 years, I have become a pretty good judge of truth telling. We have heard Democratic leadership try to convince us that ObamaCare is going to pass, and with a "robust" public option.

It has become obvious there are not enough votes in Congress, and suddenly, the terms are changing. Within a few days, a whole new vernacular has emerged to describe the public option. This includes the opt-in and the opt-out option; the trigger—no offense to Roy Rogers' horse; the competitive option; and finally, the consumer option. Mr. Speaker, this is not a marketing problem; it is an idea problem.

To my Democrat colleagues, let me suggest a frequently spoken idiom: if you put lipstick on porcine, it is still porcine. Or if you prefer a Louisiana colloquialism: this dog won't hunt.

This bill will add 750 billion real dollars to the deficit, not to mention taxes and higher premiums on the middle class, all while covering relatively few more Americans. Fortunately, there are enough Democrats in both Houses who see past this sham and fear their voters more than their leadership, as they well should.

HEALTH CARE

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

Mr. YARMUTH. Mr. Speaker, Democratic leadership is committed to making any health care reform bill available to the public for at least 72 hours before a floor vote, and I am glad they have because the American people deserve a chance to see what we are doing.

But, there is one group that has made it clear that they don't need 72 hours to decide where they stand on health care, and it is our Republican colleagues. We could give them 72 days,

and they would still know that they are going to say "no" no matter what is in that bill. They don't need time to read our bill to know they are against giving affordable, quality health care to every American.

The truth is that the Republicans haven't given us one minute to read their bill. You know why? They don't have a bill. It has been 133 days since Republican leadership promised a bill from their side, and all we hear is "no." And now some members of the party, their party, are giving us ideas like privatizing Medicare and increased subsidies to insurance companies.

Mr. Speaker, the American people know it is time for reform, and it is time the Members of this House stand up for them and give the American people the health care they deserve.

IRANIAN TRIALS

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

Mr. PITTS. Mr. Speaker, last week the Iranian Government handed down death sentences to three activists who protested this year's stolen election in Iran. There are at least 140 other demonstrators who will be subject to these sham trials, and unfortunately, there may be more executions as the regime seeks to restore their iron rule.

The charges were phony, the trials were held in secret, the outcome rigged, and now the Iranian Government is only identifying condemned men by their initials. The Iranian Government is clearly on shaky footing; and according to some reports, they imported Hezbollah and Hamas radicals who wore face masks and who couldn't speak Farsi to harass and beat the demonstrators.

Unfortunately, we continue to negotiate with this brutal regime, legitimizing their autocratic rule, even though they are so weak they must resort to hiring brutal thugs from other nations.

The President should act swiftly, without regard to Russian objections to institute international sanctions that will support freedom for the Iranian people and undermine the vicious rulers who persecute them.

HEALTH CARE

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

Mr. COHEN. Mr. Speaker, at the end of President Bush's term, this House was faced with a TARP bill. The American public likes bipartisanship, and we had bipartisanship on that bill. There were Democrats and Republicans who voted "no," but there were Democrats and Republicans who voted "yes." Just about everyone agrees that bill saved us from going over the abyss into a Great Depression similar to 1933. It was a moment of bipartisanship and a moment I was proud to participate in.

When President Obama became President, bipartisanship ended. The ARRA—which everybody agrees, the stimulus package, has helped our economy and provided millions of jobs in State and local government and education and other places and provided jobs in the private sector—didn't have a single vote on the Republican side. Not one single vote.

And now on health care, we see not one single vote coming from the Republican side. Doing nothing is not the answer. Everybody knows the health system needs reform.

In my city, the emergency room at Charity Hospital, the public hospital, is about to close. People are having great problems paying their premiums. We need health reform, and we need bipartisanship.

HEALTH CARE

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

Mr. PENCE. Mr. Speaker, sometimes I like to say Washington, D.C., is the world capital of unintended consequences. That seems to be becoming more true every day.

The American people want health care reform that lowers the cost of health insurance and lowers the cost of health care. But a new study produced by Indiana's leading provider of health insurance yesterday shows that the cost of health insurance under the Democratic bill will actually go up for most Americans. That's right. You heard that right.

According to a 238-page study by the actuaries at WellPoint, the Democratic plan, with its mandates and regulations, will actually drive up premiums for small business owners and individuals. Get this, young and healthy consumers will be hardest hit. For young and healthy Americans, their premiums could actually triple in some States. And for a family of four, premiums would more than double.

Now the White House has denounced this, and I know there will be denunciations here on the floor of this study; but the reality is the experts in the industry are pointing out regulations and mandates are going to result in Democrat health care reform meaning higher cost of health insurance to Americans.

P.J. O'Rourke had it right when he said if you think health care is expensive now, wait until it is free.

HEALTH CARE

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

Mr. GENE GREEN of Texas. Mr. Speaker, I rise today in strong support of national comprehensive health care reform for all Americans. Our district has the highest number of uninsured adults in the Nation.

Since 1965, Medicare has proven to be one of the great success stories of the Federal Government. It is the second most popular government-run program behind Social Security. That's why I strongly support national health care reform that includes the national public option similar to Medicare.

Some of our Republican colleagues have been quick to say that H.R. 3200, America's Affordable Health Care Choices Act, endangers traditional Medicare and eliminates the Medicare Advantage program. These assertions are not true. The fact is that H.R. 3200 does not use funds from the Medicare trust fund to pay for reform. Instead, it eliminates waste and fraud within the Medicare program and abolishes the infamous doughnut hole that was created under a Republican Congress in 2003 on the prescription drug plan and strengthens the financial health of Medicare.

In 2003, a Republican Congress created the Medicare Advantage program, and insurance companies have been benefiting ever since.

FILIPINO AMERICAN HISTORY MONTH

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

Mr. AUSTRIA. Mr. Speaker, while we celebrate Filipino American History Month in October, unfortunately the Philippines has been devastated by multiple typhoons in the past few weeks, and our thoughts and prayers are with the Filipino people.

My father came to the United States from the Philippines to finish medical school. He became a U.S. citizen and lived the American dream. I am aware of at least two other Members of Filipino descent, and I am proud to be a first-generation Filipino American elected to Congress, which is why I co-sponsored House Resolution 780 which recognizes Filipino American History Month.

I would like to take this opportunity to acknowledge the economic, cultural, social, and many other contributions of Filipino Americans. Our Nations have been brought together as partners by crucial events throughout history, and even though we are separated by an ocean, the two countries are connected by their long-standing relationship.

Mr. Speaker, may the long-standing relationship between the Philippines and the United States remain strong.

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, the American people elect us to serve as innovators and problem solvers. I am an engineer; I see a problem, and I come up with a solution. The Democratic Party is a party of solutions, es-

pecially when it comes to health insurance reform.

So I ask you today, Mr. Speaker, where are the Republican solutions? One hundred and thirty-three days ago, my friends from the Republican side of the aisle said they were going to have a comprehensive plan. Where is that plan, and just what are those solutions?

Democrats have already pledged to make the merged health reform bill public for 72 hours before it is considered on the floor. Will Republicans promise to do the same?

Given the status quo of health insurance coverage in the United States, it appears as if Republicans want to continue to deny coverage for preexisting conditions, force families into bankruptcy because of health care costs, stifle the growth of business, and continue to play politics as usual by defunding insurance companies and pharmaceutical companies. Then they should also be happy to be labeled the party of "no."

HEALTH CARE

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

Mr. GINGREY of Georgia. Mr. Speaker, health care reform should not hurt my patients, many of which are seniors. Somewhere in this Capitol Building, behind closed doors and away from the public view, the Speaker and her liberal allies are rewriting the health care bill that they want. We don't know what is going to be included in that health care reform bill, despite the allegations of my friend Representative BLUMENAUER earlier this morning. But one thing is for certain; it will gut our Medicare program.

Our seniors have suffered tremendously since this recession began. Many of their 401(k)s are now 201(k)s; they have lost 50 percent of their value. Yet, my Democratic colleagues don't think the seniors have paid enough. So they are asking our seniors to foot the bill for health insurance reform by cutting \$500 billion from the Medicare program. These cuts will result in seniors losing benefits under the Medicare Advantage program, such as vision, dental, hearing, and even annual checkups. These cuts will result in longer wait times and even make it harder for senior patients to find a doctor.

Mr. Speaker, I say again: health care reform should not hurt our seniors.

HEALTH CARE

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

Mr. WU. Mr. Speaker, this Congress is doing health insurance reform this fall. What does that mean for middle income Americans? It means an insurance company can no longer decide to deny you coverage because of a pre-existing condition, or jack up your rates because of preexisting conditions.