

Ms. VELÁZQUEZ. Mr. Speaker, I yield myself such time as I may consume.

Mr. Speaker, I know that he didn't read his language in the bill, but perhaps I might help him understand the bill.

SBA doesn't do any investing in this bill. It doesn't pick winners and losers. I reserve the balance of my time.

Mr. GRAVES. Mr. Speaker, I have no further requests for time, and I yield back the balance of my time.

Ms. JACKSON-LEE of Texas. Mr. Speaker, I stand here today in support of H.R. 3738, the Small Business Early-Stage Investment Act of 2009, which establishes the Small Business Early-Stage Investment program to provide equity investment finance to small businesses. I support this resolution because I believe that encouraging small business investment is crucial as the United States emerges from the recent economic downturn.

I would like to first thank my colleague, Congressman GLENN NYE, for introducing this valuable legislation. According to the National Bureau of Economic Research (NBER), the United States economy experienced the longest recession since World War II. As described by the Congressional Research Service (CRS), "this recession features the largest decline in output, consumption, and investment . . . of any post-war recession." The tightened credit markets have caused nonresidential investment to decline by 1.7% in the third quarter of 2008, by 21.7% in the fourth quarter of 2008, and by an estimated 37.9% in the first quarter of 2009, as reported by CRS. The impacts of the tightened credit markets and decline in business investment include the possibility of lenders declining to make loans to small businesses that they otherwise would in a more robust economy and small businesses possibly becoming more risk averse, thereby delaying or aborting projects. The difficulty obtaining investment that small businesses face today could lead to delays in new business ventures.

There are certain business sectors that we rely upon for innovation in order to transform our society. The United States is looking to innovation from the energy technology, environmental technology, and clean technology sectors to lead the way in developing technology that will reduce or eliminate climate change factors while maintaining our standard of living. We are looking to the information technology and digital media sectors to help level the educational playing field and open up the world to all students. If we allow these sectors to recover on their own, we could lose precious time for solving these problems.

H.R. 3738 seeks to reverse the negative impacts of the recession and the subsequent decline in investment opportunities for small businesses in critical economic sectors. While there currently exists a Small Business Innovation Research program established to provide small businesses with venture capital for projects in late stages of development, there does not currently exist a program to provide grant funding for early state research. Particularly, the biotechnology and defense technology business sectors require early stage investment to develop innovative technology. H.R. 3738 will help those and other critical sectors gain access to capital in order to drive innovation.

H.R. 3738 will establish a new program to provide equity financing to small businesses in targeted industries with early stage projects. The Small Business Administration (SBA) will be authorized to provide grants to qualified investment companies, determined by the SBA Administrator, under certain criteria. Any firm that applies for funds must have a 1-to-1 match of private funds. Equity firms that apply for these funds must return the funds in full plus 20 percent. While there is a \$250 million initial appropriation, the program is predicted to be self-sustaining from the profits of the loan program.

My district is the perfect example of why small businesses are so vital to the nation's economy. Houston's newer and growing economic sub-centers have relied more on small business as their cornerstone than the older Central Business District. According to a report issued by the SBA Office of Advocacy, findings suggest that while small firms support urban economic growth, as development proceeds they grow substantially. In turn, small firm growth plays an important role in urban economic development which is likely to lead to economic growth for the entire local economy. I believe that H.R. 3738 will support the small businesses that sustain Houston's economy.

Ms. VELÁZQUEZ. Mr. Speaker, I urge adoption of this bill, and I yield back the balance of my time.

The SPEAKER pro tempore. The question is on the motion offered by the gentlewoman from New York (Ms. VELÁZQUEZ) that the House suspend the rules and pass the bill, H.R. 3738, as amended.

The question was taken; and (two-thirds being in the affirmative) the rules were suspended and the bill, as amended, was passed.

A motion to reconsider was laid on the table.

#### MESSAGE FROM THE SENATE

A message from the Senate by Ms. Byrd, one of its clerks, announced that the Senate has passed with an amendment in which the concurrence of the House is requested, a bill of the House of the following title:

H.R. 3082. An act making appropriations for military construction, the Department of Veterans Affairs, and related agencies for the fiscal year ending September 30, 2010, and for other purposes.

The message also announced that the Senate insists upon its amendment to the bill (H.R. 3082) "An Act making appropriations for military construction, the Department of Veterans Affairs, and related agencies for the fiscal year ending September 30, 2010, and for other purposes," requests a conference with the House on the disagreeing votes of the two Houses thereon, and appoints Mr. JOHNSON, Mr. INOUE, Ms. LANDRIEU, Mr. BYRD, Mrs. MURRAY, Mr. REED, Mr. NELSON, Mr. PRYOR, Mr. LEAHY, Mrs. HUTCHISON, Mr. BROWNBACK, Mr. MCCONNELL, Ms. COLLINS, Ms. MURKOWSKI, and Mr. COCHRAN, to be conferees on the part of the Senate.

The message also announced that pursuant to Public Law 106-398, as

amended by Public Law 108-7, in accordance with the qualifications specified under section 1238(b)(3)(E) of Public Law 106-398, and upon the recommendations of the Majority Leader, in consultation with the Chairmen of the Senate Committee on Armed Services and the Senate Committee on Finance, the Chair, on behalf of the President pro tempore, appoints the following individuals to the United States-China Economic Security Review Commission:

Patrick A. Mulloy of Virginia, for a term beginning January 1, 2010 and expiring December 31, 2011.

William A. Reinsch of Maryland, for a term beginning January 1, 2010 and expiring December 31, 2011.

The message also announced that pursuant to Public Law 95-277, as amended by Public Law 102-246, the Chair, on behalf of the Majority Leader, in consultation with the Republican Leader, appoints the following individuals as members of the Library of Congress Trust Fund Board for five year terms:

Elaine Wynn of Nevada, vice Bernard Rapoport.

Tom Girardi of California, vice Leo Hindery.

#### SMALL BUSINESS HEALTH INFORMATION TECHNOLOGY FINANCING ACT

Ms. VELÁZQUEZ. Mr. Speaker, I move to suspend the rules and pass the bill (H.R. 3014) to amend the Small Business Act to provide loan guarantees for the acquisition of health information technology by eligible professionals in solo and small group practices, and for other purposes, as amended.

The Clerk read the title of the bill.

The text of the bill is as follows:

H.R. 3014

*Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,*

#### SECTION 1. SHORT TITLE.

This Act may be cited as the "Small Business Health Information Technology Financing Act".

#### SEC. 2. SMALL BUSINESS HEALTH INFORMATION TECHNOLOGY FINANCING PROGRAM.

The Small Business Act (15 U.S.C. 631 et seq.) is amended by redesignating section 44 as section 45 and by inserting the following new section after section 43:

#### "SEC. 44. LOAN GUARANTEES FOR HEALTH INFORMATION TECHNOLOGY.

"(a) DEFINITIONS.—As used in this section:

"(1) The term 'health information technology' means computer hardware, software, and related technology that supports the meaningful EHR use requirements set forth in section 1848(o)(2)(A) of the Social Security Act (42 U.S.C. 1395w-4(o)(2)(A)) and is purchased by an eligible professional to aid in the provision of health care in a health care setting, including, but not limited to, electronic medical records, and that provides for—

"(A) enhancement of continuity of care for patients through electronic storage, transmission, and exchange of relevant personal health data and information, such that this

information is accessible at the times and places where clinical decisions will be or are likely to be made;

“(B) enhancement of communication between patients and health care providers;

“(C) improvement of quality measurement by eligible professionals enabling them to collect, store, measure, and report on the processes and outcomes of individual and population performance and quality of care;

“(D) improvement of evidence-based decision support; or

“(E) enhancement of consumer and patient empowerment.

Such term shall not include information technology whose sole use is financial management, maintenance of inventory of basic supplies, or appointment scheduling.

“(2) The term ‘eligible professional’ means any of the following:

“(A) A physician (as defined in section 1861(r) of the Social Security Act (42 U.S.C. 1395x(r))).

“(B) A practitioner described in section 1842(b)(18)(C) of that Act.

“(C) A physical or occupational therapist or a qualified speech-language pathologist.

“(D) A qualified audiologist (as defined in section 1861(l)(3)(B) of that Act.

“(E) A qualified medical transcriptionist who is either certified by or registered with the Association for Healthcare Documentation Integrity, or a successor association thereto.

“(F) A State-licensed pharmacist.

“(G) A State-licensed supplier of durable medical equipment, prosthetics, orthotics, or supplies.

“(H) A State-licensed, a State-certified, or a nationally accredited home health care provider.

“(3) The term ‘qualified eligible professional’ means an eligible professional whose office can be classified as a small business concern by the Administrator for purposes of this Act under size standards established under section 3 of this Act.

“(4) The term ‘qualified medical transcriptionist’ means a specialist in medical language and the healthcare documentation process who interprets and transcribes dictation by physicians and other healthcare professionals to ensure accurate, complete, and consistent documentation of healthcare encounters.

“(b) LOAN GUARANTEES FOR QUALIFIED ELIGIBLE PROFESSIONALS.—

“(1) IN GENERAL.—Subject to paragraph (2), the Administrator may guarantee up to 90 percent of the amount of a loan made to a qualified eligible professional to be used for the acquisition of health information technology for use in such eligible professional’s medical practice and for the costs associated with the installation of such technology. Except as otherwise provided in this section, the terms and conditions that apply to loans made under section 7(a) of this Act shall apply to loan guarantees made under this section.

“(2) LIMITATIONS ON GUARANTEE AMOUNTS.—The maximum amount of loan principal guaranteed under this subsection may not exceed—

“(A) \$350,000 with respect to any single qualified eligible professional; and

“(B) \$2,000,000 with respect to a single group of affiliated qualified eligible professionals.

“(c) FEES.—(1) The Administrator may impose a guarantee fee on the borrower for the purpose of reducing the cost (as defined in section 502(5) of the Federal Credit Reform Act of 1990) of the guarantee to zero in an amount not to exceed 2 percent of the total guaranteed portion of any loan guaranteed under this section. The Administrator may also impose annual servicing fees on lenders

not to exceed 0.5 percent of the outstanding balance of the guarantees on lenders’ books.

“(2) No service fees, processing fees, origination fees, application fees, points, brokerage fees, bonus points, or other fees may be charged to a loan applicant or recipient by a lender in the case of a loan guaranteed under this section.

“(d) DEFERRAL PERIOD.—Loans guaranteed under this section shall carry a deferral period of not less than 1 year and not more than 3 years. The Administrator shall have the authority to subsidize interest during the deferral period.

“(e) EFFECTIVE DATE.—No loan may be guaranteed under this section until the meaningful EHR use requirements have been determined by the Secretary of Health and Human Services.

“(f) SUNSET.—No loan may be guaranteed under this section after the date that is 7 years after meaningful EHR use requirements have been determined by the Secretary of Health and Human Services.

“(g) AUTHORIZATION OF APPROPRIATIONS.—There are authorized to be appropriated such sums as are necessary for the cost (as defined in section 502(5) of the Federal Credit Reform Act of 1990) of guaranteeing \$10,000,000,000 in loans under this section. The Administrator shall determine such program cost separately and distinctly from other programs operated by the Administrator.”.

### SEC. 3. REGULATIONS.

Except as otherwise provided in this Act or in amendments made by this Act, after an opportunity for notice and comment, but not later than 180 days after the date of the enactment of this Act, the Administrator shall issue regulations to carry out this Act and the amendments made by this Act.

The SPEAKER pro tempore. Pursuant to the rule, the gentlewoman from New York (Ms. VELÁZQUEZ) and the gentleman from Missouri (Mr. GRAVES) each will control 20 minutes.

The Chair recognizes the gentlewoman from New York.

#### GENERAL LEAVE

Ms. VELÁZQUEZ. Mr. Speaker, I ask unanimous consent that all Members may have 5 legislative days to revise and extend their remarks and include extraneous material on the bill under consideration.

The SPEAKER pro tempore. Is there objection to the request of the gentlewoman from New York?

There was no objection.

Ms. VELÁZQUEZ. Mr. Speaker, I rise in support of H.R. 3014, important legislation authored by Mrs. DAHLKEMPER to assist our Nation’s small health care providers.

The passage of America’s Affordable Health Choices Act earlier this month marked a turning point in our journey toward lasting health care reform. That legislation promises to break from the status quo, delivering solutions that not only reduce costs but also increase efficiency. These are changes our current system sorely needs. And, Mr. Speaker, reduced costs and enhanced efficiency are two benefits that health information technology already offers.

In big hospitals across the country, electronic medical records are revolutionizing health care. They are streamlining the flow of data, minimizing errors, and improving communication be-

tween medical professionals, and they are doing it all with a click of a mouse. But while HIT offers a myriad of obvious benefits, small medical practices have struggled to adopt this technology. This is because the technology, like most groundbreaking new products, is extraordinarily expensive.

For your average small practice, implementation of HIT runs close to \$100,000. As a result, only 13 percent of single-doctor practices have chosen to purchase technology. This bill ensures all medical practices, regardless of size, can afford HIT. To begin, it blunts product and installation costs by making capital more affordable. It also allows small practices to defer loan payments. That way, these practitioners have the flexibility to bring this system online and reap the benefits before having to shoulder the implementation costs.

Access to capital has always been a key concern for small firms even during the best of times. The current trend in tightening credit and restricting lending has compounded that challenge. Like all small businesses, small health practitioners are feeling the pinch of these tightening credit conditions. This is why this bill is so important. Without it, small practices will be unable to afford HIT. And because the vast majority of Americans patronize small practices, countless patients will miss out on the benefits of a streamlined system.

Only days ago, this body took historic action to overhaul our broken health care system. As we continue to work towards lasting reform, HIT will play a critical role. With this bill, we can increase adoption within the small business community, reducing costs and improving quality for all Americans.

Mr. Speaker, this is an important piece of legislation. It is supported by 23 of the most prominent medical organizations, including the American Medical Association, the American Academy of Pediatrics, the American Osteopathic Association, and the American College of Surgeons.

I thank Representative DAHLKEMPER for her work on this bill. I urge my colleagues to vote “yes.”

Mr. Speaker, I reserve the balance of my time.

Mr. GRAVES. Mr. Speaker, I yield myself such time as I may consume.

Mr. Speaker, I rise today in support of the request to suspend the rules and pass H.R. 3014, a bill to provide financial assistance in the form of loans to install health information technology systems.

Two weeks ago, there was significant disagreement about the health care reform bill offered by the Democrats. Those concerns included the cost impact on small businesses and whether the bill actually will improve the efficiency and efficacy of the health care system at a time of skyrocketing health insurance premiums. One way to improve the efficiency of the health

care system is for physicians and other providers of health care, such as pharmacists, physical therapists, and providers of durable medical equipment, to install health information technology systems.

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Electronic medical records have proven to be an effective tool in reducing medical errors and eliminating unnecessary medical procedures. However, health information technology systems are extremely expensive, particularly for the numerous small businesses such as solo physician practitioners in rural areas to purchase and install such systems.

H.R. 3014 addresses this issue by providing loan guarantees by the Small Business Administration to health care providers that install health information technology systems. The loan process will operate in a manner identical to that of the SBA's 7(a) loan guarantee program. Thus, fees will be charged to borrowers and lenders as they are in the 7(a) loan program.

Testimony before the committee revealed that it takes anywhere from 1 to 3 years for physicians and other health care providers to reach the level of efficiency that they operated with under handwritten systems. Recognizing this, H.R. 3014 authorizes a deferral period in repayment of 1 to 3 years. While there is an additional cost associated with such deferral, this small incentive will pay for itself many times through an increase in efficiency of the health care system without undertaking a government capture of the health care market.

Mr. Speaker, I reserve the balance of my time.

Ms. VELÁZQUEZ. Mr. Speaker, I yield as much time as she may consume to the lead sponsor of this bill, the gentlelady from Pennsylvania (Mrs. DAHLKEMPER).

Mrs. DAHLKEMPER. Mr. Speaker, I rise today in support of the Small Business Health Information Technology Financing Act. This legislation is a vital piece to lowering the health care costs of our country, and a key to making health technology accessible to small business health companies.

While we talk about the high price of health care to hospitals and consumers, we often forget that most doctors and pharmacists work in small groups or as individual health care providers. These small medical businesses are dramatically affected by administrative burdens, which can translate to higher health care costs for their patients.

My legislation creates an affordable path for these providers to make the investment in health information technologies that lower the cost of health care for their patients and for their businesses.

Rural communities, like many of those in my district, often rely on only a few health care providers in the area. These providers—independent phar-

macists, doctors and allied health professionals—struggle to continue providing their services when they do not have the infrastructure and support of bigger hospitals or other facilities. Doctors and practitioners with small practices work tirelessly to keep communities healthy at the most basic level, but the costs to do so can be overwhelming.

The Small Business Health Information Technology Financing Act creates a new loan guarantee program at the SBA that would allow these small pharmacies, small doctors and allied professional offices to purchase health information technology that would drastically improve their businesses and potentially lower the costs to patients. The loan guarantee programs provides a 90 percent guarantee on loan amounts up to \$350,000 for an individual practitioner and \$2 million for a group to purchase cost-saving information technologies which are often too expensive an investment for a small business.

Mr. Speaker, the Small Business Health Information Technology Financing Act will not only lower the administrative costs of health care, it will help bolster small businesses by allowing them access to modern and efficient technologies. My legislation creates an affordable loan program for these providers to make the investment in health information technologies that lower the cost of health care for everyone and improve the health of all. I urge my colleagues on both sides of the aisle to support this small business legislation.

Mr. GRAVES. Mr. Speaker, I don't have any other speakers. I would just like to say that I appreciate the chairwoman's work on this bill and incorporating ideas from our side into this bill. As always, the bipartisan work of the committee is very much noticed and I appreciate that.

I would yield back the balance of my time.

Ms. VELÁZQUEZ. I have an additional speaker. I will yield as much time as he may consume to the gentleman from Rhode Island (Mr. LANGEVIN).

(Mr. LANGEVIN asked and was given permission to revise and extend his remarks.)

Mr. LANGEVIN. Mr. Speaker, I thank the gentlelady for yielding, and I want to commend the sponsor of this act before us today.

Mr. Speaker, I rise in strong support of H.R. 3014, the Small Business Health Information Technology Financing Act. As this Congress is moving aggressively to solve our Nation's health care crisis by establishing universal health care, we are going to have to move aggressively also to look at ways of controlling costs. That really is one of the vital reasons why we have to overhaul our Nation's health care system. Health information technology will be a vital part of the effort to both improve quality and cut costs.

But, of course, with this there will be an up-front cost that many doctors, in particular, are going to have to absorb. We have to work aggressively, I believe, to try to support them in this transition to adopt these new health information technologies. Again, many of these doctors are just, if you will, small businesses themselves. Today, the Congress is debating several bills supporting small business.

In order to create jobs we absolutely have to look to small businesses. In many ways they are the backbone of our economy. Certainly in my home State of Rhode Island that's true, with 96 percent of employers being small businesses. My constituents right now are struggling with a heavy burden of 13 percent unemployment in a State whose recession began almost a year earlier than most of its neighbors, and the need for job creation could not be more urgent.

Many of the new jobs we need will be created through new business endeavors, and that's why this legislation and other pieces of small business legislation that we're debating today are so important. By looking at new business models, we will better target the needs of our communities. We need to help our small businesses grow, keep people employed, and train them for new, sustainable jobs. American prosperity clearly depends on the success of small businesses and the innovative spirit of the American people. I'm certainly committed to bringing relief to Main Street and small businesses that are struggling in our State. Certainly, doctors, as I said, many of them are small businesses themselves, and helping them with the up-front cost of adopting this health information technology will assist them to stay in business. And particularly, as we try to grow our primary care system, this will become more and more important.

I commend the gentlelady for introducing the legislation. I am proud to support it, as I am proud to support all of our small businesses and helping them to stay in business and grow jobs.

Ms. VELÁZQUEZ. Mr. Speaker, I yield back the balance of my time.

The SPEAKER pro tempore. The question is on the motion offered by the gentlewoman from New York (Ms. VELÁZQUEZ) that the House suspend the rules and pass the bill, H.R. 3014, as amended.

The question was taken; and (two-thirds being in the affirmative) the rules were suspended and the bill, as amended, was passed.

A motion to reconsider was laid on the table.

#### PROVIDING FOR CONSIDERATION OF H.R. 3791, FIRE GRANTS RE-AUTHORIZATION ACT OF 2009

Ms. PINGREE of Maine. Mr. Speaker, by direction of the Committee on Rules, I call up House Resolution 909 and ask for its immediate consideration.