storms of 2008. We do not yet know the full extent of the damage, but certainly thousands of Haitians have lost their lives, thousands of others have been injured, and many survivors have most likely lost their homes or livelihoods

Despite the devastation that has occurred in Haiti, I am encouraged by the prompt actions of President Obama, Secretary of State Clinton, and other government officials to mobilize available resources and coordinate relief efforts. I urge the U.S. Government, the international community, nonprofit organizations and individual people to take all appropriate actions to respond to this earthquake and help the Haitian people recover from this terrible tragedy.

My heart is with the people of Haiti at this dark hour, and I commit myself to doing everything I can to help them through this terrible disaster.

Ms. WASSERMAN SCHULTZ. Mr. Speaker, it is beyond devastating that our friend and neighbor, the Republic of Haiti, has been hit with yet another terrible natural disaster. My thoughts and prayers are with both the Haitian people during this time of incredible hardship, and my constituents in South Florida whose family and friends have fallen victim to this tragedy.

As you know, the people of Haiti are now experiencing the death, destruction, and aftermath of a 7.0 magnitude earthquake.

Just 600 miles off the coast of Florida, Haiti stands as the poorest nation in the Western Hemisphere. Its nine million people are no strangers to hardship. In its tumultuous recent past, Haiti has experienced violent uprisings and floods that killed thousands of people and wiped out much of their food and infrastructure systems. As a result, they stand at a severe disadvantage and are ill equipped to deal with a tragedy of this scale.

Sadly, many Haitians have been unable to recover from the turmoil of their past, and therefore, remain exceedingly vulnerable to the repercussions of yesterday's powerful earthquake.

Recovery must be our first priority.

I am proud that the United States Government has offered immediate assistance to the people of Haiti.

Both President Obama and Secretary Clinton have pledged America's unwavering support for Haiti during this crisis.

Military officials have said that plans are underway for the hospital ship USNS *Comfort* to dock off the coast of Haiti to assist the sick and wounded.

The U.S. Agency for International Development (USAID) is dispatching a Disaster Assistance Response Team (DART) and has activated its partners; the Fairfax County Urban Search and Rescue (USAR) Team and the Los Angeles County Search and Rescue Team.

We must continue to work with the Obama Administration and federal agencies to help marshal necessary humanitarian relief efforts.

In addition, now more than ever, it is clear that Congress must work to enact Temporary Protected Status (TPS) for Haitian nationals living in the United States.

TPS would allow Haitians to remain in peace and security in the U.S. while the island recovers.

In 1998 the U.S. government set a precedent when it granted TPS to nationals from

Central American countries affected by Hurricane Mitch, and I would like to see the same fairness applied to Haiti.

The United States must continue to provide assistance to bring Haiti out of poverty. I strongly support Congress appropriating robust emergency funds to assist Haiti in the wake of this catastrophe. Such funding is vital to providing stability in that fragile country, and is in our own national security interest.

Mr. Speaker, it is our moral responsibility to help our neighbors in Haiti however we can, and the residents of South Florida can be sure that I will continue to use my position as a Member of Congress to advocate policies that will promote stability and security in Haiti during this time of need.

Mr. RUSH. Mr. Speaker, I rise to bear witness to the reports of the remarkable response I know is taking place in Chicago and other parts of the United States in the aftermath of the 7.0 earthquake that struck Haiti yesterday.

Thankfully, that response is being led by a fully engaged Obama Administration who, right now, is rapidly transporting critically needed food, supplies and relief workers—both civilian and military—in an aggressive effort to save lives within the next, critical 24 hours.

My prayers are with the departed souls who lost their lives, yesterday, and for the families and loved ones they left behind. I pray that their loved ones find the strength to carry on in spite of the horrific circumstances they face.

I come from a city that was founded by a bold Haitian explorer, Jean Baptiste Pointe du Sable. My hope is that the people of Haiti will tap into a boldness of spirit, and determination, that will help them find the collective will to rebuild. My hope and prayer for Haiti is that this nation will emerge even stronger than they were before yesterday's devastation.

I commend CBC Chairwoman BARBARA LEE and the rest of the leadership of this caucus, and others, who are marshalling our combined resources to help the people of Haiti rebuild.

May God bless the people of Haiti and those who are risking their lives to help them.

Mr. CONYERS. Mr. Speaker, I would like to express my deepest condolences to the people of Haiti who have lost family, friends and loved ones in yesterday's earthquake. I understand that the island as a whole has been devastated, and that the capital city of Portau-Prince was particularly severely hit. I greatly appreciate the efforts of the Administration and many non-governmental organizations who are working tirelessly to provide emergency aid and assistance.

However, as I have long worked in partnership with Haiti to assist in the development of the country, I strongly believe that the Administration's efforts to ameliorate the damage suffered by Haiti should not be limited to simply initial emergency response and aid. The recovery of Haiti will be a lengthy process, particularly since yesterday's earthquake served to further exacerbate the existing humanitarian crisis that was the result of crippling damage inflicted by four hurricanes and tropical storms in late 2008. In this environment, Haiti is simply not in a position to adequately provide for the safety of Haitian nationals upon their return to the country from the United States.

Therefore, I will, along with a bi-partisan group of Members of Congress, be asking the Administration to designate Haiti for Tem-

porary Protected Status, or TPS. TPS will allow Haitian nationals currently in the U.S. to remain until this time of crisis has passed and Haiti is adequately able to handle the safe return of its nationals. I hope that the Administration recognizes that TPS designation for Haiti will be a significant step towards rebuilding after yesterday's tragedy. Again, I would like to extend my most sincere condolences to the Haitian people, and reassure them that I will do everything in my power to ensure that the U.S. government will provide any and all necessary assistance towards the rebuilding of Haiti.

Mrs. LOWEY. Mr. Speaker, I rise today with a heavy heart and sincere condolences for the victims of yesterday's tragic earthquake. Yet another natural disaster has devastated this country and its people.

My heartfelt sympathy and prayers go out to the people of Haiti, those injured and unaccounted for, including Americans and U.N. personnel, and those who have lost loved ones.

I commend the swift response by the Obama Administration, especially USAID, the State Department, and DOD, as well as the international community to quickly mobilize humanitarian and disaster relief in a complex humanitarian disaster.

The devastation this earthquake has wrought is particularly tragic for the people of Haiti, who have endured not only destructive storms and hurricanes, but crushing poverty and political turmoil. Americans and people around the world have answered the call to support Haiti with time, talents, and charitable assistance in Haiti's great time of need.

I stand committed to help the Haitian people recover from this disaster through emergency and humanitarian assistance as well as through long-term development assistance. I'm hopeful that a unified coordinated effort, in collaboration with the Haitian people, will result in a successful effort to rebuild their beautiful country.

Ms. LEE of California. I yield back the balance of my time.

HEALTH CARE

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

Mr. NEUGEBAUER. Mr. Speaker, we are clearly in a technical revolution in our country. People now have more information available to them than literally at any other time in probably the history of our country. They know more about what is going on in their government than they ever have before. I think that is one of the reasons we are seeing people all across America rise up and start to make such bold statements and attending these TEA parties and attending these Members that are having meetings in their districts, and they are coming in record numbers.

Back this August, I had an opportunity to have a number of town hall meetings in my district, and thousands of people came to voice their opposition to what they think is happening to

their country, and particularly in opposition to this health care bill.

Every morning, Americans wake up and follow with deep interest public policy issues that we are sent here to solve, and many people watch C-SPAN. I know that when I am back in the district, many people will say, Congressman, I saw you on C-SPAN.

In fact, recently I had a conversation with one of my constituents who lives over in Muleshoe, Texas. She was calling to express her great concern about what is going on to her country, these huge deficits, trillions of dollars of spending money that we don't have, the government taking over the health care, and she was concerned about what is going on. What I learned, as she spoke more and more, she knew a lot about the issues that are facing our country, and she said she picked up a lot of that by watching C-SPAN.

A lot of the viewers that call in to C-SPAN on a daily basis, they'll voice their disappointment or concerns about what is going on in their country, and they'll say, And thank God for C-SPAN.

C-SPAN is kind of the watchdog, the eyes and ears, the vehicle that enables millions of Americans to see what we are up to here in Washington, D.C. Every day, people can view Congress raising their taxes, decreasing their freedoms, forcing business owners to pay more fines. All of this, thanks to C-SPAN, it is here for millions of Americans to see. Except, that is not going to be the case for health care reform in our country.

Mr. Speaker, it is no secret that the majority plans to negotiate the final thousand-page health care bill without C-SPAN cameras present.

President Obama promised when he was running for President that he was going to change Washington. He vowed, at least eight times, that the American people would get to see the negotiations of the health care bill on C-SPAN.

Speaker Pelosi promised that the Democratic-led Congress would be the most transparent Congress in history. She went on to say that the work on the health care bill will be displayed transparently, while simultaneously, unapologetically, denying C-SPAN cameras access to capture the ongoing negotiations.

In fact, those negotiations have been going on somewhere in this building. None of us, very few of us know where, and very few people are in the room making decisions that are going to impact the American people, not for this generation, but generations to come. All of this talk about transparency and openness, yet nobody knows who is actually in the room and actually what is happening.

But we do know what happened when they went into the room, for example, in the Senate and other places: Deals were cut. And I think one of the problems that this majority has and this White House has is they have got a health care bill that is so unpopular that they have to meet in secret to talk about it so that they can cut deals so they can get enough votes to pass it.

Wouldn't it be nice if the American people could experience some of that transparency that the Speaker and the President of the United States promised the American people, that they could be able to see the negotiations.

I had the opportunity to experience what is positive about having these negotiations in a public setting when we did the farm bill a couple of years ago. We sat down at a table. We had Republicans and we had Democrats. The cameras were on. The discussions were frank, they were honest, they were open, and in the end, democracy took its place and a bill was crafted and it was passed by the House and the Senate.

I don't understand why we can't have that same transparency and openness when we are talking about people's health care. Probably one of the most important things to many Americans is the ability for them to have some control over their health care. We have now a bill that is talking about taking over the government and government taking over the health care of our country, yet we are negotiating and debating this bill in the darkness of some room somewhere in the Capitol, and who knows where.

Let's turn the lights on to this debate. Let's turn the lights on in that room. Let's turn the lights on so that the American people can see what is going on as these decisions are being made about their health care. It is too important.

Now, the Democrats are going to say, Yeah, but when the Republicans were in charge, that is the way they did things. Well, that sounds like kind of a schoolyard taunting contest. But the fact is, that is not the truth.

I want you to remember these dates: July 15, 2003, September 9, 2003, November 20, 2003. And you say, Well, what happened then? One of the good things about C-SPAN is they have a great library of American policy and democracy in action. In fact, it is probably one of the most extensive ones in the world, and people can come and research and see actually what did happen on the floor of the House on a particular day.

And what happened on that day was that Members of Congress met to resolve their differences between the House and the Senate version of the Medicare reform legislation that provided medical prescription drug benefits for Medicare recipients. A very important piece of legislation, one that was not without some controversy. The House passed a version, the Senate passed a version, and then, in the light of day, these two versions were negotiated on these days. The American people got to see the discussions that went on and got to see this bill being crafted that eventually became law.

If the Democrats weren't engaging in these backroom deal-making deals, I think they wouldn't mind the lights being turned on. But the problem is that they are cutting deals. And the reason they are having to cut deals is because they are trying to pass a piece of legislation that the American people don't embrace.

Many of us agree that health care needs to be reformed. And my colleagues on my side of the aisle, Republicans, conservatives, have been offering some commonsense ideas that could reform the current system without turning over health care to the government, without limiting patients' rights, and bringing more transparency and making health care more affordable and available and accessible to the American people.

If the President and the Speaker and the congressional leaders are serious about this new era of openness and transparency, then why, Mr. Speaker, why, Mr. President, why aren't the lights on and why aren't the cameras in the rooms so that the American people can see what is going on in their country? I believe they deserve to know.

This is a very important issue to the American people, and I hope that the Speaker and the President of the United States will keep their word and allow the lights to be turned on for this important issue.

It is now my pleasure to recognize the gentleman from Pennsylvania (Mr. Thompson).

Mr. THOMPSON of Pennsylvania. I thank my good friend from Texas for leading this very important Special Order tonight and for yielding.

Transparency and accountability is such an important part of what we need in government. And what I have seen since my election a little over a year ago and when I came to Congress in January of 2009, and especially on every issue, we should have that type of transparency that we are talking about today. In particular, today we are talking about health care.

There are probably few issues that we can deal with as a country and that we can debate and discuss as intimate to our lives as health care. It touches our lives in so many different ways. Plus, it is such a significant part of our economy. The issue of health care is just central to the American people. And for the type of debate—and I use that actually cautiously, that word "debate," because there really hasn't been allowed an avenue of debate.

I thought when I came to Congress I had a responsibility to represent the people that I now work for. When I worked in health care, and I did that for 28 years, I only had one boss. It changed from time to time. Today, I feel a responsibility that I work for 660,000 really smart people, and that is the citizens that live and work in the Fifth Congressional District of Pennsylvania. I came here with a responsibility to represent their needs in the Federal Government, in Congress, in this Chamber, and yet from day one

have been locked out of some of the most important debates that we could be having, that surrounding health care.

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Now I came with some expertise—almost 30 years of serving individuals facing life-changing disease and disability. I happen to believe we have a pretty good health care system, but that we could improve upon it. That the four dimensions of health care that I've dedicated my life as a health care professional working on were increasing access, decreasing costs, improving quality, and strengthening that decisionmaking relationship between the patient and the physician—not having a bureaucrat or the government coming between the two.

I looked forward to that debate, I was pleased when President Obama said that we're going to work on health care. When he said that, I took him at his word. I thought that meant I would be invited to the table. And that is not the case. That has not happened. I actually happen to serve on one of the committees of jurisdiction, the House Education and Labor Committee. The only time I had a chance to even look at that bill was when I was asked to mark it up. When you do bill markup, the bill has been written. That's where you come in and you make the final substantiative changes and you offer amendments. And we did that as members of the Republican Caucus and the House Education and Labor, as did Ways and Means, as did Energy and Commerce. We made amendments in the twelfth hour of that bill's proposal. It had already been written. It had been written behind closed doors. It really was a backroom deal. And all of our amendments were rejected. What minute input we had was rejected.

As I reflect back and I remember 2008, that Presidential campaign year, and well over a half a dozen, eight or nine times, who was then candidate, now President Obama, saying—and it was his idea. He was going to have C-SPAN broadcast the health care negotiations. We were going to provide that type of transparency. Eight or nine times. The documentation is out there. I have watched the video replayed in the national media over the past number of weeks. Yet, despite that, that's not what has happened.

Today, what passed out of the House and passed out of the Senate were written in the Democratic leadership Chambers, both the House and Senate, respectively. Today, we're not even having-not following due process and having a conference committee. This is done over the telephone today, I guess. That means that Members of Congress, I guess, will be telecommuting. Next, we won't need to come to Washington because it looks like it's not a democracy or a constitutional Republic. Maybe it's a dictatorship. Just a handful of chosen leaders at the top dictate what is probably the most important piece of legislation that we could deal with in terms of health care.

Now I'm real proud to have signed on, as my colleagues have, a sunshine resolution by Congressman BUCHANAN from Florida that calls for transparency. I believe there's 151 signatures, cosponsors. It's bipartisan on that bill. It's calling for full transparency when it comes to health care. As of today, we've started working on a discharge petition—a measure that we find is not used very often on this floor. Unfortunately, it does not appear that Madam Speaker is going to bring Mr. Buchanan's bill to the floor to allow the Members of Congress to have an up-or-down vote on whether we want transparency or the American people deserve transparency. I certainly believe they do.

So this discharge petition is a new tool. If we're able to garner 218 signatures, it forces that issue to the floor, of transparency. So I certainly encourage all of my colleagues. I'm very confident that we've got unanimous support on this side of the aisle, and we certainly encourage all my colleagues on the other side of the aisle to sign that discharge petition. The American people deserve to have at least an upor-down vote on transparency when it comes to an issue that is as significant as health care.

Now I do believe that we're probably going to see some type of health care bill that will be back in this Chamber. I suspect, unfortunately, that may happen by the State of the Union address. I happen to believe the President's looking for something like that to speak about as a topic. Unfortunately, imposing that type of an artificial timeframe to continue to compress and to force this through—the American people deserve better. They deserve full debate and full time scheduled for developing this legislation.

I happen to have significant concerns as a health care professional with almost 30 years of experience, tremendous concern, as I look at this bill. I look at cost. The idea behind health care reform was to bring down the cost of health care. What is being proposed in either the House or Senate version doesn't do that. It drives cost up for the average American. One estimate I saw was at least a \$300 increase in health insurance premiums per individual, \$2,100 per family. That's for the average American, driving those costs up. If you happen to be an individual who sacrificed on salary because you wanted more health care benefits from your employer, well, those more than likely will qualify as a Cadillac health care plan. You're going to get taxed 40 percent. Forty percent is what that health care bill is going to be increased. I don't know many employers that can afford to absorb all that.

That's also going to fall back on the true economic engines of this country, which is our small businesses, but also it's going to fall back on employees, individual workers, to make up—to pay

Mr. NEUGEBAUER. Would the gentleman yield?

Mr. THOMPSON of Pennsylvania. I certainly will.

Mr. NEUGEBAUER. The interesting thing, again, about this not being done in the daylight is now we're hearing that the unions have gone over and sat down and cut a deal that if the Cadillac insurance plan was negotiated by labor contract, they're going to be exempted. So the question is that that burden then is going to be transferred more and more and more to families that didn't have a health care plan negotiated by a union. Again, that's the reason, I think, as the gentleman stated, we need to be doing this in the light of day, because the American people need to see what is going on here. And, quite honestly, what is going on isn't necessarily in everybody's best inter-

I yield back to the gentleman.

Mr. THOMPSON of Pennsylvania. I thank the gentleman for that. It strikes me that perhaps we need to bring in a facilitator, given the spirit of the Democratic leaders, and perhaps we could see if Monty Hall-I don't know if he's still alive or not; if he is. perhaps the old game show host from "Let's Make a Deal"—because that seems to be, as I follow this, and obviously it's what's reported in the media and what the Democratic Caucus reports, there's a lot of dealmaking, whether it's a hospital I believe in Connecticut, one hospital being purchased, helped to secure votes; whether it's Nebraska getting an exemption on any future medical assistance increase. Even the Democratic Governor of Tennessee. I love what he called that. I've never met the man, but I have a lot of respect for how candid he is. He called that "the mother of all unfunded mandates." what it does with medical assistance.

I know in Pennsylvania our medical assistance bill, over 10 years, medical assistance is expected to go up, under these Democratic leadership health care bills, \$2.4 billion. We were in a financial meltdown as a State this past year. We went 6 months without a budget because those folks who were serving in the State legislature, the Governor, they couldn't balance the books. They couldn't get the revenue to match expenses. And now we've got this unfunded mandate coming out of \$2.4 billion for the Keystone State. Now that was before, I think, the Nebraska sweetheart deal was made. So I'd be curious to know what portion of paying for Nebraska do the Pennsylvania taxpayers have to make up, because every other taxpayer in America is going to have to make up for the sweetheart deals that are made.

I thank the gentleman, and I'll yield back at this point.

Mr. NEUGÉBAUER. Well, I thank the gentleman. One of the things the gentleman brought up, I think the American taxpayers didn't get the benefit, as someone who, I think you said,

someone with over 30 years as a health care professional and, as you know, in the Congress we have, particularly on our side, we have a number of physicians that have worked in health care, have dealt with Medicaid and dealt with Medicare, have seen the private payment system, all of the existing systems, and bring a huge amount of knowledge to this process, but unfortunately the American people didn't get the benefit from their knowledge, your knowledge. And, quite honestly, it's a shame.

As you said, you have 660.000 customers. Every Member of Congress has about 660,000 people that are looking to them to come up here and have serious discussion, serious debate, and work on things that are good for the American people. It's not good for the American people when very few people sit down and make a decision about something that's going to impact not only my 660,000 people, but yours and the other gentleman from Ohio. This is serious policy.

It's now my pleasure to recognize the gentleman from Ohio, Mr. LATTA.

Mr. LATTA. Well, I thank the gentleman for yielding. I really appreciate him hosting this Special Order late this afternoon. I think it's very, very important that the American people absolutely know what's going on here. As we all were home over the Christmas holidays, I know that I had a lot of events that I had to attend. I don't care if I spoke at a Chamber of Commerce or a Rotary, you name it, people were very, very concerned with what's going on in this Chamber. They're worried about a lot of things. They're worried about the health care that's been passed by this House, they're worried about jobs, they're worried about the cap-and-tax legislation, they're worried about the EPA and other mandates that are being forced down their throats. But I think it's important probably to start off talking about the health care a little bit here.

I don't think there's anybody in this Chamber, there's not one person in this country that would say that we shouldn't do something about having some meaningful debate on health care in this country. But when we're looking at it, what we've seen happening is we've seen, as has been mentioned by my colleagues from Texas and also from Pennsylvania, it's been a one-way street. And the American people don't care for that. They want an open debate, and they want to make sure that they know what's going on.

But as we're talking about this health care, I think it's important that we also hear what the people back home are saying. When I'm home—I represent the largest manufacturing district in the State of Ohio. I also represent the largest agricultural district in the State of Ohio. In 2008, I represented the ninth-largest manufacturing district in Congress. Because of what's happening in this economy, I've dropped to 15. And I don't even want to

know when the next numbers come out to find out where the Fifth Congressional District is located in that long list.

But when I go out and go to the different factories and go to the small businesses, and I really want know what is going on, that's the best way I can gauge what is going on in the economy. When I'm out there—one visit to one factory in particular sticks with me. A gentleman came up to me who was a press operator. He came up and said, I really don't understand what you guys are doing in Washington. And he said, You know, you all talk about health care. If I can't put a roof over my family's head, if I can't put food on that table, why do I care about health care right now? I worry about jobs, and I worry about my job.

And I think that that's something that has been lost in this. I know one of our colleagues from the Senate recently said that maybe in the past year that the Congress here should be really concentrating on not health care but on job creation. Because let's just talk about these jobs and what's happening out there, not just from that individual that works on that factory floor, but just an individual like everybody you know that might work in a factory across this country.

But also I remember walking and being in one of my small business owner stores in the district, and after I was in the store and I bought some things, I was walking out and he said, Can I talk to you for a little bit? We stood out, and it was pretty darn cold that afternoon, but we stood outside for a good long period of time. He said, Let me tell you something. If you all pass this health care legislation, I'm out of business. He said, There's no way. He said, Even though your bill was over 1,000 pages long, and I know that the Senate bill is going to be several thousand pages—a couple thousand pages long-he said, What I've been able to get out of it and figure out in the newspaper, I won't be able to stay in business. He said, Look around here. Look at the people running the cash register, stocking the store in here. They're all going to be without a job. And it's going to be one more store on Main Street USA that's going to be vacant. And we can't have that happen.

I think that what we need to do in this body is really go out and talk to these individuals. I have advocated what we need to do is instead of trying to do a few hearings down here—and I don't think we had enough hearings when we talked about health care and during this debate—I think what we should have done is taken these hearings across America. And we wouldn't have done anything but help the American people to, first of all, have their say in what is going on, and two, that the Members of this body would be able to hear it directly from the American □ 1800

I know when I served in the Ohio Legislature for 11 years—you know, when you're representing the State of Ohio, it's not that large of a State, and many times we would have all of our hearings in Columbus. But many times, we would take our hearings out across what we called the four quadrants of the State and hold hearings in different areas. And that's so that people can actually come nearby to where they live. They didn't have to drive down to the State capitol.

I think that's what we should have done with this whole debate on health care. Let's bring these hearings to the American people, and let them have their say. That is where we are going to find out what they are going to have to say about this. That is where we are

going to find these things out.

When you're talking about jobs killers-you know, with the model that was being advocated by Ms. Romer, we could lose up to 5 million jobs in this country. The National Federation of Independent Businesses, just from the employer mandate on small businesses across this country, they're estimating 1.6 million jobs could be lost. That's on top of the millions of jobs that we've lost since the beginning of this recession and also the almost 3 million jobs since the beginning of last year that have been lost just from the beginning of this administration.

We can't afford to lose more jobs in this country, because where are these people going to go? It's not that hard to remember back to 1982. In 1982, during that very tough recession that we can all remember, President Carter, during his administration from 1977 up to 1981, during the campaign when he was elected, had created what he called the misery index. And that misery index took the unemployment rate, the inflation rate, and the interest rate. It was toward the end of his administration. You know, we saw in this country 21.5 percent interest rates. We saw unemployment rates in double digits, and we saw the inflation at double digits.

Well, where we are today, when we look at having over 10 percent unemployment in this country, and we're talking about losing millions more jobs because of this bill, we can't afford it. When you're talking to the small businesses and small factory owners out there about what's in this piece of legislation besides all these mandates but just talk about the taxes.

This was prepared by an analysis done by the Committee on House Ways and Means from Ranking Member DAVE CAMP. Since the increases in 2009, just in general, the net taxes that were passed by this House were \$1.71 trillion. And just the estimate on this health care bill alone, they're looking at over \$732.5 billion. That's billion dollars.

And who's going to pay for this? When they're looking at that 5.4 percent surtax placed on a lot of the small businesses that are the ones that create jobs out there and on certain individuals at a certain higher level, when

you're looking at \$460.5 billion in taxes, when you're looking at these employer mandates at \$135 billion, and you go right down the line, this is what's going to kill incentive in this country. This is what's going to kill the entrepreneur.

This is what is going to kill people who will say, Why even get up in the morning and try to go out and create jobs? Because one of the things that is lost here in Washington and in these Halls of Congress is that this body does not create jobs. This body spends the wealth of this country.

You know, the American people are really out there, and they understand it. When you look at this, it was mentioned a little bit earlier about what is happening with the increases, when you're talking on the Senate side about a 40 percent tax on those individuals out there with a quote-unquote Cadillac plan. Well, a lot of people say, Oh, Cadillac, they must be rich individuals. Well, I'll tell you what, in the State of Ohio, we have a lot of auto plants, and when you're looking at these auto plants, a lot of these folks are the auto workers who are going to end up paying 40 percent on an individual premium or will spend \$8,500 on their health care plan, a family plan at \$23,000. When you put these together, it's like, how are they going to pay for this as a small family?

When you take all these costs that are being associated under this piece of legislation, it's unfathomable. When we talk about unfathomable, I did read the health care bill. I sat down one weekend. I think it was 1,028 pages. I read it, tabbed it, underlined it so I could really get a good understanding. You are looking at a couple thousand pages on the Senate side.

But I think what is missing in this whole debate is, you know, here is what someone gave me not too long ago, the Constitution of the United States. But you know, as that little commercial on TV says: But wait, there's more. In this little book that's in about 10-point type, there's the Constitution, the Convention, the Congressional Resolutions, all of the amendments, the Virginia Bill of Rights, the Declaration of Independence, the Massachusetts Bill of Rights, the Articles of Confederation, the Virginia Statute of Religious Liberty, the Annapolis Convention, the Virginia Randolph Plan, the New Jersey or Patterson Plan, the Hamilton Plan and The Great Compromise, right there. That is America in a nutshell.

How is it that we end up today putting out thousands of pages that people can't comprehend, but America, our government, and how we were founded is right there. Put it in your pocket, and read it at any time. And I think that's what the American people are very concerned about, and I appreciate the gentleman for yielding.

Mr. NEUGEBAUER. Well, I thank the gentleman for pointing out the taxes that are in this bill. I think the bad

news is that they're going to have to be higher tax because they are disguising, as you know, what this bill actually costs. Now the stated cost that the Speaker of the House says is this bill costs \$891 billion. But if you add the mandated cost of the employer-mandating tax, it's another \$135 billion. And if you add the cost of individual mandate tax for individuals that are going to be penalized under this plan, it's another \$33 billion. So the total cost, the CBO score is \$1.06 billion.

You don't hear the Speaker or the leadership or the President talking about this number. Now the other piece is that in the House bill, there is no provision for what is being called the "doc fix." Today we have reimbursement levels that are being projected to be reduced by a substantial level, which is going to cause more and more doctors not to see Medicare and Medicaid patients. So this leadership team has promised and made a deal with the does that they will bring a separate bill. They don't want to bring it in this one because, why? It cost \$209 billion. So now instead of \$1.06, you have got a nearly a \$1.2 trillion bill.

Now the other piece is that Medicaid is being transferred to—part of this cost is going to be Medicaid which is going to be transferred to States, unless you're from Nebraska. What is the cost of that? That's \$34 billion. Now here is the real sleeper. I hope that the American people are watching C-SPAN and the like because the lights are on here, and the lights are on this chart. And guess what, this little bill collects taxes that the gentleman was talking about for 10 years, but it only has expenses for 7 years.

Now think about all of the businesses and families all across America that if you could collect 10 years' worth of salary but you only had to pay 7 years' worth of expenses, that's like the first 3 years you don't have to make your house payment, you don't have to buy your gasoline, you don't have to make your car payment. You just get your paycheck. Nothing taken out of it, no Social Security, no withholding. What a great deal that would be. Well, that's the way this bill has been put together in order to disguise the real cost of this.

So once the 3-year period passes, then on an annualized basis, this bill costs another \$727 billion more than what is being represented to the American people. So what does that total? \$2.1 trillion. So a bill that this leadership says is \$891 billion—it's not \$891 billion. It's \$2.1 trillion. And at a time in which, as the gentleman was talking about, small businesses are struggling to keep their doors open-in my district—and I think the gentleman's district as well-small businesses play a huge part in creating jobs. Who is going to pay this \$2.1 trillion? Because the taxes that they're talking about collecting only pay for a bill that costs \$891 billion, but this bill costs \$2.1 tril-

Now here's the other thing that people have looked at: this bill mandates, as both of my friends know, mandates that every American have health insurance. And in fact, if you don't, there is a penalty for it. So one of the things, people say that if the government is requiring to you do something to pay for health care or to have health care, and there is a penalty for doing it, it becomes a tax or a cost. Some people who have kind of calculated what that means for the economy, GDP and overall, said maybe that's a \$4 trillion number. So possibly what we are looking at, if we shed light on this bill, as we should, that really the impact of this is that it's a \$6 trillion piece of legislation.

Now I don't know about you, but I think the American people think that whether it's \$2 trillion or \$6 trillion or even \$891 billion that we should have had more debate than we did on this bill. As my colleagues will remember on the day that we passed this bill, very little debate was—I think one amendment—there was one amendment to a \$2 trillion—to a \$6 trillion bill was allowed.

These are the kinds of things that cause me to say, Mr. President, we have to hit the pause button here because we're talking about something that impacts families all across America. We have some numbers here that are big. We are now spending money that we don't have. Every dollar that the government spends, they have to go out and borrow nearly 40 cents of that from people, like in China and Japan; and it is not a sustainable thing. Yet now we're talking about more taxes and I think potentially bigger deficits because we've not had good discussions on this bill.

Now I will yield some additional time to the gentleman from Pennsylvania to reflect on these important issues again.

Mr. THOMPSON of Pennsylvania. Well, I thank my good friend for yielding. I just want to come back. You hit on such an incredible point about the individual mandate to purchase health insurance. Now I wouldn't consider myself in any way a constitutional scholar. I'm just an American and a citizen. But my good friend here has a copy of the Constitution. And as I've read in the version of the Constitution that I carry around, which is about 28 pages, I think that was put together by some really smart people a long time ago that has withstood the test of time. And really our Constitution has become a model for other countries and emerging countries to base their governing principles on. But to the best of my knowledge, I can't recall that there is anything in that Constitution that provides a basis for Congress mandating that every individual American in this country purchase health insurance.

I will yield to the gentleman with the pocket Constitution there to just see what his thoughts are on that.

Mr. LATTA. I thank the gentleman for yielding. I think you would be very

hard pressed to find it. I know that when I went out in my district—I know that Members going across their districts, across this country have found the same questions being asked, Where does it say that? Especially a question, as the gentleman from Texas has mentioned, that under this bill that was passed by the House that there was a \$2.5 percent, quote-unquote, fine on individuals, plus that individual mandate that you have to have it or civil or criminal penalties could be imposed.

How can we do that? You know, it's unfathomable that this would be able to withstand a challenge in court that an individual would be forced to have to do this. Again, I think if you just read this little document, you are going to be very hard pressed to find it. If I could just mention—and also what the gentleman from Texas was talking about—what it's going to do to the States. In the Columbus Dispatch, there was an article that broke it down for the State of Ohio. We are running about an \$850 million deficit. And unlike this body, we have to balance our books. It is constitutional that we have to make sure that we're in balance. So Ohio is out of balance by about \$850 million, but there was also a story by the Columbus Dispatch, in their calculation, that this bill would impose a Medicaid debt upon the State which would increase that deficit by another \$900 million.

I think that this is what people need to find out. This is not just going to affect small businesses or large businesses or individuals. This is going to affect your State government, your local government, if they can even function. Because all of a sudden, these mandates are going to come down from Washington, and good luck.

I thank the gentleman for yielding. Mr. THOMPSON of Pennsylvania. I appreciate that. In terms of cost, much of my professional life was involved in serving older adults. A particular section that I find very appalling of what I see in both the Democratic House bill and the Democratic Senate bill is what is authorized in terms of increasing the cost of individual insurance premiums for older adults. Older adults rely on Medicare. I will talk a little bit on Medicare in just a second. But they purchase supplemental insurance to fill in the gap, to make sure that they don't exhaust their life savings that they've accumulated over They've earned those. They've put those aside so that they can enjoy those retirement years and be able to do the things that they've always hoped and dreamed about doing. So supplemental insurance serves an important purpose there.

Well, within the House bill, it authorizes, it allows, it codifies that insurance premiums for older adults are allowed to double. In the Senate bill, it does one step better than that; it allows supplemental insurance costs, individual insurance costs for older adults to triple, and that's a crime.

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I want to take the next step. I have talked about the four dimensions of health care. Now I want to talk about accessibility. If we are doing health care reform correctly, we are increasing accessibility. I don't think we are. We are making health care less accessible. Part of that is through Medicare cuts, half a trillion dollars in Medicare cuts. There are a lot of physicians today that do not accept medical assistance patients or Medicare patients today, and it is all economics. Medical assistance pays 40 to 60 cents for every dollar of cost, and Medicare pays right now 80 to 90 cents for every dollar of cost.

Just recently one of the facilities that President Obama lifted up as a bright, shining example of what we can do for health care reform, the Mayo Clinic, their operations in Arizona decided and announced that they were no longer taking Medicare payment, which meant if you are an older adult and you are going to a facility that doesn't accept Medicare, you will have to pay out of pocket. You have to have some other provisions.

So these cuts we have piled on top with Medicare just adds insult to injury. My diagnosis for either the House or the Senate, the Democratic bills are fewer doctors and fewer hospitals. Most doctors in Pennsylvania, the average doctor is over 50 years of age in Pennsylvania. Right now they are looking at significant cuts under these bills in terms of reimbursement. They are not paying their costs now.

I would predict, and as I meet with physicians around my State, many are preparing to retire because it is better to get out now rather than burning through their life savings. With that, we will result in less accessible health care services. Hospitals are only making 1 to 3 percent margin today. With Medicare cuts, they will be in the negative column. You can't run a business, whether it is a hospital or any other business, and have more expenses than you do revenue and stay in business for very long. Hospitals close, that is less accessible health care. So this bill not only drives up costs, it makes health care much less accessible.

Once again, I want to thank the gentleman for leading this Special Order tonight. I am going to yield at this time to the gentleman from Ohio (Mr. JORDAN).

Mr. JORDAN of Ohio. I thank the gentleman for yielding. I thank both him and the gentlemen from Texas and Ohio for this Special Order hour on behalf of the Republican Study Committee.

I notice the chart in the well of the Chamber is talking about the real cost of the health care legislation and what it means over time: \$2.1 trillion. I think when you look at that number and couple it with some of the things that we have seen happen in the last year—in fact, I gave a speech last week back home in the Fourth Congressional

District of Ohio where I talked about this, and I started the speech with the question, Who would have imagined? Who would have thought? Who would have thought that we would run a \$1.4 trillion deficit last year, the largest in American history? Who would have thought that we would have a \$12 trillion national debt, moving to \$13 trillion in the very near future, slated to go on the Obama budget spending schedule to \$20 trillion over the next 10 years? Who would have thought within 2 years the interest payments on that debt would be over a billion dollars a day? We are talking some serious, serious financial concern.

And what do we have being pushed by the leadership in this Congress? A health care bill that is going to add \$2.1 trillion to those already unbelievable numbers. Every single American, every man, woman, and child today, to pay off the debt we currently have, it is \$39,000 that they have to pay. It is unbelievable. You think about one of the things that makes America great, that makes us the greatest Nation in history, is the simple concept that parents make sacrifices for their kids so that when they grow up they can have life better than we did. They in turn do it for their children, and each generation in this country has done it for the next.

But now what we have in America, unfortunately, is this focus on living and spending for the now, living and spending for the moment and sending the bill to our kids. Unfortunately, this health care bill represents all that is bad about Washington, not only on the spending side, but as my colleagues have pointed out, in a whole host of other areas as well.

I would just say in just a general sense, and I will make this last point and then I will yield back to the gentleman from Texas. I would just say this bill represents what Americans hate about Washington. This health care bill is big taxes, big spending, big Washington, big bureaucracy, Federal Government telling families and small business owners and individual Americans how they are now going to get their health care, telling Americans that you will now have bureaucrats between you and your family and your doctor. It represents everything that Americans don't like about this place. Unfortunately, it seems like the leadership in this Congress is bound and determined to move forward with that.

One thing I know about Americans, Mr. Neugebauer, is that we hate being told what to do. It is part of the American DNA. They see this health care bill as telling them how they are going to get their health care, and they don't like it. The old line that we have in Ohio, and probably have in Texas, too, is that for most Americans when they are traveling down the highway and they see the sign that says 55, for most Americans that is not the limit, that is the challenge. That is how we look at things. We hate this idea of being told

how we are going to do things. That is why we are Americans. And the idea that now the central government, the Federal Government, is going to tell us how we are going to get our health care, and it is going to cost us \$2.1 trillion in addition to all of the debt we currently have, is what really offends Americans.

So I appreciate the gentleman from Texas taking the time tonight to lead this hour, and I vield back to the gentleman.

Mr. NEUGEBAUER. I thank the gentleman, and the gentleman brings up a very important point. On top of this being a very expensive bill and the fact that we are going to be spending money that we actually don't have, when I look at this chart, I think about my new grandson, Miles, and I think about my two grandsons, Nathan and Noah, and I think about what kind of legacy, what kind of future are we leaving these young people, the next generation, that by 2012 we are talking about a \$16.7 trillion debt in this country. And as the gentleman said, by 2020 we are talking about \$20 trillion.

When I was back in the district, and maybe you all have used this analogy, but for people to get their arms around what is a trillion, if you counted to a trillion, it would take you 19,000 years to count to a trillion. We are talking some serious money here. So I thank the gentleman for bringing up those important points.

This is all intertwined. We are talking about jobs and the impact of health care on patients' rights and also small businesses, but we are really talking about the impact on an entire Nation of, one, turning health care over to the government; and, secondly, continuing down this road of borrowing and spending money that we don't have and charging it to future generations.

I know each Member here on the floor tonight has this voting card, and right now it is a credit card and it has a huge credit limit on it. What I think many in the Chamber with me tonight want to do is turn this into a debit card where we are spending money that we actually have instead of borrowing from our children and grandchildren.

Mr. JORDAN of Ohio. The gentleman is right on target with his comments.

I just remind the Speaker, last spring the Republican Study Committee offered a balanced budget, something families and small business owners have to do every year and something local governments have to do. Unfortunately, the Federal Government never has to do that. RSC brought forth a balanced budget, and we plan to do the same thing this year because we understand that we cannot continue what that chart shows, not only for presentday America, but as the gentleman points out, because of what it means for our kids and grandkids. So we will bring that balanced budget back. It does the right things. It keeps in place those good tax cuts that were put in place in 2001 and 2003, protects Social

Security, protects Medicare and national defense during this time we find ourselves in, and cuts spending, which we have to do. We have to make those tough decisions and do the right thing.

Mr. NEUGEBAUER. I thank the gentleman, and I yield to the other gentleman from Ohio (Mr. LATTA).

Mr. LATTA. I thank the gentleman for yielding.

Just talking about these numbers. how are we going to pay for this? We are looking at 21, 22, \$23 trillion in the outyears here. The question is how are we going to pay for this. We owe \$3 trillion to foreign governments, over \$800 billion owed to the Chinese alone, our largest creditor. Down the road when the Chinese and the Italians, all these governments are now saying, Wait a minute, America, you have got to do something about your spending. You have got to get this under control. They are worried about something. They are worried about getting paid back, and they don't want to see this debt that we owe them become cheap money, and so they are getting concerned about this.

But if you just go back to 1981, 1982, if we go to those years when the Federal Government was out there borrowing heavily, we had 21½ percent interest rates in this country. I was just starting to practice law back then, and we had to write land contracts if a person wanted to sell a house. You couldn't go to the bank and get a loan because there was no money. The seller would meet with the buyer and they would say, In 3 years time, you are going to pay me so much interest and principal. And hopefully at the end of that time there would be a balloon payment to try this pay this thing off if they could get a loan.

But when we are looking at these numbers, it is going unfathomable how we are going to pay this off, because the Federal Government is going to have to go out there and borrow every penny that is out there and somehow do this. But then when you look and talk to these private enterprises out there, the small businesses, they are having a hard time getting credit today, and we are not in that situation. It is bad, but it is not going to be anything like this that you

show in your chart.

Mr. NEUGEBAUER. The other gentleman from Ohio brought up a point about the current interest payment that is approaching a billion dollars at the most historically low rate time in the history of our country. The gentleman reminded all of us there was a time in our country, and I was in business when we were paying 15, 16, 17 percent for money. It was hard to get, and once you got it, you had to have a really good idea to make it. So you begin to think about what happens to our interest payments if we—let's just say we doubled the interest rates that the Treasury is doing right now. That begins to double the payment. So now instead of \$1 billion, it is \$2 billion. What

that begins to do is, as we put together our budget, there is less and less money for discretionary spending because the first thing you have to do is make your mortgage payment, and we are mortgaging the future of our country. So these are important issues and I appreciate the gentleman bringing that point up.

I think the other thing that kind of concerns a lot of people is the point that the gentleman made about our creditors. What if China, for example, who is our largest creditor, and as the gentleman points out, they have said, We are not quite sure what our appetite in the future is for continuing to loan America money to just spend and borrow without some kind of discipline, and that is something that we have to look at.

I have another chart, and I would like to make one quick point and then go back to see if any folks have departing comments

One thing that the American people are also pretty tired of is all of these bureaucracies. I know when I went around in August, and I think a lot of my colleagues did, too, we brought this chart around to show the American people. This is a diagram of the House version of this bill. You can see all of these new bureaucracies and all of these new agencies, and somehow this is going to simplify health care for Americans? This is going to make it better for Americans?

What we do know is hidden in this is a czar that is given very broad powers that is going to be able to determine what kind of policy you and I get to have. That concerns me that the Federal Government is going to be picking and choosing the kinds of coverages that are going to be offered to the American people instead of the American people being able to pick and choose the things that they think are coverages that they need.

So I think when you look at the cost. when you look at the complexity of this, it is no wonder the American people are asking the Speaker of the House and they are asking the President to keep their promise about transparency here because they are very concerned about this.

I yield to the gentleman from Pennsylvania. I think he probably showed this chart to his folks back home, too. What was their reaction?

Mr. THOMPSON of Pennsylvania. They were appalled. And it has grown as these bills have been further proposed and developed in the back rooms among the Democratic leadership. The current set of new bureaucracies is somewhere around 130 new bureaucracies that have been created to dictate to that part of our lives called health care.

I will just give you one example. In addition to just the imposing of the Federal Government among our personal lives and our personal decisions with health care, what it does to the cost of health care. Under the former

Clinton administration, we wrote out HIPAA, Health Insurance Portability and Accountability Act, and certainly no one can be opposed to maintaining privacy as it relates to health care. And portability, we would be much further along if that would have taken care of portability, if it was the right solution for taking your insurance with you when you change employers. I happen to think that type of portability is a positive thing.

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But the fact is that is what HIPAA did. And that was just one new bureaucracy that was created under HIPAA. The cost of providing health care because of HIPAA. I am sure that we could find many health care hospitals that will say, health care systems that actually probably laid off direct caregivers because they had to hire people to push papers, they had to hire people to be compliance people to be able to comply with all this massive new bureaucracy and the new regulations that were as a result of HIPAA.

Now, you take HIPAA, multiply that times at least 130, I forget the last count, my colleagues may have a better count of the new health care bureaucracies under the Pelosi or the Reid health care plans, but you just take the experience of HIPAA, the overhead costs of providing health care, multiply that times at least 130. that is a devastating effect on the providers of health care throughout this country.

Mr. NEUGEBAUER. I thank the gentleman. And I think he makes a great point. And I think one of the things that is the center of all of this is, you know, the administration is talking about jobs. I thought it was interesting today that they are going to quit tracking jobs tied to the stimulus plan because you know what, the stimulus plan hadn't been creating any jobs. This health care plan is going to stimulate, it is going to stimulate a bunch of new hires in Washington, D.C., and not across the heartland of America, because they are going to have to put people in place here to fill all these positions. And they are going to be shuffling paper, and they are going to be asking hospitals and doctors and health care providers to jump through all of these hoops so that they can justify their jobs.

I think the American people want to create jobs out there in States like Ohio and Texas. So, you know, the job creation, unfortunately, is moving in the wrong direction if you are creating jobs in Washington, D.C. we need to be creating jobs in the heartland of America.

I want to vield some additional time to my friend from Ohio.

Mr. LATTA. I appreciate the gentleman for yielding. I would be remiss if I didn't bring this up. As I mentioned a little earlier, I represent the largest agricultural district in the State of Ohio, along with manufacturing. When

we are talking about all these numbers about what could occur with all this massive debt that we are going to be accumulating, what is that going to do to the farmers out there? How are they going to get their crops out? How are they going to be able to buy land? How are they going to be able to buy machinery?

The last thing that we want to be in this country, not only do we not want to be a debtor Nation, but we don't want to become dependent on the rest of the world for our food. Because once we lose that ability to grow our own food, to supply it for ourselves, we are done. And if the American people think the times are tough now when we are worried about where we get our energy or who is going to be buving our debt. you throw food into that mix, and that will be pretty much the end. I think that is why you take all these things together and why this debate is so important. And that is why I think really that we should have had this debate going on across the United States. I appreciate the gentleman for yielding.

Mr. NEUGEBAUER. I would now like to yield some time to another one of our colleagues who has joined us here, the gentleman from Louisiana (Mr. SCALISE).

Mr. SCALISE. I want to thank the gentleman from Texas for yielding and for hosting this hour, because it is so important right now. As the American people are watching what is going on here in Washington, most people are saying they don't want a government takeover of health care. They want us to be focusing on creating jobs, which we should be doing, but instead you have got these meetings going on behind closed doors by Speaker Pelosi and her liberal lieutenants to try to have this government takeover of health care being forced down the people's throats.

The President said multiple times during the campaign that he would insist that these meetings be held in public, they be on C-SPAN so the American people could see it. And yet the President has totally gone back on his word. These meetings are behind closed doors. You know, ironically the President goes out publicly and he bashes big insurance companies, and then he goes behind closed doors and he cuts special sweetheart deals with insurance companies. He goes behind closed doors and first says Republicans don't have a plan, and yet when we submit our plan to him, he refuses to meet with us. He throws us out of the room.

The American people are tired of this. Because we should be doing the things that we have proposed to reduce the cost of health care. But instead, you have got these back room sweetheart deals, you have got these closed door meetings instead of the public transparency that we were promised.

And it is very unfortunate, because we are talking about one-sixth of our economy. We are talking about a government takeover bill that would lit-

erally throw millions of Americans off their health care. So I appreciate what you are doing.

Mr. NEUGEBAUER. I thank the gentleman. And I thank my colleagues for entering into this very important discussion so that the American people can have a little light shined on a very important issue.

TERRORIST ATTACKS ON AMERICA

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

Speaker.

It is an interesting time we live in. We have heard in the past year that Gitmo is the main recruiting tool, the best recruiting tool for al Qaeda, for Islamic jihadists who want to destroy America. And so I thought it was important that we look at that a little more in depth, rather than just having a cursory action, because for those of us who have been to Gitmo, I have been twice, I know that no one has ever been waterboarded at the Guantanamo Bay facility. The Khalid Sheikh Mohammed waterboarding occurred in the Middle East. And there are those that are worried about waterboarding continuing.

The fact is, when that was leaked and such a big deal made out of it and the fact that when the U.S. has done it, been involved, there have been a doctor there, there was no way they were going to allow harm to come to the individual being waterboarded, the word was out. And so Islamic extremists, iihadists that want to kill America. that want to wipe us off the face of the map, want to destroy Israel, they knew and could tell their extremists you don't have to worry if you are ever waterboarded, because they will have a doctor there, they are not going to let anything happen to you. So obviously, it will never work as a procedure again. But as we have found out, there are a lot of Americans that are alive today because that procedure was used.

So if Gitmo had never been used as a location where waterboarding or torture of any kind occurred, then why is it so bad? Well, it is because a lot of people don't know what they are talking about. Having visited many prisons as a judge, chief justice, and even as a Congressman having visited prisons, I know from visiting Guantanamo Bay facility, the detention facility there, that the people are not mistreated. They get good food. And in fact, most of the detainees there have gained weight, not lost weight. They get excellent medical facilities. They get treatment when they need it. The interrogation often, if there is any at all, occurs in a big lounge chair there.

In fact, the biggest problem there at Guantanamo Bay for those who work there is having feces and urine thrown on them. The detainees figure out really brilliant ways to go about throwing