

may go to 11 percent; \$56 trillion in unfunded obligations. Countries like China and Saudi Arabia are buying up America and the future of our children; a \$1.84 trillion deficit this year and it may actually go to \$2 trillion; and Standard & Poor's said we may lose our AAA bond rating by 2012.

Now the House Democratic health care reform bill moving through the committee at lightning speed does not include, as CBO said, "the sort of fundamental changes that would be necessary" to reduce the skyrocketing cost of health care spending under Medicare.

This is not going to create jobs; this is going to kill jobs.

THE CURRENT DEMOCRAT HEALTH CARE BILL IS NOT THE RIGHT SOLUTION TO REFORMING HEALTH CARE

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

Mr. BARTLETT. Mr. Speaker, health care costs are increasing at two and three times the rate of inflation. If this continues, it will obviously ultimately consume us; so we have got to do something to reform health care.

But the bill making its way through the committee process can't be the right solution. According to economic modeling by the President's own chief economic adviser, the business tax hikes alone would destroy up to 4.7 million jobs. An independent analysis by the nonpartisan Lewin Group found that 114 million Americans would lose their current health insurance. And the CBO recently noted this health care plan would "probably generate substantial increases in Federal budget deficits."

Mr. Speaker, this can't be the right solution. We can do better. We need to keep working. And please include Republican ideas in this work product.

IN THIS RECESSION AMERICANS ARE CUTTING BACK TO MAKE ENDS MEET; CONGRESS SHOULD BE DOING THE SAME

(Ms. JENKINS asked and was given permission to address the House for 1 minute.)

Ms. JENKINS. Mr. Speaker, this recession has forced Kansas families to change their ways. Folks are cutting back just to make ends meet. Now that's what Congress should be doing here in Washington.

But we aren't cutting back. In fact, the majority says we need a health care plan that will cost us jobs, when actually what we need is to take responsibility for our actions.

We need to rein in spending. We need to reduce the deficit. We need to stop legislation that will add hundreds of billions of dollars to the Nation's debt. We need to empower families to purchase health care that is the best fit

for them, without waiting lines and without mountains and mountains of debt.

I will continue to fight for common-sense solutions. Americans deserve no less.

HEALTH CARE AND PUBLIC OPTION

(Mr. SCHIFF asked and was given permission to address the House for 1 minute.)

Mr. SCHIFF. Mr. Speaker, as a Nation, we spend almost twice as much per person on health care as any other country, or about 16 percent of our gross domestic product. And for all the money that we are spending, our health care system does not produce the best outcomes.

Millions of Americans have no health care insurance and receive their care at the emergency room. Millions more must make the difficult choice of whether to pay their medical bills or pay their mortgage because they can't afford to do both.

I support reforms in the health care package that will bring down health care costs by tying payments to outcomes rather than the quantity of tests being run, by ending the government's overpayment for prescription drugs, by empowering an independent commission to put health care cost reductions before the Congress for up-or-down votes, and by investing in prevention and primary care.

One of the choices that should be made available in the health insurance exchange is a public health insurance option. I strongly believe that the advent of a public plan alongside private insurance coverage would achieve a number of beneficial goals, providing a greater choice to families and much-needed competition with private insurers. The new plan would also use its inherent advantages to control costs over the long term through lower administrative overhead and the ability to bargain for volume discounts.

In order to make sure the public plan has the legs to compete with private insurers, I believe it needs to be available now, not as a fallback, and that we need to allow it access to an established provider network, like Medicare, that will ensure the plan competes on a level playing field.

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DEMOCRATS' HEALTH CARE TAKEOVER—BAD FOR SENIORS

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

Mr. BURTON of Indiana. Mr. Speaker, this is the Democrat health plan, and this over 1,000 pages of legalese is the Democrat health plan.

This thing is really bad for America, but it's even worse for seniors. It's going to result in cuts in Medicare benefits. It's going to destroy Medicare Advantage. It's going to end up rationing health care. And if you don't believe that, listen to what the President said:

"The chronically ill and those toward the end of their lives are accounting for potentially 80 percent of the total health care bill out there. There is going to have to be some very difficult democratic conversation to take place on this."

He's talking about rationing health care and talking about how we're going to deal with these people who are getting a little bit older who need care. But you know what they're going to do to make sure that the seniors are going to be happy? They are going to give them end-of-life counseling. Take away benefits but tell you how you're going to die.

INSURANCE COMPANY PROFITS

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

Mr. STUPAK. Mr. Speaker, right now just about 60 percent of Americans receive their health insurance from their employer. But from 2000 to 2007, the annual health insurance premium for employers and employees rose from \$6,628 to \$12,153. The average worker's share of premiums grew by 116 percent, and the average employer's share rose by 75 percent, while wages only went up 4 percent.

Americans can no longer afford health insurance through the insurance company. In fact, a recent study found that 73 percent of all Americans who seek an individual insurance policy do not end up purchasing one, either because they were turned down due to preexisting conditions or their premiums were unaffordable.

Mr. Speaker, all Americans should be entitled to health insurance. But according to the SEC, Security and Exchange Commission, filings from 2000 to 2007, profits at the top ten publicly traded health insurance companies rose an astonishing 428 percent, from \$2.4 to \$12.9 billion.

Get the excessive profit out of health care. Provide health care for all Americans.

□ 1430

AMERICANS LOSE CONTROL OF THEIR OWN HEALTH CARE UNDER DEMOCRAT PLAN

(Mr. HASTINGS of Washington asked and was given permission to address the House for 1 minute.)

Mr. HASTINGS of Washington. Mr. Speaker, Democrats in this body are negotiating behind closed doors the most sweeping changes to American health care since the 1960s. An article on CNN's Web site today explains the dangers of what happens when one party negotiates with itself in secret.

Entitled "Five Freedoms You Would Lose in Health Care Reform," it explains that under the plan drafted by House Democrats, families will lose choices and control of their health care. According to the CNN story, Americans would, one, lose the freedom to choose what is in their insurance plan; two, lose the freedom to be rewarded for healthy living or pay their real costs; three, lose the freedom to choose high deductible coverage; four, lose the freedom to keep their existing plan; and, five, lose the freedom to choose their doctors.

Americans need more health care choices, not fewer. House Democrats should scrap this plan and negotiate in a bipartisan effort to help increase choices and reduce costs.

COLLUDING TO KEEP HEALTH CARE COSTS HIGH

(Mr. DEFAZIO asked and was given permission to address the House for 1 minute.)

Mr. DEFAZIO. Mr. Speaker, while the Republicans are mounting a fabulous defense of the health insurance industry, the party of do nothing is saying reform and health care is not needed.

They talk about competition, except they ignore the fact that the health insurance industry is exempt from anti-trust law, so they can and they do collude to jack up the rates—two times the rate of inflation. Profits are up 250 percent in the last 10 years, while wages and earnings are down for most Americans and small businesses. But they ignore that little fact when they talk about we can't have a public plan. That would hurt competition. No, it will bring competition for once to the health insurance industry.

Then they forget about a few other things. They collude also to exclude individuals from coverage because you have been sick or you might get sick. Preexisting conditions or anything an insurance company doesn't like, they can deny you coverage, even if you are willing to pay their full premium.

They can and do, insurance companies, their friends, deny people renewals because they had the temerity to get sick after paying their premiums.

The SPEAKER pro tempore (Mr. SALAZAR). The time of the gentleman has expired.

ANNOUNCEMENT BY THE SPEAKER PRO TEMPORE

The SPEAKER pro tempore. The Chair must ask all Members to bear in mind that the principle of heeding the gavel that sounds at the expiration of their time is one of the most essential ingredients of the decorum that properly dignifies the proceedings of the House.

No Member should labor under a misapprehension that ignoring the gavel at the expiration of one's time can be a demonstration of civil disobedience. To the contrary, such a willful discourtesy is an act of stark incivility and has been the object of a formal call to order.

The Chair enlists the understanding and cooperation of all the Members at this point.

WHERE ARE THE JOBS?

(Mr. HELLER asked and was given permission to address the House for 1 minute.)

Mr. HELLER. Mr. Speaker, August 17th is an important date. Yes, it is my wife's birthday. Thanks for remembering that. But it is also the six-month anniversary of the stimulus. Let's go back six months.

Mr. Speaker, remember when the President promised that unemployment, if this bill passed, would not go above 8 percent? Maybe that was hope.

Remember when the Speaker said jobs, jobs, jobs? Maybe that was hope.

Remember when the majority leader said we would see immediate results if this particular piece of legislation passed? They were all hollow promises, hollow promises for bad legislation.

This August 17th, my wife is going to ask: Where are the jobs? I am going to ask: Where are the jobs? Nevadans are going to ask: Where are the jobs? Americans are going to ask: Where are the jobs?

Happy birthday, sweetheart.

ANNOUNCEMENT BY THE SPEAKER PRO TEMPORE

The SPEAKER pro tempore. The Chair will remind Members to address their remarks to the Chair.

HEALTH CARE REFORM WANTED, NOT A REVOLUTION

(Mrs. BIGGERT asked and was given permission to address the House for 1 minute and to revise and extend her remarks.)

Mrs. BIGGERT. Mr. Speaker, I rise today to discuss the health care concerns my constituents shared with me last night at a town hall meeting.

Overwhelmingly, I heard from those who legitimately worry that this proposal will force them from the private insurance they enjoy now. One caller told me that she was able to provide for her medically fragile child only because of her employer-provided health

care, which she described as "expensive, but worth every penny." She fears that under this so-called reform bill, her coverage options would be limited and her child will be denied the care that she needs.

Many of my constituents who are remarkably well informed about this complex legislation are also outraged by its cost. They question how \$1.6 trillion in new spending and 53 new bureaucracies will make health care better. One caller, a Federal employee, was dismayed at the thought of dealing with the same sort of bureaucrats at his doctor's office that he dealt with at his job.

Mr. Speaker, my constituents have spoken. They want commonsense solutions to lower costs, increased accessibility and improved care, and they know that this bill is not it. In short, they want health care reform, not a revolution.

PROPOSED HEALTH CARE REFORM A JOB KILLER

(Mr. ROSKAM asked and was given permission to address the House for 1 minute.)

Mr. ROSKAM. Mr. Speaker, a few years ago I was at a famous Cubs game and watched as the Chicago Cubs were leading up to this crescendo. They were playing the Florida Marlins, and it actually looked for a minute as if the Chicago Cubs were going to go to the World Series. The announcer began to say, Well, there are five outs left and the Cubs are going to go to the World Series, and it got incredibly exciting. And then there was a bobble over in left field, and the rest is history. I mean, the air went out of Wrigley Field like nothing I had ever seen before. Just whoosh.

Well, that is exactly what happened in the Ways and Means Committee when the Director of CBO, the Congressional Budget Office, came in and said, and I am paraphrasing now, the following about the Democrat majority's plan:

Number one, you are rushing this. You haven't given us time to evaluate it; but, number two, there is nothing that indicates that this is going to save money. In fact, it looks like a budget buster.

Again, whoosh, all the energy left the room.

Americans know that we can do better. Americans know this is a job destroyer. Let's do the right thing.

FIXING HEALTH CARE

(Mr. TIM MURPHY of Pennsylvania asked and was given permission to address the House for 1 minute.)

Mr. TIM MURPHY of Pennsylvania. Now, imagine if you called your doctor because you were very sick and immediately he wrote a prescription and scheduled you for surgery and sent you on your way. And you said, But, Doc, I have got a medical file that is three