

I want to quote again from THAD-DEUS:

“Unfortunately, trapped in the past of a big government ideology and purblind to the people empowering wondering powers of our globalized world, the President and his Democratic majority cavalierly dismiss such sensible, affordable approach and determinedly toil behind closed doors to impose their radical health distribution scheme on unwilling Americans. If the Democrats prevail, their health redistribution will impel higher costs, lower quality, fewer choices and lost jobs during this painful recession. There is a better way, the Republican way: patient-centered wellness for our people powered world.”

This should not happen in the greatest country in the world. We must do everything that we can to stop this, and we will do everything we can to stop it.

VACATING 5-MINUTE SPECIAL ORDER

The SPEAKER pro tempore. Without objection, the 5-minute Special Order request of the gentleman from Texas (Mr. GOHMERT) is vacated.

There was no objection.

HEALTH CARE

The SPEAKER pro tempore. Under the Speaker's announced policy of January 6, 2009, the gentleman from Texas (Mr. GOHMERT) is recognized for 60 minutes.

Mr. GOHMERT. Mr. Speaker, today Speaker PELOSI, with a lot of fanfare and locked doors, invitation only, which didn't include any Republicans, just as the input in this bill included no Republicans, this is the bill, 1,990 pages. I haven't had a chance to read it. They just got it out today. I have been trying to get through it.

One of the frustrating things we have is we have had hearings and hearings, hours and hours of hearings on the Democratic health bill, H.R. 3200, hour after hour. Think about how many people in America have spent hour after hour reading H.R. 3200.

□ 2030

They carefully examined it because this was the law that was proposed by the Democratic leadership. And they were concerned that this may be voted into law, and they need to know because this is going to be country changing.

So they spent thousands and thousands of hours all across America to review H.R. 3200. Some have gone to the trouble and spent hundreds or thousands of hours, when you consider all the people in America are reading these bills because they're scared, reading the Baucus bill, reading some of the other bills. And then it turns out those were all red herrings. The American public, all the Members of Congress were tricked into wasting their

time, spending all those hours reviewing a bill that they knew they weren't going to introduce.

Mr. Speaker, you know, Thomas Jefferson laid out the rules that we follow. They're not Robert's Rules of Order. They're Thomas Jefferson's rules that get modified with each Congress. And that's what we're supposed to follow. And the procedure is well thought out. You have subcommittees that are supposed to have legislative hearings and bring in witnesses and consider all these different aspects, and after they've considered all this, someone starts working together with other people. You're supposed to have bipartisan support. We were told all year long we would have that. Yes, big joke there. So someone, though, is supposed to put together the bill and lots of people working together to get it done, and then you give everybody plenty of time to review the bill at the subcommittee level. And then you have a markup, it's called, in subcommittee, where some of those hearings are very long when they're done properly because they're open to any amendment by anyone on the subcommittee. Once it clears the subcommittee, if it gets voted out of the subcommittee, then it goes to the full committee. And anyone in the full committee can make amendments, as many as they want, and you stay as long as you have to get through all the amendments. That's the process. And then once the amendments are done and the committee votes it out, that is the bill that is supposed to come to the House floor. You bring the bill that was amended and agonized over.

Not in this Congress, oh, no. We're going to spend thousands and thousands of hours, and there's no telling how many of the trees in America got cut down to print out H.R. 3200 so that people could read it because this is going to be really country changing, as the President said. He's going to transform America. He didn't say to what, but he's going to transform America. And then it turns out after all those hearings, amendments, considerations, all that work, behind closed doors they were working on a bait-and-switch scheme. And today it played out. And now we're told by the Democratic leadership, well, we want to make sure you have 72 hours to review this bill.

Well, I'm telling you what. You mark my words. You mark my words. We've got 1,990 pages here, but by the time this bill is voted on, there will be hundreds of pages added, as we've seen over and over, in the wee hours of the morning, and people won't have time to read it. And just like the crap-and-trade bill, it will be up there and they won't even have the whole bill put together in time for us to read the whole bill before we vote on this transforming bill that's going to change and, I would submit humbly, end some lives in America. Not because people are going to be denied treatment but because they're going to be put on lists and be

required to wait an inordinate amount of time because you can't cut \$500 billion from Medicare and not expect to have some people not get treated.

Another thing you need to realize too, in this new bill, from what we've been able to quickly discern, this Pelosi bill, the 1,990 pages, reduces the size of affordable credits for patients to purchase insurance in the exchange, and instead it expands the eligibility for Medicare to 150 percent of the Federal poverty level.

Well, our seniors are not as stupid as some people in this body think they are. They get it. You're going to cut Medicare \$500 billion and you're going to expand coverage to people that have never been covered before, and we're supposed to feel good that we're going to get more coverage than ever? They're not stupid. They understand what's happening.

I have been joined by some of my colleagues here, and I would love to get their input because we've been scrambling to see what we are facing here with this bill.

I would love to yield to my friend Mr. BRADY.

Mr. BRADY of Texas. I thank my friend from east Texas, where our districts border each other and whom I have gotten to know and respect here in Congress. And I thank you for this leadership.

The timing is now. The bill has been introduced. The fight is on. And rarely in our lives do we have the opportunity to make such a difference on a bill that can take us down such a wrong road for America.

I will be brief, but what comes to mind is recently a national pollster whom you would know and recognize did a survey of Americans, and he asked them two questions, and he said, which one is most true: The first question is America is going to spend \$1 trillion of your tax dollars to reform health care and it won't add a dime to the deficit. The second statement was there is human life on other planets. By a three-to-one margin, people chose human life on other planets as more true than we can spend all this money and not add a dime to the deficit.

The American public is smart. I held more than 50 town hall meetings during August and September, roundtables, all types of forums, and the truth of the matter is this Speaker and this House didn't listen to any of them.

This bill, Mr. GOHMERT, you talk about and show today, 2,000 pages, \$1 trillion, 31 new Federal agencies, mandates and commissions that come between you and your doctor, who ultimately decide what doctors you can see, what treatments the government thinks you deserve, what medicines they think you can get.

This bill today, the fight we are engaged in, government will inject itself in our most intimate health care decisions. It raises the costs of health care. It increases the deficit for generations

to come. It raises taxes on professionals and small businesses. It will force millions of people out of the private plan that they choose to take. It cuts Medicare for seniors. It will ration care in the future. It opens the door to taxpayer-funded abortions and taxpayer care for illegal immigrants. And it exempts Members of Congress from this government-run plan.

This is a bill that is wrong for America. We all, everyone tonight, every Republican, support health care reform. Many of us have worked years, all of us on this floor have worked years for this day. But we can do better than this.

And we've submitted now, what, Mr. GOHMERT, over 40 Republican health care bills; five of them, comprehensive reform. We haven't gotten an opportunity to offer any of them. They haven't spent an hour listening to any of them. And as our leaders in Texas Medical Center have told me, it is so important we get this right. Health care is so complex. Take it step by step. Focus on affordability. Move to coverage for small businesses and people with preexisting illnesses. Pass lawsuit reform to end defensive medicine. Find innovative ways to squeeze the overhead out of health care. Make it more efficient. There are all these great ideas. They will never be heard in the rush to this national health care system.

Now is the time to act. That's why tonight your discussion with the American public, even though there is a World Series Game going on, in truth, at the end of that 9 innings, that game is over. But at the end of this bill, everyone's life in America, our children and grandchildren, will be touched and I think harmed by this bill.

I appreciate your leadership. I'm going to spend every waking hour until this vote is held to kill this bill, to kill this bill and send it back to the drawing board and come back with reform that all of America can embrace.

Mr. GOHMERT, thank you, my friend from east Texas, for leading this discussion tonight.

Mr. GOHMERT. Thank you, Mr. BRADY.

I think it's important to note that despite all the rhetoric about where are the Republican solutions, we have done everything in our power to try to offer good solutions, to try to sit down, and we have offered good solutions. And they are running into brick walls because the doors are locked. I know the President said, My door's always open. And I'm sure he wouldn't lie about that. But the gates aren't. We can't get to the open door. So it's deeply troubling that we could not submit anything.

As I used to say in deacons meetings, unless one person has a 100 percent lock on God's truth all the time, we really need to listen to each other. There are some Democrats with some good ideas. There are some Republicans with some good ideas. I think my health care proposal, patient-centered

health care, patient-controlled health care, is a great idea. It's a good bill. It would score if CBO had not become a lapdog for the Democratic leadership.

I have been trying for 2½ months to get that bill scored, and I'm told over and over again they don't have time. They run in the Baucus bill that wasn't even a bill. It was a plan. I was told unless you've got a bill you filed, we will not, cannot do a score. Oh, no, not the Baucus bill. They run in and it's a plan, just an outline, and they give him a score on it. I mean how fair is that that this government has got gotten so slanted and people are getting hurt? It isn't right and it isn't fair. And something this important is going to be rushed through.

I heard my friend from North Carolina discussing this earlier today about the time that's been allotted and what's going on. I would like to yield to my friend Ms. FOXX.

Ms. FOXX. Thank you, Congressman GOHMERT. I still don't think you and I sound a lot alike, although people say that. You definitely have a Texas accent, and I know I don't have an accent from North Carolina. But I want to thank you for the leadership you've given on this issue. I know you've been here several nights, late at night, talking about the issues that the American people need to know about. It's so difficult to get the information out to them, and I appreciate what you're doing.

I find it very ironic that we are a couple of days away from Halloween. I'm not a great phrase maker, but today it hit me that we really need to talk about this in terms of Halloween.

This bill that Speaker PELOSI has introduced today is a tax increase bill masquerading as a health reform bill.

In this time of Halloween, the kids get really concerned about monsters and get afraid of them. But I want to tell you there is no scarier monster that has ever been conceived of by cartoon people, by movie people, than this 1,990-page bill. It is a monster. It is a monstrosity. It is something that should scare every American to death. It is frightening to me, I can tell you that.

I think my colleague from Texas has done a very good job of framing how a bill should come to the floor. Bills that are thoughtfully done go through subcommittees. People get a chance to debate them, look through them, find things that are not as well defined as they should be. We vote. That's the way legislation should be done, on a bipartisan basis, bringing in everybody's brain, bringing in everybody's aspect about it, and making sure that when we pass something, it's going to be as well thought out as it can possibly be, "vetted" sometimes it's called. That's what we should be doing.

□ 2045

But that is not what is going to happen with this bill because the President made a promise in his campaign that

he would get passed a health reform bill. The people in this body think that they owe it to the President, not to the American people, their fealty is to a President, to help him meet his campaign promise. That is not where my loyalty lies. It did not lie with the President when we had a Republican President. My loyalty is to the American people. That is where all of our loyalties should be, and this bill is a betrayal of the American people because it takes away their freedoms. It promises something that it isn't. It is worse than a shell game, as I said. It is a tax increase masquerading as a health bill.

The one good thing that we have been able to accomplish with the great help of the American people in recent weeks is to really raise Cain about these bills being crammed down people's throats. So we will have 72 hours to look at the bill. The American people may think that we are not telling the truth. Sometimes the things we say are in the bill are hard for people to believe. The bill will be there and be able to be read, and we will be reading it and looking at every single aspect of it. And I want to encourage other people to do that. We will put copies in libraries. We want the American people to see it. We are not trying to mislead people about what is so horrible about this bill.

You all may remember that the President said in his campaign, "We live in the greatest country in the world. Help me change it." To me that meant take what is good about this country and change it into something that is not good.

This bill will take us down that path very, very quickly. We will be losing our freedoms, and we will be beholden to a government that is not always the most benevolent and will get less benevolent the more power it has.

We have a fundamental difference between the Democrats and the Republicans. We believe that the American people should be in control of their lives. They believe that the government knows best, they and the government bureaucracy. It doesn't matter that the majority of the American people are opposed to this. They believe they have the wisdom and they are going to impose this on the American people.

But not if the American people speak up as they should. We are going to be fighting, as my colleague from Texas has said, we are going to fight every step of the way until there is a vote on this bill, probably next week, but we need the help of the American people to contact your Member of Congress and tell them this is not what you want. This is not what America stands for. This is not what we have men and women fighting for all over this world. They are fighting for freedom. But the greatest threat to the freedom of the people in this country is right here in this room. Ladies and gentlemen, I am not exaggerating. It is right here in

this room, but we can defeat it, as we have before.

With that, I yield back to my colleague from Texas.

Mr. GOHMERT. I thank my friend from North Carolina, and I appreciate so much those insights. How ironic, here we are the last day, the last hour Congress is in session before the witching hour of Halloween, and as Congresswoman FOXX observed, we have a tax bill masquerading as a health care bill.

We have with us a great medical doctor here in Congress, and I want to point out something that affects doctors and ask him to comment, and on such other things as his insights that can be shared.

On page 140 of this new 1,990-page bill, I want to be fair, it is not 2,000 pages, it is 1,990 pages, but on page 140, it gives us some insights on what has been going on behind closed doors, the deal-making. I have heard around east Texas, and these are smart, wise people, we had some insurance companies come out and say they thought that the President's plan was going to be okay. We have had some pharmaceutical companies say it is going to be okay. And the American Medical Association, some of them said it was going to be okay. The AMA represents maybe 17 percent of the doctors, I think. So you wonder what kind of deals got cut behind closed doors.

On page 140 and 141, some insights, because those of us who have dealt with the law have seen medical malpractice cases, I have been a judge over many malpractice cases, and I have had many of them removed from my court, my district court to Federal court, because there are certain types of medical liability cases where when they could get themselves to be considered as falling under the Employee Retirement Income Security Act of 1974, then, boom, they could yank it right out of State court into Federal court, and it was governed by ERISA, the Employee Retirement Income Security Act. And the defense lawyers love to do that, defending the insurance companies, because if they can get a med-mal case to fall under ERISA, that meant that they got it removed to Federal court and they got it basically dismissed, that the plaintiff could get zero damages.

So here we go. How could insurance companies go along with this when it is basically ultimately going to bring an end to private insurance. That is clear. We saw that in H.R. 3200 despite the promises you would never lose your policy. Well, all it would take is if you added one beneficiary to the policy, or if you changed any term or condition. Well, they change every year. So at most, you could keep your policy 1 year and then you fall under the Federal situation.

But here on page 140, it says that in the case of health insurance coverage not offered through the health insurance exchange, and in the case of em-

ployment-based health plans, the requirements of this title do not supersede any requirements applicable under titles 22 and 27 of the Public Health Service Act, part 6 and 7 of subtitle B of title 1 of the Employee Retirement Income Security Act of 1974 or State law, except insofar as such requirements prevent the application of a requirement of this division as determined by the commissioner.

Now most people will read through that, most laymen will read through that and say, I don't know what that means. It sounds innocuous enough. What it means is for that year or maybe a little more that somebody keeps their insurance policy, if the insurance companies are sued, and we had a terrible case that arose, a court room case, where the insurance company intentionally, and there was a smoking gun memo or letter, as I recall, where the insurance company lawyer was saying just hold it up, and as I recall the woman died. And phenomenal damages should have been coming forth from the insurance company, but instead they got it under ERISA in Federal court, and the case got zero damages.

So you think, wow, the insurance companies, that is the deal they made. So they can fall under ERISA, so even when they intentionally deny coverage to someone, they are protected by ERISA. They can deny coverage, they are protected, and they don't have to pay any damages if that ends up falling through, as ERISA has in the past. There is no reason not to believe that is the case.

So the insurance companies got their deals, but they made a terrible deal because they will not be able to stick around very long. Maybe they will be able to stay solvent for a while trying to compete against the Federal Government. They didn't last long in flood insurance.

But, boy, in 2006 we know that the biggest donors to the Democratic Party were the plaintiff trial lawyers. How in the world would they let that go through? Well, they cut a deal with them, apparently, because that is the next page. The insurance company got their deal. They are going to be protected. They can deny coverage. That is how egregious it has been before, deny coverage knowing it is going to potentially kill somebody to deny coverage, but the insurance company is protected. So they got their deal.

And then the next page, it says in the case of health insurance coverage offered through the health insurance exchange, that is the Federal program, the requirements of this title do not supersede any requirements, including requirements related to genetic information, nondiscrimination, mental health parity applicable under title 27 of the Public Health Service Act, or under State law, except insofar as such requirements prevent the application of requirement of this division as determined by the commissioner, and in-

dividual rights, remedies, under State laws shall apply.

So they cut the deal with the insurance company, made them feel really special. And until they go broke because they can't compete with the Federal plan, they may be protected from some of the most egregious insurance decisions. And then on the other hand, you have the trial lawyers, they know ultimately everybody is going to end up on the Federal program. And boy, do they have a deal because this means that they will be able to sue under State law under all of the plans. And that will end up being all of them under the Federal plan. That is the way that this looks to me.

One other thing, and it is a big bill, and this is at page 431 and 432. And this is amazing. This is another perk the trial lawyers got. Having been a lawyer and a judge, I have great respect for the judicial system. When someone has been wronged, rather than an eye for an eye, we allow them to go into court, sue and get damages. There is nothing wrong with that. That is a good system.

But here we are at page 1,431, and it says that the Secretary shall make an incentive payment in an amount determined by the Secretary, and I am sure that is Health and Human Services, to each State that has an alternative medical liability law in compliance with this section.

So under this bill, this is a new expense. New. New money to be spent by the Federal Government. Now will that be new money for health care for seniors? Oh, no, we are cutting \$500 billion out of the seniors' Medicare. This is new money for any State that will follow the rule here on page 1,431 and 1,432, and here is the kicker at subsection 4, you get that incentive pay as determined by the Secretary if it meets these requirements, and that includes the contents of an alternative liability law that are required to get the incentive payments, or in accordance with this paragraph if the litigation alternatives contained in the law consist of certificate of merit, early offer, or both, and the law—and this is unbelievable—the law does not limit attorney's fees or impose caps on damages.

Now, think about the number of States that have been able to save hospitals and save doctors from going out of business so women could get gynecological care, places that hospitals had to close, they came in with tort reform and they were able to open back up and have doctors come in and help because they put caps on damages. And in some places, they put a cap on attorney's fees. We are going to spend Federal dollars bribing every State to get rid of any limit on damages so that the doctors can be tagged. We are going to protect the insurance companies for awhile. We are going to protect the plaintiff's bar permanently. And the doctors, once again, are going to really get hurt.

□ 2100

I know my friend from Louisiana has a reputation as having been a fantastic medical doctor and also knows what it is like to suffer and require treatment himself.

I yield however much time my friend needs and wishes to speak.

Mr. BOUSTANY. Well, I thank my friend. I am amazed at all the reading you have done already with this bill and the scholarship that you have put in today. It says a lot about your character as a judge and a lawyer, having dug into the details of this.

Here we are, talking about the Pelosi health care plan just released today, all just under 2,000 pages of it. I commend my colleague for shedding some light on just a couple of the provisions in this. There are so many unintended consequences, most likely, in this bill, and I have not had the kind of time to go through it that even my colleague has had so far, but we will be reading this bill and going through it very carefully.

Let me just say, before coming to Congress, I practiced medicine for about 20 years. I did open heart surgery, lung surgery, oftentimes doing three and four operations a day, caring for anybody who needed surgical care in my practice, whether they could pay or not. We're dealing with health care, one-sixth of the entire U.S. economy, something that affects every man, woman and child in this country. This is a kitchen table issue, if there ever was one, a very important issue. What gives me great distress is that we're on the wrong path. We're not going to lower the cost of health care for families and for small business owners. In fact, there is nothing in this bill that is going to actually drive down the cost of health inflation. Those increases in premiums, double-digit increases in premiums year after year that families and small business owners are seeing, there is nothing in there that will do this.

The sad thing is, I think Republicans and Democrats could agree on a number of areas where we could work together that would actually make a difference and bring those costs down, yet the decision was made by the leadership to ignore these things. The whole idea was to create a new government plan, sort of modeled after Medicare, based on the same faulty financial footing that Medicare is currently struggling with today, and now we're going to double the liability to the Federal taxpayer based on all this.

This is a huge problem. What we see in this bill are increased taxes for families. The Pelosi health care bill, it's an increase in taxes on families and small businesses. It's an increase in taxes on health plans. It's an increase in taxes on all the research and innovation that have made American health care as great as it is today. Let's face it, we know health care is expensive. It's too expensive. We know there is waste in the system, and those things can be

corrected. But we also know that we have the finest doctors, the finest nurses and the best hospitals, teaching hospitals and training facilities in the entire world. Patients come from all over the world to be treated in the United States, if they're lucky enough to be able to get here. Doctors from all over the world come here to train, to learn the latest techniques. All of that innovation and technology is at risk because of the tax provisions and the punitive approaches taken in these health care proposals. This is going to be a major step backwards.

I can talk about many, many instances where a new technology came out or a new pharmaceutical came out that made a huge difference in quality of life. Initially it was expensive, but with time, the costs went down. There are many, many examples of this. I will give an example. When I was in medical school, preparing to undertake a surgical career, I remember one of the operations we used to do the most was this big operation for ulcers. If you had an ulcer, a lot of times you had complications from that ulcer, either bleeding or you got obstructed in your intestinal tract or you had severe pain or even an ulcer perforated and caused you to get very, very sick, requiring emergency surgery. These were very devastating conditions. We had nothing to treat that, other than to do a massive operation, a major surgery under general anesthesia where you had to take out almost half the stomach and reconstruct all of it. Patients had all kinds of problems afterwards. I will never forget early on in my surgical training when a new drug came out, and everybody thought, Oh, my gosh. This is going to be great. This drug was called Tagamet. The generic name was Cimetidine. Now you can buy it over the counter, but back then it was expensive. Almost immediately upon the release of this drug, we quit doing most of those big stomach operations. We didn't have to do them anymore, except under extraordinary circumstances. So countless numbers of patients avoided surgery and had a much higher quality of life.

Now we've seen several other generations of these drugs come about that have made a tremendous difference for individuals, and it's cut the cost of health care. But the Congressional Budget Office doesn't recognize that because it works in an artificial 5-year window. It doesn't work based on the real world, which deals with the lengthy process of doing research and development to get these new technologies and these new pharmaceuticals out.

Think of coronary stents. Back when I started off, oftentimes when someone had a heart attack, they died. We had very little in the way of pharmaceutical treatments for heart disease. If you had blockage, there was nothing we could do about it. Then open heart surgery developed with coronary artery bypasses, and it was a big operation.

Then it became more routine and less expensive over time, and patients have done very well following those operations. Then the advent of stents, where you go in, you have a stent put in a blocked coronary, you go home the same day, and you are feeling much better. We can actually stop a heart attack in progress by inserting a stent in a timely manner. Those advancements here in the United States are now being adopted abroad. They've made a huge difference. That innovation is at risk. This bill taxes businesses, taxes families, taxes innovation, taxes insurance plans. What happens when you tax insurance plans? Premiums go up. The CBO and other actuaries have said that on average, premiums for Americans are going to double and in some cases, triple. What's going to happen? That's going to put more of these insurance companies in a bind because their products would become untenable, and we're going to move to a single-payer health care system, run by the Federal Government with all the bureaucracy and the lack of innovation. And that's the goal here.

I can tell you, it is very distressing, as a physician who practiced for 20 years and saw the great things that we could do in health care, but I have also seen the problems. I can tell you, I, myself, have had health problems. I would still be doing open heart surgery and not standing here giving a speech tonight to the United States Congress if I didn't have a health problem. I developed a form of arthritis that basically ended my surgical career early. When I closed my practice down, we had a health plan. I tried to shift from the plan that we had with the same insurance company. We tried to shift from an employer-based plan to a family plan within the same insurance company. They knew everything about my history and records and everything else. Guess what: They denied my entire family and myself coverage, but because I knew how to negotiate within the health care system, I called the insurance company. They said, You have a preexisting condition. I said, I understand that. You have already been helping to treat that, and this is a continuous process. So why not just exclude my condition and at least insure my family? And after a lot of vigorous going back and forth with the insurance company, I convinced them to do that.

Americans should not be denied coverage based on preexisting conditions. Republicans have ideas where we can get the cost of that kind of insurance down for all Americans by creating competition and choice in the insurance marketplace, which this bill does not do. It will limit competition and choice. We can keep those costs down. We can make insurance much more accessible, and at the same time, take what I think our colleague from Texas mentioned earlier, take this kind of an incremental step-by-step approach so

that we don't create unintended consequences—we know what we're getting into—and build a system that's comprehensive that Americans can be proud of.

As my colleague said earlier, we have over 40 bills that move us in that direction. And how many hearings have we had on the Republican bills in the House Ways and Means Committee where I serve? None. None. These ideas have not been discussed, they have not been vetted, and furthermore, a lot of the ideas in this bill have not been thoroughly vetted. That's a problem. That's legislative malpractice in my mind. It's wrong, and the American public deserves better. This health care problem has been going on for too long, and there is a lot that we can do to solve it if we put our heads together.

I know there are some well-meaning friends across the aisle who want to work together on it, and I think that's what the American people want us to do, instead of an ideologically driven approach to a single-payer health care system, run by the Federal Government, which we know is going to run up massive deficits for this country, which we already are seeing now. It's going to stifle job growth, and it's going to hurt the American economy.

With that, I will yield back to my friend.

Mr. GOHMERT. I thank you, Dr. BOUSTANY, so much. You've provided so much insight since you've been in Congress. You've been a breath of fresh air. Especially for someone who has been on the other side of the insurance company, has been paid by the insurance company, has performed surgery saving lives and has been on the other side of the doctors providing the treatment. That provides an awful lot of wisdom, and I am so grateful that that wisdom from the gentleman from Louisiana, Dr. BOUSTANY, is being brought here to the House of Representatives.

I tell you, though—maybe it's part of my background, having been a judge for so many years—you look for evidence to help you know whether to believe or disbelieve what people are saying. As I have listened to our friends across the aisle—not all of them, but many of them that were pushing this bill, this 1,990-page bill—they knew it was going to be coming. We didn't know what was coming or when it was coming, but some of them knew. Knowing that, they have been coming down to this floor, coming to these microphones here and telling horror story after horror story about something that happened because of an insurance company, because of a doctor, because of bad health care problems. One thing after another, and never, ever having one good story to tell about a doctor who came in in the middle of the night. Like the doctor who saved my daughter's life one night when her temperature spiked to 108. Doctors all over this country, health care providers, nurses, most of them are so dedicated and do a great job, and yet we've not heard one

good story about some success from the incredible health care in this country. Somebody point out one in the RECORD because it is something I didn't hear, and I will apologize. But I have not heard one. That's one of the pieces of evidence you can look to to know that something is being put over here on the American people because they're only getting one side of the story. Not one favorable story. That tells you they're trying to scare people.

And another thing you look at, they're saying they are going to pay for this with waste, fraud and abuse. Hundreds of billions of dollars that will be saved by eliminating waste, fraud and abuse. You mark my words on this: If they could save even \$100 billion on waste, fraud and abuse, it would have been done before now. Those who are not familiar with politics, who are not familiar with the history of our great country, just take a lesson here. Anytime anyone from either party—any party, Independent or whomever—is elected, comes into office and cuts out massive amounts of waste, fraud and abuse within the government system, they can be elected as many times for as many offices as they ever care to run for. Nobody is ever going to beat them because they will always be able to show, Look at the waste, fraud and abuse I eliminated. I did that because I cared. And they will win from now on. Well, we've got this being dangled out there. If you'll give us this trillion-dollar bill—trillion-plus, probably, because we've seen how slanted CBO has become in recent days—but if you will give us this trillion-dollar bill, we'll cut out hundreds of billions of dollars in waste, fraud and abuse.

□ 2115

In my courtroom, you would see, through proof, that, if people know that fraud is going on and if they have a duty to do something about it, which elected officials would, and if they do nothing about it, then they're accomplices. Under the Law of Principles under Federal law, under 18 U.S.C. 2, if you aid, abet, encourage, induce, you're as guilty as the principal. So I don't believe they know where hundreds of billions of dollars of waste, fraud, and abuse are.

Let me also mention, you know, I filed a bill. This came after lots of consultation, including from my friends, from my doctor friends here in Congress and from people around. I've talked to all aspects, including to representatives of AARP, who came and talked to me. Of course, if my bill were to get passed, which would eliminate the need for any senior to ever buy supplemental insurance from AARP, it would financially hurt AARP, but it would be so good for their members. You know, they're not going to support that because that takes money out of their pocket.

A big part of my bill has to do with Health Savings Accounts, not the kind that are still around or that were

around previously where you could put money aside pretax and where, if you didn't spend it by the end of the year, you lost it. Huh-uh. We're talking about, in my bill, having a Health Savings Account where you could put money in there pretax, and where it could roll over and grow. If you don't spend it all, it just rolls over and grows. It is yours. It is for health care alone. You have a debit card, and that let's you go into any doctor's office, any hospital, any pharmacy to buy what you need for health care. You use that debit card. Then you buy catastrophic care to cover over that.

Under my bill, employers would still get great tax benefits by buying insurance for their employees, and they would do so by buying catastrophic insurance to cover everything above their Health Savings Accounts, and then they'd put money in their Health Savings Accounts which would be owned by the individual but could only be used for health care. Then we've been told by the statisticians that, as for the kids in their twenties and thirties, as they get older and by the time they get to 65 and get ready to retire, the vast majority will have so much money that they're not going to need Federal Government help. They will not want the Federal Government intervening in their health care because they will be masters of themselves.

In the meantime, to move us to that, I want to be fair to seniors and not promise something that ends up hurting them, like this monstrosity. So, under this bill, we're better off. Since it costs \$10,000, on average, for every household in America to pay for Medicare and Medicaid, we're better off just saying, Senior households, here's \$3,500 in your Health Savings Account—cash—and we, the Federal Government, will buy you catastrophic insurance to cover everything above that. There's no more need for supplemental insurance. None of that. You're good to go. Then that starts getting the young people moving on the road to getting us out of this trap of Medicare.

Under the bill that we have right here, seniors will have a choice. If you want Medicare, stay on it, but when you see your neighbors are better covered and that they control their own destinies in health care, then you're going to want what they have, and then it will go that way very quickly.

I just want to point out one other thing really quickly—another deal that was cut—and I don't have time to pull it out right now and find it, but let me just point out that there was a deal that was cut for pharmaceuticals. The deal is that, under this monstrous Pelosi health care bill, people will no longer be able to buy over-the-counter medication with their Health Savings Accounts. They'll have to buy prescription drugs if they want to use those Health Savings Accounts that are funded by their employers or they'll have to use their own money that has built up over the years.

I've got a good example here. I have this in my pocket because, since I was 8 years old, I've suffered from hay fever. It's Chlor-Trimeton. Years and years ago, it was a prescription drug. Now I can buy it for \$2.34—a big bottle of it. It's embarrassing, frankly, if you get up and your nose starts running. So I have one in my pocket, so that, if my nose starts running, I can take a Chlor-Trimeton so my nose isn't running and so I'm not sniffing here on the floor of the House. Yet, under this bill, I'll have to buy some expensive prescription antihistamine if I'm going to use my Health Savings Account.

That was a deal done, and now we begin to see a little bit. Now that this has come out of the closet, we're beginning to see the deals that were done, and that's one to help the pharmaceuticals.

I will yield to my friend.

Mr. BOUSTANY. I thank my friend for yielding.

I'm really glad that you brought up Health Savings Accounts. First of all, Health Savings Accounts were created by a Republican Congress, so that was one of the things that Republicans did when we were in control of the Congress, among a few other things in health care; but one of the problems we've had with Health Savings Accounts, that I've heard, is that a lot of families can't put enough money into them to really make them meaningful.

You know, I introduced a bill that actually, really, raises the amount of money that you can put into one so that you actually, really, do save money year in and year out and do build savings.

Secondly, when you get to be a senior and when you go on Medicare, you can keep that Health Savings Account and can continue to fund it and can use it for things that Medicare currently doesn't cover. So many seniors have to buy supplemental insurance. You could use your Health Savings Account to fund that. So now you're using pretax dollars rather than really hard-earned, after-tax dollars for that health need. There are a number of other things that families could use these for.

Finally, upon death, you can pass your Health Savings Account on to your family without a tax consequence, and now you're really building savings across generations to take care of our health problems, putting families back in control of their health care destinies rather than, again, a big government, one-size-fits-all-kind of a program, such as what we see with the Pelosi health plan.

I yield back.

Mr. GOHMERT. I thank you for that observation.

That's exactly right. Some people will not be able to put money into the Health Savings Accounts, and those will be people we will be able to help as the Federal Government, and it will be cheaper to do that than to keep going bankrupt, which is where we're going. The projection is, by 2017–2018, we're

going to bankrupt America with Medicare. Why wouldn't you try to do something to rein that in?

Let me just say I disagree with what the President has done. I've been in the Army. I've seen how commanders agonize, and I know General McChrystal was handpicked. He went over there. He gave the President his assessment. We really need at least 40,000 troops. It's very plain. You either put them in there or we're going to lose this war. Now, to me, that seems like that ought not to require more than 72 hours once you get that general's report. My goodness.

He says, The guy I handpicked, if we don't give him 40,000 troops quick, then we're going to lose the war.

That's very clear. He didn't take 72 hours. He is taking 60 days or more and counting. We've got 60,000, 70,000 troops or so over in Afghanistan who are waiting with bated breath to know what the President is going to do, and so are we.

This bill here will affect over 300 million people's lives and the lives of generations to come. We don't get the 60 days that the President has taken to make sure he gets it right. We're told we get 72 hours. You're not going to have time to find all the pitfalls that we've put in there. We're talking about the future of this country and about future generations. They are owed so much better, not because they've done anything to deserve it, not because we've done anything to deserve the blessings that have been heaped upon us, but because those who went before us made the sacrifice of life—of their fortunes, of their sacred honor—and that's why we reap the benefits we do. We owe it to future generations because of what the past generations have done for us, and that is what we have to do.

It breaks my heart to close out this congressional session. We're going home, and the President will make a lot of appearances, and so will Speaker PELOSI. The American people are the ones who are going to get hurt, and the children of the future will get hurt.

Oh, yeah. Congresswoman CAPPs is a very gracious, delightful Member of Congress, but the Capps amendment is in there, so this type of public option will be able to fund abortions. I mean this stuff is here. We need more than 72 hours. We need at least as much as the President is taking to review Afghanistan.

Mr. Speaker, with that, I know my time has run out, so I yield back at this time.

LEAVE OF ABSENCE

By unanimous consent, leave of absence was granted to:

Mr. PATRICK J. MURPHY of Pennsylvania (at the request of Mr. HOYER) for today and the balance of the week on account of the birth of a child.

SPECIAL ORDERS GRANTED

By unanimous consent, permission to address the House, following the legislative program and any special orders heretofore entered, was granted to:

(The following Members (at the request of Mr. MELANCON) to revise and extend their remarks and include extraneous material:)

Ms. WOOLSEY, for 5 minutes, today.

Mr. CUMMINGS, for 5 minutes, today.

Mr. DEFAZIO, for 5 minutes, today.

Ms. KAPTUR, for 5 minutes, today.

(The following Members (at the request of Mr. POE of Texas) to revise and extend their remarks and include extraneous material:)

Mr. GINGREY, for 5 minutes, today.

Mr. WESTMORELAND, for 5 minutes, today.

Mr. HUNTER, for 5 minutes, today.

Mr. BISHOP of Utah, for 5 minutes, today.

Mr. DEAL of Georgia, for 5 minutes, today.

Mr. BURTON of Indiana, for 5 minutes, November 2, 3, 4 and 5.

Mr. MORAN of Kansas, for 5 minutes, November 2, 3, 4 and 5.

Mr. POE of Texas, for 5 minutes, November 2 and 5.

Mr. JONES, for 5 minutes, November 5.

Mr. KIRK, for 5 minutes, today.

Ms. ROS-LEHTINEN, for 5 minutes, November 2 and 3.

Mr. DANIEL E. LUNGREN of California, for 5 minutes, today.

SENATE ENROLLED BILLS SIGNED

The Speaker announced her signature to enrolled bills of the Senate of the following titles:

S. 832. To amend title 36, United States Code, to grant a Federal charter to the Military Officers Association of America, and for other purposes.

S. 1694. An act to allow the funding for the interoperable emergency communications grant program established under the Digital Television Transition and Public Safety Act of 2005 to remain available until expended through fiscal year 2012, and for other purposes.

BILLS PRESENTED TO THE PRESIDENT

Lorraine C. Miller, Clerk of the House reports that on October 29, 2009 she presented to the President of the United States, for his approval, the following bills:

H.J. Res. 26. Proclaiming Casimir Pulaski to be an honorary citizen of the United States Posthumously

H.R. 1209. To require the Secretary of the Treasury to mint coins in recognition and celebration of the establishment of the Medal of Honor in 1861, America's highest award for valor in action against an enemy force which can be bestowed upon an individual serving in the Armed Services of the United States, to honor the American military men and women who have been recipients of the Medal of Honor, and to promote awareness of what the Medal of Honor represents and how ordinary Americans, through courage, sacrifice, selfless service