

VETERANS' SMALL BUSINESS ASSISTANCE AND SERVICEMEMBERS PROTECTION ACT OF 2009

(Ms. JACKSON-LEE of Texas asked and was given permission to address the House for 1 minute.)

Ms. JACKSON-LEE of Texas. Mr. Speaker, I rise to support H.R. 3949, which was on the floor of the House today. I was delayed in coming to Washington because I was meeting with my union members to talk about jobs. Yet I am excited about this legislation that Chairman FILNER has brought to the floor, and I thank him for his leadership, which involves protecting and providing for servicemembers. There are currently 25 million veterans—1,630,000 in Texas with 34,000 veterans living in my community.

I am very proud that he put into the bill my vision impairment bill, which will provide for scholarships to help train those who can work with the visually impaired service veterans, many of whom have suffered from the IED explosions in Afghanistan and Iraq.

It would also protect parents who can be buried with their children. It will keep servicemembers from being evicted or from being foreclosed on when they're serving in Iraq and Afghanistan. Then of course it will provide for small businesses of veterans preferred to be on the list so that they can obtain businesses or business opportunities in the United States Government.

This is very important for the upcoming Veterans Day. We must celebrate our veterans, and I am very grateful that my vision impaired bill is in this bill, H.R. 3949.

RECOGNIZING NOVEMBER AS AMERICAN DIABETES MONTH

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

Mr. PAULSEN. Mr. Speaker, I rise tonight to call attention to November as American Diabetes Month.

Today, 24 million Americans have diabetes, and in this 1 minute that it takes me to give this speech, three more Americans will be diagnosed. The rate of diabetes cases is definitely on the rise, and it is becoming more severe. Based on our current trends, one out of every three children will eventually suffer from diabetes. Unlike cancer, heart disease and strokes, the death rate due to complications from diabetes has actually increased.

Diabetes not only exacts great personal harm; it imposes financial harm as well. Diabetes in the United States costs \$174 billion annually, and the cost of caring for someone with diabetes accounts for \$1 out of every \$5 in total health care costs.

Changing this trend begins with raising awareness about diabetes. So, Mr. Speaker, let's all commit to doing more to educate Americans on the seriousness of this disease.

THE PELOSI HEALTH CARE BILL

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

Mr. BURTON of Indiana. Mr. Speaker, this is the Pelosi health care bill: 1,990 pages. Nobody in this place has even come close to reading it. In addition to that, it costs \$2.25 million per word. That's per word. There are almost 3,500 "shalls" in there, and a "shall" is a mandate that Congress do something. Nobody has read this thing. It's going to cost all this money.

Members of Congress can exempt themselves from being involved in the public option. Every time you go to a town hall meeting, the American people say, Are you guys going to be included? Well, this bill says you don't have to be included if you're a Member of Congress because we're more important than the guy on the street.

You know, this is just a terrible, terrible bill; and the people of this country don't want it passed. I've had five town hall meetings, and the people overwhelmingly are opposed to this thing. They want us to solve the problems of health care. They want us to do it in a responsible way, but they certainly don't want this thing, and this doesn't even include the manager's amendment. This is a bad bill, and it should be defeated.

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SPECIAL ORDERS

The SPEAKER pro tempore. Under the Speaker's announced policy of January 6, 2009, and under a previous order of the House, the following Members will be recognized for 5 minutes each.

OCTOBER HAS BEEN THE DEADLIEST MONTH FOR U.S. TROOPS IN AFGHANISTAN

The SPEAKER pro tempore. Under a previous order of the House, the gentlewoman from California (Ms. WOOLSEY) is recognized for 5 minutes.

Ms. WOOLSEY. Mr. Speaker, I stood up in the House in late July and said the following words, "Five American soldiers have been killed in Afghanistan this week. That brings the death toll in July to 31, making this the deadliest month for our troops since the conflict in Afghanistan began."

Tragically, Mr. Speaker, July didn't hold the record for long. It was quickly replaced by August as the deadliest month. Now, 55 of our troops have died in October, making this the deadliest month yet.

We can't blame the troops for this, of course. They continue to fight with tremendous skill and with bravery. They do everything our Nation asks of them.

So what's to blame? It's our strategy. It's a strategy which has relied almost exclusively on military action for over 8 years while ignoring the critically

important political, economic, and cultural aspects of the conflict. Yet President Obama is now being urged to double down on the military-only policy that has failed us and send in another 40,000 troops.

If we go down that road, what can the American people expect? They can expect higher troop levels, higher casualty rates, and many years of war that can end up costing us over a trillion dollars. Even if we do all that, the odds will still be stacked against us. That's not a strategy for success, Mr. Speaker. I think we can do better.

If we want to succeed in Afghanistan, we must change the way we do business there. Instead of fighting extremists after they have gotten a foothold, let's invest our resources on what would prevent violent extremism from taking root in the first place. That includes economic development, jobs, reconstruction, education, health care, civil affairs, and diplomacy. All would help stabilize Afghanistan.

Mr. Speaker, a serious commitment to a civilian surge of experts and aid workers to help the Afghan people develop their economy would make a huge difference over there. We must also develop a much better set of rigorous metrics to evaluate progress and report the results to the American people. Then we could develop an exit strategy. We could send the message that our involvement in Afghanistan is not open-ended.

It would also help to reassure the Afghan people that we have no intention of occupying their land, because right now too many Afghan citizens see America as an occupying force. That, more than anything else, Mr. Speaker, is fueling anti-Americanism and the insurgency. We must also do everything we can to assure a credible central government in Kabul to help with humanitarian and other efforts to improve the lives of the Afghan people. These are just some of the elements of smart security that we need to use in Afghanistan.

I have offered a comprehensive strategy for smart security in House Resolution 363, because I firmly believe that it would be a blueprint for victory against extremism in Afghanistan and other parts of the world. Mr. Speaker, by shifting from military power only to smart power, we can help Afghanistan to build a stable and functioning State. We can save the lives of our troops, and we can go a long way toward defeating the extremists who threaten America and the world.

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

(Mr. JONES 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 Indiana (Mr. BURTON) is recognized for 5 minutes.

Mr. BURTON of Indiana. Mr. Speaker, continuing on from my 1-minute I gave earlier, this bill, the Pelosi bill, the Pelosi health care bill that the Democrats are embracing is almost 2,000 pages long. It's going to cost \$2.25 billion for each word, and that does not include the manager's amendment, which we have not yet seen. I imagine it's going to come down probably sometime tomorrow.

As I said before, Members of Congress don't have to enroll in this public option which is in the bill. I hope everybody in America, if they happen to be paying attention—I know I can't talk to them, but if I were talking to them I would say, Hey, ask your Congressman why he is voting for a bill that's going to exempt him and make sure he can join a private health care insurance plan when there is a public option in here that he should be joining just like everybody else has to.

This bill is not going to cost under a trillion dollars as the Speaker has said. If you put the doc fix in there, it's going to cost another \$250 billion. So we are looking at something between 1.2 and 1.3 trillion at a time when we are suffering economically in this country. Unemployment is close to 10 percent. The deficit this year, the deficit this year is already 1.4 trillion, almost three times just what it was last year, and we are going to add this new bill, which is going to cost another 1.2 to 1.3 trillion dollars.

The American people simply don't want it. Let's go into some of the other things that are in the bill, the Pelosi health care bill.

First of all, there is a surtax on small business people. Now, at a time when we have unemployment that's almost 10 percent, this is going to drive additional jobs out of the country offshore or they are going to have to cut back some of these businesses that stay here in America and let people go, which means there will be more unemployment. There is an employer mandate that's still applied to small businesses. Small businesses that have a payroll as low as \$500,000 a year are going to be hit with a tax.

There is a new medical device tax. In Indiana, we have some companies that make medical devices to help people, prosthetic devices, wheelchairs and things like that. There's a new medical tax that's going to be levied on these kinds of devices of 2.5 percent, and that's going to be passed on to people who are suffering from medical problems that need these medical devices. We call that a wheelchair tax that's in this bill.

There's going to be new taxes on health savings accounts. The Pelosi bill eliminates the nontaxable reimbursements of over-the-counter medication from HSAs, HRAs, and FSAs.

There is a new payroll tax, and the Pelosi bill creates a new voluntary payroll tax to fund new long-term care programs requiring mandatory spending, also known as a new entitlement.

Abortions are authorized in a break from the Hyde amendment and other longstanding pro-life policies. The bill includes the Capps amendment to authorize government funding of abortions through the public option. It also establishes an accounting gimmick to justify subsidizing private plans that cover abortion.

Next, Members of Congress, as I said, are exempt. They say that they may—not have to—enroll in the public option. At the same time it says “may” in there, there are 3,425 times in the bill it says you must, shall do something, and “shall” means it's a mandatory. There are mandatory things in here to the tune of 3,425 times.

Doctors reimbursement levels are up in the air. They've got those budget gimmicks that I talked about, which removes the doctor fix, the medical doctor fix of 250 billion, which takes this up to between \$1.2 and \$1.3 trillion.

It reduces affordability credits and instead expands Medicaid. The States are going to love that. They are going to shovel a lot of this onto the States who are already suffering, and they are going to have to raise taxes.

The Pelosi bill reduces the size of affordability credits for patients to purchase the insurance in the exchange and, instead, expands eligibility for Medicaid to up to 150 percent of the Federal poverty level, placing more Americans on entitlement programs at a cost to both the Federal and the State governments.

As I said most States are in the red, and they are not going to like this. Ask any Governor; he will tell you.

This also significantly changes the Medicare part D prescription drug program. The Pelosi bill requires the Secretary of HHS to negotiate drug prices for the prescription drug program. There are also several provisions in the bill that will likely increase seniors' premiums as identified by CBO, including the bill that would force seniors, force seniors, to pay at least an additional 20 percent more for their Medicare prescription drug coverage. That's part D.

These things the American people need to know. This is not a good bill. There is a better way, a better way.

HONORING SENTINELS OF FREEDOM

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

Mr. MCNERNEY. Mr. Speaker, I rise today in support of H. Res. 461, a resolution honoring the Sentinels of Freedom, which passed this afternoon by a unanimous vote when I was coming here this afternoon on the airplane.

Our Nation's veterans made tremendous sacrifices in defending our great

Nation, and they deserve the best treatment upon returning home. Whether it is through education, employment, or health care, no veteran should fall through the cracks.

The Sentinels of Freedom, an organization based in San Ramon and Danville, California, provides opportunities to veterans returning from Iraq and Afghanistan and has demonstrated a commitment to America's heroes that we should all emulate. The Sentinels of Freedom Scholarship Foundation awards 4-year scholarships to severely injured veterans who began their service on or after September 11, 2001.

The program provides veterans with community support and mentoring, help with job placement, financial assistance for rent or mortgages, and continuing educational opportunities. The Sentinels of Freedom has helped dozens of veterans in States across the country, including California, Texas, Colorado, and Wisconsin.

Many military personnel fighting in Operation Iraqi Freedom and Operation Enduring Freedom are returning home with serious injuries that hamper their transition from military to civilian life. It's critical that we have programs in place that will help these veterans receive a quality education, secure a job, stay in their home, and lead a fulfilling life. I have seen firsthand the exceptional work and dedication of the Sentinels of Freedom and the way this organization helps to improve the lives of veterans. This group is a true leader in the community and deserves our highest respect.

I want to thank my colleagues for helping me to recognize and honor the outstanding work the Sentinels of Freedom have performed on behalf of our Nation's veterans.

WOMEN'S INFLUENCE IN HEALTH CARE

The SPEAKER pro tempore. Under a previous order of the House, the gentlewoman from Florida (Ms. ROS-LEHTINEN) is recognized for 5 minutes.

Ms. ROS-LEHTINEN. Mr. Speaker, in many households, women are the main link between our family members and the health care that they receive. Women make the majority of health care decisions for their families. As the mother of two young adults and a new grandmother, I know the many responsibilities placed on women with children. From the time children are born to far beyond when they reach adulthood, a mother's care and advice are never far away. If we are fortunate, eventually we will be the grown children of elderly parents.

In my family, my mother suffers from Alzheimer's, among many other age-related problems. I know the responsibility of caring for our elders. My day would not be complete without at least making sure that I, along with my husband, children, and parents, have and take all of our prescriptions