

health benefits, except for one or two administrators in each city, and Tom's income outside of Habitat was minimal, he lived uninsured for years and died early as a result at age 58.

Steve Ekhome wrote to us concerning Gib Martin of Iowa City, Iowa, who passed away at the age of 37. He wrote to us at the website names of the death dot.com.

Gib was a healthy 37-year-old who was 3 months into a new job, but unfortunately his health insurance didn't kick in until he had been employed there for 6 months.

□ 2130

He never made it. He came down with a cold and then flu, and then he seemed very sick. His mother called us to plead with him to go to the emergency room. He refused because of what it cost. Because of what it cost. His mother found him dead of pneumonia the next morning.

Let's hear from Caitlin Howarth regarding Bob Stimpson of Providence, Rhode Island, who died at the age of 56: Caitlin writes:

Bob Stimpson was my uncle. Just over a month ago, he died of cancer. He'd been getting sicker, but he never went to a doctor because he didn't have health insurance. He was a small business owner. He ran his own restaurant in Providence. He had a teenage son and a wife. He did the best to take care of them and to take care of his own employees. But it wasn't enough to keep himself alive.

And now let's hear from Rebecca Nourse concerning Buz Nourse of Stuart, Florida, who died at the age of 48:

My father was on expensive medications for high blood pressure and high cholesterol. He had no insurance and was not eligible for any programs that would have paid for his medication or reduced their cost. For a time, he borrowed money from relatives to buy his medicine that he needed to keep himself alive. But eventually he decided that if he could not afford the medications on his own, he would do without them. He died of his first heart attack at the age of 48.

Cynthia Lovell wrote to us to tell us about her Uncle Abe of Altoona, Pennsylvania, who died at the age of 64. She wrote:

My uncle Abe worked as a self-employed plumber. Some years he could afford insurance, some years he couldn't. He came down with congestive heart failure, and he couldn't afford the insurance. He kept waiting to see a doctor until he turned 65 so that he would have Medicare. He waited and he hoped. Finally, he got so sick that my other two uncles went and got him. They intended to take him to the emergency room and to pay his bill for him. Both are retired and they're on fixed incomes, but their baby brother was so sick and they were so scared that they figured they would come up with some way to pay his hospital bills. However, my Uncle Abe died in

the emergency room, waiting, trying to get to 65.

Yvonne Hebert wrote to us about Frances Dawson of Long Beach, California. This is what she wrote:

Fran was an RN. She was overweight. She was unable to get health insurance. She was well aware of the need for insurance and had been insured until she and her husband were divorced. She had two teenage children she was trying to raise. Fran became short of breath and went to the emergency room in Long Beach. They explained they couldn't care for her without insurance there, and she went to the Martin Luther King Hospital where people without insurance were being sent for care. Martin Luther King was, and always is, overwhelmed with uninsured people. Fran died there in the emergency room after many hours waiting for care.

I could go on and on and on. We have received hundreds upon hundreds of stories just like these. And I will tell you, you would have to have a hard, hard heart to ignore them.

Now is our chance to do something about it. Now is our chance to see to it that everyone in America can see a doctor if he or she needs to; that everyone in America has affordable, comprehensive, and, most important of all, universal health care.

I'm calling not only upon the Republicans but also the Democrats to ask them to think about why they are here. We are at the decision point. We'll be voting on this bill this week, and the choice is up to us. We can save these people or we can let them die.

I vote for life.

HEALTH CARE REFORM

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

Mr. BROUN of Georgia. Mr. Speaker, our previous speaker went through a long list of Republican districts insinuating that Republicans wanted these people to die, it seemed to me.

I'm a medical doctor. I've practiced medicine for almost four decades. I literally have given away hundreds of thousands of dollars of my own services with no compensation whatsoever to people who don't have health insurance. I'm joined tonight by my good friend and colleague, in fact, one of my mentors, Dr. Phil Gingrey, who is an OB/GYN from Marietta, Georgia, and he and all the other physicians in this body on our side are very, very concerned about the future of our patients and about where we are going as a Nation.

You see, Mr. Speaker, Republicans have offered 53 bills, fixing to be 54 bills with the Republican Conference's bill, that will literally lower the cost of health care, make it more affordable for all Americans.

Our bill will not put people out of work like the Pelosi health insurance

bill that we are going to be voting on very shortly. In fact, it's been estimated by the experts, in fact, Barack Obama's own economic adviser, that 5.5 million people are going to lose their jobs because of the Pelosi health care bill. Mr. Speaker, 5.5 million Americans are going to lose their job that they have today because the Democrats want to force down the throats of the American people a health insurance bill that's not about health care, Mr. Speaker. It's about power. It's about control. It's about taking over one-sixth of our economy.

There are many solutions that Democrats and Republicans alike could embrace. In fact, I've challenged many times one on one and I've challenged publicly and I challenge today Democrats to take a bill that I will give them—they can put their name on it, take credit for it—that will do four things: One is across-State purchasing for individuals and businesses to be able to buy insurance wherever they can find it cheaper in whatever State. The second issue is to have association pools where individuals can come together in an association, and that association can offer anybody that is affiliated with it a health care insurance package or multiple insurance packages that they would have their choice of purchasing. The third thing is to have some stimulation of the States to develop some high-risk pools. In fact, there are several States that have already done this, and they've been very successful in covering patients with preexisting conditions and high-risk medical conditions. And the fourth thing is to have a 100 percent deductibility for all health care expenses for everybody in this country.

Right now businesses get to deduct their health insurance that they provide, the costs anyway. They deduct the costs of the health insurance that they provide to their employees. The employees can get that health insurance as a tax-free benefit, and whatever they pay into it is not taxed. But a small business man or woman, an individual has to pay taxes on their money. They have to buy it with after-tax dollars. That makes it so expensive for individuals and small businesses to be able to buy insurance.

But if a Democrat will pick up that bill and convince Ms. PELOSI to allow us to have a debate on this floor, I will just about guarantee that 177, and I think that's what we have now on our side, 177 Republicans will cosponsor and vote for that bill and the majority of Democrats will vote for that bill and we will pass it into law.

It will make health care affordable for everybody. It won't raise taxes. It will not increase the deficit. It will not do anything to harm our economy. And we could pass that bill. We could pass that bill this week.

I challenge Democrats to take the bill. I will give them the language. I'll give them the bill. All they have to do is write their name into it. I will be the

first Republican cosponsor. They'll drop it in the hopper, and we will have health care insurance financing reform that will make sense on an economic basis. It will put market-based principles into the health care financing system.

You see, Mr. Speaker, we hear people talk, particularly on the Democratic side, about health care as if it's one big monolithic theme, that if people don't have health insurance, they don't have health care. That's hogwash. It's just balderdash. It's hogwash from the first order. It's not true.

I've treated those people. I'm also on the foundation board for St. Mary's Hospital in Athens, Georgia. St. Mary's Hospital is a Catholic East Hospital, and in that hospital the doctors, the nurses, physical therapy people, all the allied health personnel, the hospital itself, treat people without insurance.

You go to any emergency room in this country, Mr. Speaker, and it's filled with people that do not have insurance. In fact, every single individual in this country can walk into any emergency room in this country with an emergency condition and can be seen and treated. Everyone. Every single person in this country has access to health care today.

Not everybody owns insurance, that's true. Why? Insurance has become very, very expensive. I don't think there is a single person, Mr. Speaker, in this body that doesn't want to do something to help people to be able to afford insurance.

But we're going to destroy our economy. We're going to destroy our economy because we are going to spend a trillion, \$1½ trillion, \$2 trillion, \$3 trillion on this government takeover of the health care industry in America. It's going to destroy our economy. It's going to increase the debt, Mr. Speaker, markedly increase the debt.

When President Obama came and spoke in the Speaker's podium to a joint session of Congress, Senate and House Members were here. I was sitting right back there that night. Mr. Speaker, the only person who spoke the truth that night was JOE WILSON. JOE WILSON spoke the truth that night. Mr. Speaker, the Pelosi health care bill is going to be disastrous.

When I graduated from medical school, I took the Hippocratic Oath. It said, "do no harm." Mr. Speaker, the Pelosi health insurance bill is going to do a lot of harm. In fact, people on Medicare right now today are going to be denied lifesaving treatments, lifesaving procedures.

Medicare already today rations care. It tells me and my colleagues when we can put patients in the hospital, how long they can stay there, what services they'll pay for.

Mr. Speaker, we're going to have more rationing of care under the Pelosi health insurance bill. Why? The Pelosi health insurance bill is going to destroy Medicare Advantage, which there are millions of Medicare recipients on

Medicare Advantage today. It's going to destroy Medicare Advantage, and it's going to move those people into the regular Medicare system. We're going to put more people on Medicare. Plus we're cutting the dollars spent on Medicare by \$500 billion. Five hundred billion, a half a trillion dollars is going to be cut out of Medicare.

□ 2145

You're going to put more people on and cut the financing of Medicare.

What does that mean? They're going to have to ration care. And, in fact, the bill itself says that the health care czar—it's called a commissioner in the bill—can establish waiting lists and rationing of care. The bill itself says that. And it's going to absolutely be done. Plus right now today, also, Mr. Speaker, you have doctors all over the country that cannot afford to see Medicare patients anymore. They want to, they're trying to, but they can't afford to, because Medicare today pays doctors and pays hospitals less than it costs them to give the service. I repeat that. Medicare pays doctors and hospitals less today than it costs to deliver the service.

Now if we cut \$500 billion out of Medicare and we put more people on Medicare, what's going to be the result? Not only is it going to be rationing of care and long waiting lines, Mr. Speaker, rural hospitals all over this country are going to go out of business. The long-term result is going to be, we'll have just a few big regional hospitals that are going to be extremely expensive for everybody; and small rural hospitals, small rural communities, even mid size rural communities, are going to be without hospitals, without doctors, without health care in their community.

That's what the Pelosi bill is going to do. This is not about health care with the Pelosi insurance bill. It's about power and control, and it's going to destroy America.

Mr. HOEKSTRA. Will the gentleman yield?

Mr. BROUN of Georgia. Yes, I will be glad to yield. I welcome my good friend from Michigan, Mr. PETE HOEKSTRA, who has been a great spokesman about these issues.

Mr. HOEKSTRA. I thank my colleague for yielding and I think you made a great point. It's not about the quality and the quantity of health care; it's about control. That's why you see such a difference between the Republican proposal and the Democrat proposal. Because the Democrat proposal says we're going to totally wipe, out over a period of time, private sector health insurance and we're going to take the freedom that the American people have to direct their insurance, to direct their health care, and we're going to move it over and we're going to put that responsibility, that authority and that control in the Federal Government.

This is their bill, but that's not all of it. That's their bill. This is their bill.

This is almost all of it. I don't have the last 40 pages that the Speaker added to it last night. But when you're going to take over health care and move responsibility from you and me and our constituents and move it to government, it takes you 2,000 pages to describe what you're going to do, create the 3,000 times where it says the commissioner shall, will or must, because those are new decisions that the Federal Government is going to make and we're not going to make.

If you want to fix health care and address the problems, this is all you really need. That's the Republican proposal.

Mr. BROUN of Georgia. That's the Republican bill.

Mr. HOEKSTRA. The Republican proposal says we want to do tort reform, we want to deal with preexisting conditions, we want to do some stuff with competition and those types of things.

This fixes health care; takes steps toward improving and fixing the problems that we have identified. This creates massive government bureaucracies. This represents a loss of freedom. And this says we're going to fix the problems that are out there.

Mr. BROUN of Georgia. Reclaiming my time, I want to bring up a point just to re-approach something that you brought up that I think the American people need to understand, Mr. Speaker. In that humongous bill that the gentleman from Michigan has his hands on right there, the Pelosi health insurance bill, in that bill it says that by 2013, no one can sell private insurance to individuals or businesses.

Remember when we heard from the President that if you have health insurance and you like it, you can keep it? That's a bald-faced lie, because the bill itself says that after 2013, no one—no one—can sell private insurance to individuals and small businesses.

Mr. HOEKSTRA. They've got to be approved by this new bureaucracy, the czar.

Mr. BROUN of Georgia. That's right.

Mr. HOEKSTRA. So what we've got is this 2,000 pages, but it's still an outline. This outline creates that which is going to make all of the decisions. And when you take a look at all the bureaucracy and paperwork that's going to come out of here, this is only the beginning. This is not the end. This is the beginning of government-run health care in America.

Mr. BROUN of Georgia. I will reclaim my time.

Our previous speaker was just saying that he wanted universal health care. The President himself has said he wants universal health care. Many of the Democrats have said they want universal health care. What does that mean? That means that the government runs all the health care, the socialized medicine, one single insurance company in America, and that's the Federal Government.

I now want to yield to my dear friend, Dr. PHIL GINGREY, an OB-GYN,

graduate of the Medical College of Georgia. We were there at the same time, my medical school alma mater and his, too. Unfortunately, he went to the North Avenue Trade School, Georgia Tech, where I went to the University of Georgia. Dr. GINGREY has been a leader on this issue here, and I will yield to the gentleman.

Mr. GINGREY of Georgia. Mr. Speaker, I really appreciate Dr. BROUN yielding to me. And in reference to the gentleman from Michigan, Representative HOEKSTRA, who just showed that 2,000-page bill and all the bureaucracy that's involved in that, I think it's appropriate for our colleagues to look at this chart that I have here at the desk that Representative HOEKSTRA is helping me hold; and it shows actually the bureaucracy involved in H.R. 3200. That was about a 1,200-page bill. Now the Pelosi health care reform that the Representative from Michigan just showed us, the 2,000-page monstrosity, these 53 bureaucrats, czarocrats, czarinas, whatever, have grown to about 150. And this is what it takes to grow a bureaucracy to have a Federal Government complete takeover of one-sixth of our economy.

And I just think it's appropriate, Mr. Speaker, for all of our Members on both sides of the aisle to understand where the almost \$1.1 trillion is going to in this takeover of our health care system. You've got to feed all these animals in this bureaucracy, every one of these czars.

Mr. HOEKSTRA. Does the gentleman mean it's not all going to health care?

Mr. GINGREY of Georgia. The gentleman from Michigan is absolutely right. It is not all going to health care. And we are proud to be able to present information this evening, Mr. Speaker, a letter from the Congressional Budget Office to Leader BOEHNER, the Honorable JOHN BOEHNER, the minority leader of the House, in regard to the Republican alternative.

Mr. BROUN of Georgia. Reclaiming my time, the Republican alternative that the Democrats say we don't have, but we do, CBO has already scored our alternative. Actually we've got 54 alternatives, but this is one. This is one that the conference, Mr. BOEHNER and the whole Republican Conference, is introducing; and CBO has literally scored the Republican alternative that the Democrats deny we have, and it's that small bill right there on the desk in front of the gentleman from Michigan.

Mr. GINGREY of Georgia. I am holding, as the gentleman said, Mr. Speaker, the letter from the Director of the Congressional Budget Office, Mr. Doug Elmendorf, who says that this Party of No, this Republican Party of No, who has no alternatives, no plan, well, surprisingly, we have a letter from the Congressional Budget Office that says this Party of No has a plan that will actually reduce health insurance premiums by 10 percent across the board.

Mr. BROUN of Georgia. Say that again, please.

Mr. GINGREY of Georgia. And also over a 10-year period of time, saves something like \$60 billion.

Mr. BROUN of Georgia. Please repeat that.

Mr. GINGREY of Georgia. I just want to say that the Republican alternative that we have, and we can talk about some of the specifics of that as we go on tonight in this hour. Tort reform obviously is one of them; allowing people to buy insurance across State lines is one of them; creating high risk pools within the States is another. Again, there are a number of us here on the floor tonight and we can talk about this. But, overall, the CBO report, the all-important, nonpartisan CBO report, says that it reduces the cost of health insurance premiums 10 percent across the board and saves \$61 billion from our deficit over the next 10 years.

Our plan works, and it doesn't break the bank. Their plan breaks the bank, and it is an Edsel. They have paid for an Edsel.

I will yield back to the gentleman that's controlling the time, but it's a pleasure to bring these facts to my colleagues tonight.

Mr. BROUN of Georgia. I thank my friend, Dr. GINGREY from Georgia, for bringing that up. If you wouldn't mind, let's talk about some of the specifics, along with Mr. HOEKSTRA.

But I want to yield to my good friend, STEVE KING from Iowa, who has been very diligent in trying to bring information. In Hosea 4:6 we read, My people are destroyed for lack of knowledge.

The American people really don't have the knowledge about this health care bill that NANCY PELOSI has presented that's going to really destroy our economy. It's going to destroy jobs. It's going to destroy a lot of things. Mr. KING from Iowa has been very vigilant in trying to inform the American people and I thank you, sir, for your effort. I will be glad to yield to you, sir.

Mr. KING of Iowa. I thank the gentleman from Georgia for heading up this Special Order tonight and for covering my back every time that I need it covered. It's a strong sense of duty that he has and a sense of friendship that I feel, and I appreciate it.

I listened to the other doctor from Georgia who showed our poster a little bit earlier, that poster with all of those colored new Federal agencies. That's enough to scare the living daylights out of anybody. But this bill that the gentleman from Michigan has just showed, these 1,990 pages plus 40, if you can stack them all up together, so it's over 2,000 pages. But in that are now, not as the colored chart originally showed was 32 new agencies and some added up to 54, but this 2,000-page bill is 111 new agencies.

I have here a list of them. I'm not going to read them all off because it would put me to sleep before I got to the bottom, but I highlighted just a few of them to give us a sense of what

kind of government bureaucracy and empire building would be launched if the Speaker has her way and socialized medicine is imposed upon America in the form of this bill.

H.R. 3962 has in it a program of administrative simplification. So we have to have a government agency to simplify the government bureaucracy. That's one of those that would be from George Orwell. Another one, Health Choices Administration. It is the scariest. That director of the Health Choices Administration becomes the commissar-isioner that writes all the new rules for everybody's health insurance policy.

Then you have the Qualified Health Benefits Plan ombudsman. Well, that's the person that has to be in between the regular person and the government, because the government will be so complicated that a regular person can't deal with the government. That's why they put an ombudsman in here.

Then you have the Health Insurance Exchange. That's where every new health insurance policy would have to qualify. There is not a single policy out of the 100,000 that are available for purchase in America today that are issued by 1,300 companies in America that the President of the United States, the Speaker of the House or the Majority Leader in the United States Senate can point to and say, that policy will be available in 2013 if a bill passes that goes to the President's desk, because they all would have to comply with new rules to be written later.

□ 2200

Then you have program for technical assistance to employees of small businesses buying exchange coverage. Well, that gives me confidence, having something that long.

Health Insurance Exchange Trust Fund, where the money goes for the new health insurance exchange.

State-based health insurance exchanges.

Public health insurance option.

Oh, yes, the ombudsman for public health insurance option because no regular person could possibly deal with the public health people. They have to have an intermediary called an ombudsman.

The list goes on. Demonstration programs, Center for Comparative Effectiveness Research, Comparative Effectiveness Research Commission to run the center.

Mr. BROUN of Georgia. Let me reclaim my time because you have hit something that we need to flesh out here a little bit. Comparative effectiveness research, now Dr. GINGREY and I know, as medical doctors, we look at comparative effectiveness for different treatment modalities. For instance, for prostate surgery, does surgery work better than chemotherapy or radiation therapy, or does the combination of one or both or all three work best? That is the kind of comparative effectiveness we do in medicine.

But what this comparative effectiveness research is going to do, it is going to look at how to spend these limited dollars that the Federal Government is going to take away from small business and individuals through increased taxes on the middle class, increased taxes on small business that is going to rob people of their jobs, they are going to take the effectiveness of spending those dollars on a young person versus an old person. And the old person is going to get the short end of that stick. That is the reason why seniors all over this country are fearful. And they should be, rightfully so, because they are going to be denied treatments. They are going to have rationing of care.

I see Mr. HOEKSTRA is chomping at the bit. He wants to jump in here. I yield to Mr. HOEKSTRA.

Mr. HOEKSTRA. It is kind of interesting. We did a telephone town hall tonight, and we had a thousand, 1,200 people on the phone. People were asking, When is this bill going to come up?

And we say right now the plan is to have it come up on Saturday.

They say, Why?

The Senate has now said they are not going to vote on this bill, or they are not going to vote on health care reform until when? I think the majority leader has said in the Senate they are not going to do this until after the first of the year.

So we have 1,990 pages, plus 40, we are supposed to not only read this but understand it in 7 days, and we will not have any opportunity to go back to our constituents and say, What do you think of this? Or explain it to them and explain the difference between the two bills, the difference in approaches, government takeover of health care, freedom for you and more opportunity for you to select your health care.

These folks, they are outraged, saying why don't you take an extra week? Why don't you take an extra 2 weeks? We are supposed to be home next week for Veterans Day, why not schedule a whole series of town hall meetings? We saw some of the impact of this yesterday where people from around the country sent a clear message to the White House and to the leadership of this Congress saying we don't like the arrogance with which Washington is treating our concerns and our issues. This stuff, we are not going to have an opportunity to provide an insight or a perspective on these bills to our Representatives in Congress. They are just going to ram this through.

The end result is they sent a clear message and they sent it across the country. They sent it in Virginia and New Jersey and in Michigan, all across the country, saying if this is the change that came as a result of the elections last year, we sure don't like it and there is an arrogance that is saying we are going to force this down Congress. We are going to force this on the American people without providing them with the opportunity to provide feedback.

This is why my colleague and all of us are excited about this process, saying if we can't take this bill to the American people, the American people are going to come to Washington tomorrow, and I think my colleague from Iowa wants to talk about this house call that hopefully the American people will participate in tomorrow.

Mr. BROUN of Georgia. I will yield to Mr. KING because he and MICHELE BACHMANN have been right at the beginning of the discussion about the house call on Congress. I am excited about that. As a medical doctor, I made house calls full time. I went to see my patients at their home, at work, wherever they needed to me to come. I did that from 2002 until 2007 I was elected to Congress, so for 5 years I was doing house calls full time trying to take care of the needs of my patients. We are asking people to make a house call on this House. It is absolutely critical.

I yield to Mr. KING.

Mr. KING of Iowa. I appreciate the gentleman yielding.

It works like this. This is the invitation to the American people. There are American people up and down the Eastern Seaboard, there are Americans who have already converged into this city. They are walking around the Capitol grounds tonight. They are here to defend their freedom to own their own health insurance policy, the one of their choice.

What we have seen happen is from the first part of August, Members of Congress deployed out across this country and did hundreds and hundreds of town hall meetings, and hundreds of thousands of people came, filled those meetings up and said I want my freedom. I don't want you taking away my health insurance policy. Eighty-five percent of the people in America are happy with the policy they have. But that was August. This is November. The people that have come back to serve in this House have been caught in the echo chamber, in the Speaker's pressure chamber that says vote for socialized medicine and a national health care act. What changes their mind is when they have to look in the eyes of regular American people, and what we have asked is that America come to this Capitol, fill up these Capitol grounds, fill up this building, be here for a press conference at noon tomorrow over on the West Side of the steps of the Capitol, and we will have there these Members of Congress that are here tonight, MICHELE BACHMANN, TOM PRICE, SCOTT GARRETT, MICHAEL BURGESS, and others, along with Mark Levin, Jon Voight, the actor, and many others. This will be a gathering where we talk about how we preserve our freedom at noon tomorrow on the West steps of the Capitol, and stay on the Hill because you will taken the Hill, and you have to hold it until this bill gets pulled down.

Mr. HOEKSTRA. As we were meeting in a Member's office last night we got

a call, and it was two people from Oregon saying, We are coming. We will be there on Thursday. So late Tuesday night, they were wondering what can we do to have an impact.

I think another one of our colleagues reported, because we really don't know how many people are going to show up tomorrow. Yesterday he said there are 10 buses coming from New Jersey. Tonight he said 24 buses are coming from his congressional district in New Jersey tomorrow to be here with us. We don't know exactly what is going to happen, but it is a clear indication that in 4 or 5 days, we have touched people around the country who want to come to this press conference or some call it a rally, or whatever. But it is a press conference.

We have touched people from around the country. They came here in August. They came for the tea party and those types of things. This is another opportunity to express our opinion, and hopefully by coming to the Capitol and meeting with our Representatives, they will finally get the message that we want freedom, we don't want government health care.

Mr. BROUN of Georgia. I will reclaim my time here. I have been trying to gear up people all over the country, trying to light grass fires with grass root support against the Pelosi health care bill. In fact, I carry a copy of the Constitution in my pocket.

Mr. HOEKSTRA. If the gentleman would yield, I don't think that is the Constitution. That can't be the Constitution. I mean, if that is the framework for how we run this country, if it takes 1,990 pages to do health care, it ought to take at least 20,000 pages to be the Constitution. How many pages are in the Constitution?

Mr. BROUN of Georgia. This is not only the full text of the Constitution, but it is every single amendment that has ever been made to the Constitution, plus it has the entire text of the Declaration of Independence in this little book.

Mr. HOEKSTRA. When you are talking about freedom, it doesn't take very many pages, does it?

How many pages?

Mr. KING of Iowa. Forty-six pages.

Mr. HOEKSTRA. I think the point is made when you are talking about freedom, it doesn't take a lot of pages. When you are talking about government control, it takes a lot of pages and a lot of bureaucracy.

I thank the gentleman. You made a great point.

□ 2210

Mr. HOEKSTRA. You made a great point.

Mr. BROUN of Georgia. Well, I point out, too, with this document, the beginning of this document starts with three very powerful words, "We the People." It is time for America to take this country back, to take their freedom back, to fight for liberty. And that's what this House call on Congress

is all about is for the people to come here and take America back, to make sure that they have good quality health care continuing, and lower the cost of insurance so that people can afford insurance.

We have been joined tonight by another good friend of ours, a freshman Member that came in with me. He was elected in a special election when I was in the last Congress, so he is serving his second term now as I am, Mr. STEVE SCALISE from New Orleans, Louisiana. But he has been actively trying to inform the people about how awful this is.

I thank you for joining us, and I yield to you, Mr. SCALISE.

Mr. SCALISE. I thank the gentleman from Georgia for yielding and for taking leadership in tonight's discussion that we're having, this House call, as we're trying to continue to go through this debate on health care.

When you showed that important document—what I think is the second most important document ever written since the Bible—the U.S. Constitution starts with those powerful words in the preamble, “We the People.” Last night, we heard what the people said in those two elections in both the State of Virginia and the State of New Jersey, where the people very vocally said they don't want this kind of rampage to socialism, they don't want this massive government takeover of all aspects of their life when they spoke in those two elections last night. Unfortunately, Speaker PELOSI has not heard that same message.

When we talk about health care, all of us agree we need to reform things that are broken in health care, but I think those of us here tonight would all also recognize that many things about health care in this country make this the best medical care system in the world with some problems, and so you should go and fix those problems. And what is Speaker PELOSI's answer? It's a 1,990-page government takeover of health care.

We have gone through and we have broken this bill down, and we have seen so many bad things that would actually make health care worse. First of all, we have seen \$700 billion in new taxes on American small businesses and families. We've seen \$500 billion in cuts to Medicare in this bill. And if you go through this bill, with all of the regulations and the czars and the different things that take away components of health care that people like and want, one thing we do see is the real cost of this bill. It adds up, with over \$1 trillion of new spending. The real cost of this bill is over \$530 million per page.

When you look at a bill this big, 1,990 pages, you know, people ask me, what is \$1 billion? When you hear of all the ridiculous, outrageous spending in Washington and trillions of dollars being thrown around left and right, people say, What is \$1 billion? Well, you can just take pages one and two of Speaker PELOSI's bill. At \$530 million a

page, these first two pages right here add up to over \$1 billion in spending on health care that doesn't do anything to improve health care.

What we have done is we have gone through and come up with a common-sense alternative. It is going to be filed in response to this bill, but it's a representation of legislation we have been pushing for months to actually fix the problems in health care. And those problems are:

Preexisting conditions. We would all agree that it's not fair that somebody is discriminated against because they have a preexisting condition. We address that in our bill.

People should be able to have portability so that if they leave a job, they can take their health care with them. We address that in our bill.

We should have commonsense medical liability reform so that people don't have to go through all these invasive tests, as you know, Doctor, that people have to go through where about one-third of all the tests and procedures that are run are just strictly defending against frivolous lawsuits.

And then you look at this bill, the 1990-page bill, this could be called the “trial lawyer protection act” because there's not one page dedicated to commonsense legal reforms. So we save hundreds of millions of dollars to lower the cost of health care in our bill. In fact, the CBO has now scored our bill and said that it would reduce health care premiums by at least 10 percent and save billions of dollars in deficits that we wouldn't have to pass on to our future generations.

So our bill lowers the cost. It addresses preexisting conditions. It allows portability and buying across State lines, and it lowers the cost of health care while lowering the deficit. Their bill has \$700 billion in new taxes. It has \$500 billion in cuts to Medicare, and it makes health care in this country worse. Two very different approaches to this health care issue.

Mr. HOEKSTRA. If the gentleman would yield, what is the other document in front of the gentleman here?

Mr. SCALISE. And as my friend from Michigan points out, we do have another document here, and that is the United States Constitution. I think the most dramatic contrast is when you take Speaker PELOSI's approach to health care—20 pounds, by the way, and I've carried this thing around enough to know it is about 20 pounds of paper—and yet you take the U.S. Constitution and contrast it to this massive document of 1,990 pages—and this is the founding document of our country—we don't need a government takeover of health care. We need to fix the problems that are broken. We don't need to break all the things that make medical care great in this country.

That is why I thank you for your leadership. We need to continue this debate and encourage the American people to stay engaged because the American people want the problems

fixed, but they don't want the government—that couldn't even run a Cash for Clunkers program properly—to be taking over their health care and interfering in that relationship between the doctor and the patient.

I yield back.

Mr. KING of Iowa. Will the gentleman yield?

Mr. BROUN of Georgia. I will reclaim my time, and then I will yield to you, Mr. KING, in just a moment.

Frankly, if you look at that document, the small one that you just dropped down, the Constitution of the United States, you won't find any constitutional authority in that document—none—where the Federal Government has the authority, where we in Congress have the authority to take over the health care system of America. There is absolutely zero constitutional authority for that big bill, none.

But I also want to remind the people in America that this is not about health care. That bill is really not about health care either. It's about power and control, and it's about health insurance. It is creating a big government insurance company that is going to be subsidized by taxpayers. The bill itself is going to pay for abortions—taxpayers are going to be paying for abortions. The bill itself is going to give taxpayer-funded free health insurance to illegal aliens in this country.

We have tried, as Republicans, to change those in that humongous, outrageous bill. The Democrats have over and over again blocked every attempt we've put forward to try to make at least a little modicum of sense to that bill, and they blocked it over and over again.

It's about power. It's about control. It's about establishing a government insurance program that's going to take people's choices away. It's going to take their liberty away. It's going to take jobs away. It's going to take money away.

I yield to Mr. KING.

Mr. KING of Iowa. Before the gentleman from Louisiana gets off the floor, I wanted to just make a point in all fairness to the very sharp attorney from down there in Cajun country whose hospitality I have enjoyed. There is a little bit of a technicality in the presentation, and that is that the Pelosi bill actually does address some tort reform by establishing some new grant programs at the State level. But the caveat is that it is conditional to—those laws that they might set up at the State level can't limit attorneys' fees and they can't impose caps on damages. So if you can't cap damages and you can't limit attorneys' fees, then simply there can't be reform, and this is more gobbledygook Orwellian speak. It is in the bill, a matter of technicality. But functionally, I agree with the gentleman from Louisiana. I wanted to make that point.

Mr. SCALISE. If my friend from Iowa would yield through my friend from Georgia, that's one of the reasons we

call this in some ways the “no trial lawyer left behind act,” because this gives a protection to trial lawyers so that they can continue to raise up the cost of health care by forcing doctors to run all of these tests that they know they don’t have to run for the health of patients. And all of us patients have to endure those tests. We have to pay for those tests, not because it’s better for our health, but because those doctors are concerned that they’re going to be faced with these frivolous lawsuits that we protect in our bill. And in fact, they prohibit in their bill those protections to patients.

So that’s why their bill does so many invasive things. It protects the trial lawyers, and it prevents us from trying to address those issues that would actually lower the cost of health care, which is why we’re addressing it in our bill. Unfortunately, they’re blocking it in theirs.

And I yield back.

□ 2220

Mr. KING of Iowa. I appreciate the clarification.

I would point out that the cost of medical liability and the litigation and the defensive medicine is put at 8½ percent of the overall cost of health care in America by the health insurance underwriters. That is a low number compared to some of the other estimates, but the simple multiplier is \$203 billion a year, or over \$2 trillion over the course of this bill over 10 years, that would go to the trial lawyers and to the premiums and to the defensive medicine.

That’s just one of the reasons we’ve got to come in, and we, the people, have to assert ourselves tomorrow at noon at this Capitol Building. The press conference will be on the west steps. It’s a House call. The American people are here. Some are here now. Many are on their way. There will be many here tomorrow who will be surrounding this Capitol and filling up the grounds. They will be claiming their freedom, and they will be making their opinions known to these Members of Congress who are hanging in the middle and who have maybe decided that they are a little more afraid of the Speaker than they are of their constituents, but they like their jobs.

We know that August was effective and that early September was effective, but the energy has gone down. It gets wound up tomorrow, Mr. Speaker. It gets wound up to the maximum here tomorrow.

I’m going to ask people: Come. Come up on this Hill. You take this Hill. Hold this Hill, and don’t give it up until this socialized medicine bill is pulled down.

I yield back.

Mr. BROUN of Georgia. In fact, I will reclaim my time.

Mr. Speaker, a lot of people in this country may be saying, I can’t do it. Congressman KING from Iowa suggests that, but I can’t come to Washington

tomorrow. They may ask what could they do.

What I’ve told people, Mr. Speaker—to many people, I’ve told them, What you can do is you can contact your Congressmen at home. You can contact their district offices. You can go to the U.S. Senators’ State offices. You can visit them. I suggest that people at home go at noon tomorrow to their Congressmen’s offices and say “no” to the Pelosi health insurance bill, “no” to the government takeover of health insurance.

Maybe you’re working and can’t do that, Mr. Speaker. What I suggest to folks is that they get on the telephone and call their Congressmen’s offices here in Washington. Call the Congressmen’s offices in their districts. Email them. Fax them. Contact them somehow.

I’ve reminded people over and over again that former U.S. Senator Everett Dirksen said, when he feels the heat, he sees the light. When he feels the heat, he sees the light. Now, what is he saying there?

What he’s saying is that, when he’s going in one direction and he gets all of these phone calls, letters, faxes, emails—there weren’t emails when Everett Dirksen was around, but when he gets these contacts from his constituents—because Members of Congress want to be reelected usually, and those contacts say, Buster, you’re heading in the wrong direction. Suddenly, they start seeing the light and saying, Maybe I ought to listen to the people who’ve elected me, and maybe I ought to go in a different direction.

So it’s important for the American people, Mr. Speaker, to contact their Members of Congress and to tell their Congressmen that they do not want a government takeover of their health insurance, that they don’t want the destruction of the health care system in America. It’s absolutely critical, Mr. Speaker, for the American people to get actively engaged in taking America back and in making sure that we don’t destroy their health care insurance and the health care system.

Mr. HOEKSTRA is sitting there, just jumping around, wanting to speak, so I’ll yield to Mr. HOEKSTRA.

Mr. HOEKSTRA. I thank my colleague, and I thank him for sharing his copy of the Constitution. We made the point that the Constitution establishing this Nation and the amendments to the Constitution are 44 pages. This is 1,990 pages, but I think more powerful is what this document says.

When you are protecting freedom, it doesn’t take a lot of words. When you’re limiting government, it doesn’t take a lot of words. Think about the difference. This document, the Pelosi health care document, I think, over 3,000 times says “the commissioner shall,” “the commissioner will,” “the commissioner may.” That’s all losing authority.

If you take a look at the Constitution and if you read what the Constitu-

tion says, the Constitution puts limits on what government will do, and it protects individual rights. Here it says that Congress shall make no law a limitation on us—not on the people.

This expands government.

Shall not be infringed. No soldier shall without the consent. The right of the people to be secure against unreasonable searches. No person shall nor shall private property be taken. The accused shall enjoy. This. This document. It protects the American people from invasive and from overintrusive government. That’s what the Founding Fathers thought.

They would be horrified by this bill to see that the commissioner shall develop the health care plans that you and I will have the opportunity to choose from. The commissioner shall establish penalties for those people who don’t buy insurance. The commissioner shall develop this. The ombudsman shall do this. There are no limitations on government in here. This is all about the expansion of government, and our Founding Fathers were all about limiting government. This is night and day. This is 44 pages guaranteeing our freedoms. This is 1,990 pages taking freedoms away.

Many have called and said, Congressman, is this actually constitutional?

Maybe they’ll find a court that says this is constitutional; but in the spirit of the Founding Fathers, they would have been horrified by what this document does and how it limits individual American freedoms.

We’ll have to take a look and see if we can’t—although, I think the people who will be at our House call tomorrow understand this document, and they understand the night and day difference between this document and what Speaker PELOSI is trying to do here with this document in that this shreds the Constitution. It shreds personal freedom. It gives power to Washington and bureaucracies and, in one vote, 16–18 percent of the economy. That amount of freedom moves from our constituents, and it moves to Washington, D.C. It goes flying right through this House, and it goes right into unelected and unaccountable bureaucrats.

I yield back.

Mr. BROUN of Georgia. I’ll reclaim my time.

In fact, those unelected bureaucrats are going to stand right between every patient in this country and their doctors. In fact, it’s unelected bureaucrats appointed by the President who are going to be part of this health care czar panel, as I call it. The commissioner will be appointed and will go through confirmation by the Senate, but the panel will not. They’re going to make decisions about every single health care insurance policy in this country.

So, Mr. Speaker, the American people need to understand very clearly: if they have insurance today that they like, they can forget it because it’s going to be thrown out. The health

care czar is going to establish every single health insurance policy in America.

The President, himself, has said his desire, his ultimate goal, is to completely take over the whole of the health care system and to put it into one single health insurance program, administered by government bureaucrats who are going to make decisions for every single American person. The doctor won't be making the medical decisions. The patient won't be making the medical decisions. The families won't be making the medical decisions. It's going to be a government bureaucrat who's going to be making those.

The American people need to understand that, Mr. Speaker. Are they going to sit back and idly let this happen? Right now, it's slated to happen Saturday night. Saturday night we're supposed to vote on that monstrosity, on what I'm calling a dead, rotten, stinking fish that NANCY PELOSI is trying to force down the throats of the American people. The American people need to say "no," Mr. Speaker.

I yield to Mr. KING.

Mr. KING of Iowa. I thank the gentleman from Georgia.

I wish they'd take that 1,990-page bill—and with the 40-page amendment, it's 2,030 pages—and put it back into the tree. It would have a lot more use there than it does here. I have to call it what it has been called before, especially by the Congresswoman from Minnesota, MICHELE BACHMANN, who called it the "crown jewel of socialism." This is socialized medicine. It's more than cradle-to-grave medicine. It goes beyond the nanny state, Mr. Speaker. This is conception to state-managed death health care that's being imposed here.

As I said earlier, there isn't a single health insurance policy that we know which could qualify beyond 2013. Any policies that are set today, according to this, would be outlawed, and they would have to jump through new hoops that would be written by the new health choices commissioner, the czar—the commissar-issioneer of health choices, I would call him. Yes, he may be confirmed, but it doesn't prevent the President from appointing someone to supersede his power. He has done that a number of times, some 57 times.

This is a call to the House. This is a House call. This is the American people coming here to this Capitol. For months, Mr. Speaker, the American people have said to me, What can I do? What can I do?

□ 2230

I don't always have a good answer. I said write letters, get on the phone and send e-mails. Go to district offices. All that needs to be done.

There are those who already have resigned themselves also. I am not among them. I believe we can kill this bill. And I would draw the parallel of about 3 years ago when there was a comprehensive amnesty bill that was

pushed out of the White House with bipartisan support, and the American people rejected amnesty. A lot of people thought it was all set to pass through, pushed by the White House through the Senate to come over to the House and be passed in a comprehensive amnesty legislation. But the American people rose up and they jammed the switchboards of the United States Senate. And they did it twice that summer. They killed the bill.

We can kill this bill. It doesn't have the greased wheels like the comprehensive amnesty did. This bill is one that is wobbling along like a wounded duck, and it got wounded a lot more when it flew through the flak in New Jersey and in Virginia last night, when the Virginians and the New Jersians stood up and said we have had enough of this growth of government. We have had enough of this debt, that our grandchildren will have to be paying the interest on and that our great grandchildren will have to pay the principle on. We want to maintain our freedom.

That message was resounding out of Virginia. It was resounding out of New Jersey. And it does affect the thought process and the voting of the Members that are sitting on the fence tonight. And the American people that are in this city right now and those on their way will affect the judgment, and they will provide the good judgment for those who are sitting on the fence. Those that are more afraid of their Speaker than they are of their constituents, tomorrow they are going to see the whites of our eyes. They are going to look in the pupils to the soul of the American people that say I love my Constitution and my country and my flag and our history and our common cause.

We do not have a common destiny if we can't maintain our freedom. Already a third of our private sector has been nationalized in the last year. This is another one-sixth. This is 17.5 percent. It does take us over 50 percent.

This is the time, this is the place, this is the "Super Bowl" of our resistance. Take the Hill tomorrow. Hold the Hill until this bill is killed.

Mr. BROUN of Georgia. Mr. KING, I thank you for this effort to get this house call on the U.S. House of Representatives. It is absolutely critical that the American people, Mr. Speaker, understand what is happening here this week and particularly is scheduled to happen Saturday night. It is going to kill 5.5 million jobs if we pass the Pelosi health insurance bill, it is going to kill our economy, and it is going to kill our children and grandchildren's future, because we are stealing with this outrageous spending that the Democrats have been doing under the leadership of Barack Obama and NANCY PELOSI and HARRY REID. We are stealing our grandchildren's future. Their standard of living is going to be less than ours today if we continue down this road.

We have to take America back, Mr. Speaker, and it is up to we people, the

American citizens, the good citizens, freedom-loving citizens, who want to work, take care of their families' needs, and want the Federal Government out of their hair. That is what we are trying to do as Republicans. But the Democrats are trying to socialize this country.

Mr. HOEKSTRA, some people may have joined us since you first started speaking. There are two stacks of paper right there before you, and I want you to please tell the Speaker so that he can pass on to the American people what those two stacks of paper represent.

Mr. HOEKSTRA. We have three.

Mr. BROUN of Georgia. That is not a stack.

Mr. HOEKSTRA. This is the 44 pages that our Founding Fathers put together to establish this country and articulate and lay out the freedoms for the American people. This is a document of freedom.

Mr. BROUN of Georgia. The Constitution of the United States and the Declaration of Independence.

Mr. HOEKSTRA. Right. And this is the document that Republicans have proposed to fix health care, the parts of health care that have been identified as being broken, 232 pages.

Mr. BROUN of Georgia. Reclaiming my time, let's make it clear. That is the Republican alternative that the Democrats keep saying we don't have.

Mr. HOEKSTRA. Right. And then this is Speaker PELOSI's bill, most of her bill, 1,990 pages introduced last week. It doesn't have the 40 pages of the manager's amendment which were added to the bill late last night. This is the document that contains in it the phrase "the commissioner shall" or "the government shall" something like 3,000 times.

The Constitution is all about freedom. This is all about the loss of freedom.

I thank my colleague for doing this session this evening.

Mr. BROUN of Georgia. It is a loss of jobs, it is a loss of everything that has made America great.

I want to thank my friends, STEVE KING from Iowa, PETE HOEKSTRA from Michigan and Dr. PHIL GINGREY from Georgia. This has been I hope an instructive evening for the listeners and for the Speaker, because we cannot let this bill pass. It is going to destroy freedom. It is a steamroller of socialism being driven by NANCY PELOSI. The American people need to put a stop sign in front of that steamroller of socialism.

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. GRIFFITH) to revise and extend their remarks and include extraneous material:)