

new politically correct phrase. I would like to suggest that we call it the “Public Indian Health Care Option for Everybody.” The Indians have no option. They’re forced to take the public plan.

Now let’s look at the American government-run health care as it has worked out for them for 200 years. We have a lot of history taking care of the American Indians—or, shall I say, not taking care of them.

When Stephanie Little Light took her daughter, Ta’Shon Rain, to an Indian health service clinic in Montana, which she is required to do since she is under the universal health care Indian program, the doctor said that her little 5-year-old girl was just depressed. She had stopped eating and stopped walking. The little girl kept complaining to her mother that her stomach hurt all the time. After going back to the government-run health care clinic 10 more times, Ta’Shon’s lung collapsed. She was then airlifted to a private, non-government hospital in Denver where they told her mom she had terminal cancer. The little girl who loved to dance and sing and dress up in Indian costumes always wanted to see Disney World, specifically Cinderella’s Castle. So a charity sent the whole family there, but Ta’Shon didn’t get to see that castle when they got to Florida. The little girl had died in a hotel room. This is a tragic example of universal medical health care run by the United States Government.

There is a big difference between good intentions and what really happens in the real world. When there are no doctors left and the taxpayer money is gone and when the bureaucrats control health care, people die. Is this what we are to expect under the new nationalized health care system?

They’re trying to tell us that this new, improved disaster on Americans is going to be different. Yeah, right.

Mr. Speaker, they say on those Indian reservations, Don’t get sick after June because that’s when the Federal money runs out. So they ration health care. The Federal Indian Health Service agency calls itself—get this—a “rationed health care system” for Indians. How’s that for truth about socialized medicine?

On another Indian reservation, Ardel Baker went to the reservation government-run clinic. She had chest pains. They sent her to a private hospital in an ambulance and put a note on her chest. The note read, “Understand that Priority 1 care cannot be paid for by us at this time because of funding issues.” So they put a note on her and sent her on her way to a private hospital because the government would not take care of her. Ardel managed to survive that ordeal, thanks to private medicine.

Victor Brave Thunder was not so fortunate. He felt real bad and went to a government clinic on the reservation. They misdiagnosed the fact that he had heart failure and gave him Tylenol and

cough syrup and said, Get better. He later died.

Then there is Harriet Archambault. She tried five times to get an appointment on a reservation to get her hypertension medicine refilled, but government bureaucrats were nowhere to be found. So she died before she was able to get that sixth appointment at the government clinic for her medicine.

Mr. Speaker, these are examples of government-run medical malpractice against American Indians right here in America. Government-run health care never works. It never has. Even in America, we’ve proven it doesn’t work.

The health care bill being pushed on the American people is not really about providing better quality at an affordable price. The government cannot do it better or cheaper. It’s really about government control and intervention in the lives of the American people. It’s about oppressive government.

So let’s address specific issues of health care and solve them, like being able to buy insurance across State lines, allow businesses and associations to pool employees to get a better insurance rate, provide for a safety net for preexisting conditions and catastrophic injuries and illnesses. But we should never turn our health over to the United States Government. Just ask the American Indians.

And that’s just the way it is.

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from Texas (Mr. EDWARDS) is recognized for 5 minutes.

(Mr. EDWARDS of Texas addressed the House. His remarks will appear hereafter in the Extensions of Remarks.)

THE 6-YEAR HIGHWAY AUTHORIZATION

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from Oregon (Mr. DEFAZIO) is recognized for 5 minutes.

Mr. DEFAZIO. I hope the gentleman who spoke before me in the well would be willing to accept one minor thing. I hear a lot from the Republicans about they want competition, they want the free market, but the problem is that insurance is exempt from antitrust law. Unlike any other industry or business, small or large, in America, except for professional baseball, they are exempt. They can and do get together and collude—collude to drive up the price of premiums, collude to stay out of one another’s markets and not compete, collude not to exclude people with preexisting conditions, collude to do a whole host of anticompetitive things to stick it to the American people. So before I hear any more from that side of the aisle about supporting the private insurance industry, let’s hear about having them play by the same rules as every other industry in

America. But that’s not why I came to the floor this afternoon.

I came to the floor because there seems to be a little disconnect downtown at the White House with the President’s economic team, yet, once again. Big surprise.

The GDP, gross domestic product, is growing, so the economy is recovering. We’re out of the recession. Whoops. Well, it’s a so-called jobless recovery, and we’re still going to lose about 250,000 jobs a month. But they’re down there celebrating.

We need to take concrete steps—not to make a bad pun—here in the House of Representatives, in Congress, to put people back to work. And one of the things that we could do best would be to ignore the President and his advisers who want to delay a new transportation policy for America, one that will deliver projects more quickly and with less expense, getting people out of congestion, giving people more transit options, fixing some of our 160,000 bridges that are either structurally deficient—there was a little problem yesterday with the San Francisco Bay Bridge—or functionally obsolete, building made-in-America streetcars, made-in-America modern buses, like the fuel cell bus I saw yesterday. But guess what? It’s going to take some investment and some money.

This White House, after cutting a deal with Republican Senators for \$340 billion in tax cuts in the so-called stimulus, which isn’t putting anybody back to work—ask your neighbor, ask your friend, ask anybody, What did you spend your \$12 on last week, your tax cut? How did you invest it for the future of America?

We need something that is not consumer-driven. We need a recovery that is investment and jobs-driven in this country, and a 6-year highway authorization could get that job done. The difference between the Obama plan—do nothing, extend current law and current levels of expenditure for a crumbling Third World-like infrastructure in this country—and what we’re proposing here in the House of Representatives Transportation and Infrastructure Committee is 1 million jobs next year.

Now, apparently, the President’s economic team thinks that they can tell those 1 million people who won’t get jobs, Well, don’t worry. The GDP’s up, and we are losing less jobs than we were losing before. Or maybe they could get on board with us, help us write that 6-year bill, wake the Senate up from its nap, and put 1 million more Americans back to work next year rebuilding America’s transportation infrastructure.

And, by the way, it meets another one of his goals. It will help him with his goals of reducing pollution, reducing carbon emissions because we’ll get people out of sitting in traffic as we expand the system, deal with congestion and giving them more transit options.

I recommend that the President look for a new economic team and help us to

do things that will benefit the real American people, not pointy-head economists and not Wall Street.

ACORN

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from Kansas (Mr. MORAN) is recognized for 5 minutes.

Mr. MORAN of Kansas. Mr. Speaker, I rise today to again call attention to the group Association of Community Organizations for Reform Now, or ACORN. As Congress proceeds later this week with appropriations, we must be mindful of the risk of allowing this group's funding to be restored.

ACORN's funding was stripped last month, thanks to quick action on the part of some of my colleagues here in the House. However, if we do not ensure that that funding is permanently eliminated, ACORN could again resume their questionable activities, subsidized by the American taxpayer.

Recently, 11 former ACORN employees were arrested for suspicion of voter registration fraud. In the past several weeks, more than five videos have been released to the media showing ACORN employees advising individuals of methods to illegally evade taxes by masking prostitution under an IRS code, among other questionable things.

We have no way of knowing if these were isolated instances or basic procedure, but I've heard from many Kansans who have voiced their displeasure with ACORN. They demand that ACORN be investigated, possibly criminally, as well as completely defunded, and I agree with those Kansans.

I recently wrote a letter demanding an investigation by the House Committee on Oversight and Government Reform. In the enclosed letter, I cited ACORN's unresolved issues with past elections and the recently released videos as evidence to block any further funding.

While ACORN has launched an internal investigation and fired offending employees, this string of events sheds light on the lack of institutional control within ACORN's management ranks. This is a perfect example of misappropriation of taxpayer dollars.

The American people should not be expected to subsidize ACORN's activities. That is why I called for this investigation in the beginning of September, and that's why I again call for an investigation now, a month and a half later. Congress must look at its own procedures when it comes to allocating money with little or no accountability.

Congress has been complacent with the money entrusted to us by the taxpayers. The House of Representatives owes an explanation as to why ACORN has been deemed fit to receive any Federal assistance. Congress has the opportunity to deny Federal funds to ACORN when we consider legislation later this week. It is necessary to deny those funds now and in the future until ACORN can dispel its long history of

questionable practices. I cannot foresee a scenario where it would be appropriate to reinstate ACORN funding. Their previous track record, coupled with their stonewalling of legislative efforts to review them, gives me the impression that they are unwilling or, even worse, unable to play by the rules.

Let's end this corruption and stop wasting the money.

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from California (Mr. GEORGE MILLER) is recognized for 5 minutes.

(Mr. GEORGE MILLER of California addressed the House. His remarks will appear hereafter in the Extensions of Remarks.)

HEALTH CARE

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from Maryland (Ms. EDWARDS) is recognized for 5 minutes.

Ms. EDWARDS of Maryland. Mr. Speaker, we are closer than ever to achieving health care reform for the American people. I think it's really important for us to step back and examine the reasons that we want health care reform.

Every day, every year premiums for Americans are going higher and higher, deductibles and copays higher and higher. Millions of people without health insurance, some 47 million people without health insurance, 14,000 people a day who lose their health care coverage. It's really unthinkable. And here we have an opportunity to do something that's very special and right for the American people.

Now, Mr. Speaker, I haven't been in this Congress for six decades, but I do know that the idea of health care reform has risen and fallen for six decades. So it's time for us to make the kind of changes the American people thought they bought onto in November 2008. We are closer than ever to achieving that kind of comprehensive reform. We need to take a look at why we want reform.

The American people want reform because they want to lower their health care costs. They know the cost of their premiums. It's not affordable for their families. Americans want health care reform because it's not fair that millions go without health insurance and many millions more are in danger of losing their health insurance. Our small businesses are struggling each and every day. They want to provide health care for their employees, but they just can't because they can't operate with a profit margin and provide quality, affordable, and accessible health care for their employees.

So I am really struggling here with why my friends on the other side of the aisle have so resisted reform. I don't really believe that it's because they're such allies with the health insurance industry. I don't really believe it's be-

cause they're more driven by what works for the private market than what works for the American people, but I have to believe that all of us can get on one page about what's right for the American people.

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So, as we move into these days following many town hall meetings and meetings at senior centers with our seniors, as we talk to young people about the need for reform and as we meet with our business leaders, it's time for some real decision-making. If it's not going to come from my friends on the other side of the aisle, then the leadership and that decision-making has to come from Democrats. It doesn't matter to me, frankly, about one election or another, because it's about doing what's right for the American people.

Now, I, along with hundreds of others of my colleagues, happen to believe that a robust public health option is important for the American people. I guess the question is: How many more are going to step up and have the courage to do the right thing? How many more are going to step up and say, You know what? Not only do we want to eliminate preexisting conditions and strengthen insurance provisions for everyone, but we want to lower costs, we want to create competition, and we want to make sure that there is real accountability in the system.

Now, earlier this month, we had an opportunity to see the insurance companies and insurance industry completely unmasked. I mean their goals are very clear to the American people. Their goals are about maintaining the status quo because it works for them. Their goals are about maintaining the status quo because it satisfies their profit margins, and it satisfies their shareholders. The problem with that is that it doesn't satisfy the American people. So I'm ready to act.

I know that, from the year 2000 until 2006, the Republicans controlled both chambers of the Congress and the White House, and yet we didn't do health care reform. So the opportunity for those of us in the majority today is actually to do the right thing by the American people. I'm excited about that. I know the American people are excited about it.

If you look at the polls, and although polls may not be everything, they do give us a picture of where the American people are and of how they've moved. What those polls suggest is that, despite being beaten up and beaten up for months and weeks at a time, the public option has survived. The reason that it has is that I believe, like many of my colleagues, that the American people are smart. They get it. They understand what health insurance means to them.

They know that, for children who are coming out of college and who are ready to strike out on their own, those children are no longer on their parents'