raised the issue of our being here today, not doing anything today to promote job creation.

And as far as any quarrel we may have with history as to why we got or how we got to where we are today, I would just like to quote to the gentleman in closing Winston Churchill's speech to the House of Commons June 18, 1940. And he said, "Of this I'm quite sure, that if we open a quarrel between the past and the present, we shall find that we have lost the future."

And with that, Madam Speaker, I yield back.

ADJOURNMENT TO MONDAY, MARCH 15, 2010

Mr. HOYER. Madam Speaker, I ask unanimous consent that when the House adjourns today, it adjourn to meet at 12:30 p.m. on Monday next for morning-hour debate.

The SPEAKER pro tempore. Is there objection to the request of the gentleman from Maryland?

There was no objection.

VIRTUAL COLONOSCOPIES AND MEDICARE

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

Mr. THOMPSON of Pennsylvania. Madam Speaker, the President just had a physical and is apparently very healthy. Among the tests he had was a virtual colonoscopy to screen for colorectal cancer. Α virtual colonoscopy employs x ray technology that produces a three-dimensional image of the entire colorectal structure. However, it is much less invasive and does not require sedation that is needed often for standard a colonoscopy.

I bring this up because the Centers for Medicare & Medicaid Services have denied coverage of this procedure for seniors enrolled in Medicare. Colorectal cancer is the third most diagnosed cancer among men and women in the United States and the second leading cause of cancer death, despite having a 90 percent cure rate when detected early. Many insurers like Anthem Blue Cross-Blue Shield and CIGNA cover this virtual procedure but not Medicare.

The National Cancer Institute Colorectal Cancer Progress Review Group predicts that the minimal invasiveness and lower cost of this procedure could attract more people to be screened, with the possibility of saving 20,000 lives annually. The President has set an example. The American Cancer Society recommends it. Medicare should cover it as a provided procedure.

RESPECT FOR OUR DIPLOMATIC GUESTS

(Ms. JACKSON LEE of Texas asked and was given permission to address

the House for 1 minute and to revise and extend her remarks.)

Ms. JACKSON LEE of Texas. Madam Speaker, I have served on the Homeland Security Committee, tragically, since the occurrences of 9/11, and I want to congratulate this Nation for moving toward securing its people in a way that balances civil liberties and as well recognizes our responsibilities.

As the chairwoman of the Transportation Security Committee. I want to acknowledge that in looking at how we treat our guests that come from other countries, we should always continue to review those circumstances. Just a few days ago, our guests from Pakistan, Pakistani parliamentarians, were traveling through our airport and were detained and asked a number of questions even though they were traveling with State Department escorts, as we understand it. I believe it is important to always remain secure but to remain balanced as well. I think it is appropriate that we look again at our procedures to ensure that our international diplomatic guests receive the kind of responsible treatment that is appropriate. We thank those who serve us on the front lines, but I will be looking forward to a full report by the Department of Homeland Security, and I offer to those dignitaries our respect because we do believe in international diplomacy.

HEALTH CARE

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

Mr. TURNER. Madam Speaker, it is irresponsible for Congress to continue debating an increasingly unpopular and costly health care bill at a time of record-breaking deficits and uncertainty about our economy. We should be focusing on reducing spending and creating jobs. In Tuesday's New York Times, columnist David Brooks editorialized that the majority's "passion for coverage has swamped their . . . commitment to reducing the debt. The result is a bill that is fundamentally imbalanced." Brooks wrote that "they've stuffed the legislation with gimmicks and dodges designed to get a good score from the Congressional Budget Office but that don't genuinely control runaway spending." He points out that the bill appears deficit-neutral because it immediately collects revenues but doesn't pay for benefits until 2014. It also doesn't include \$300 billion in additional costs because it assumes Congress will cut Medicare reimbursements by 21 percent.

Unfortunately, this proposed government takeover of health care has blocked the path to reasonable reform. We can and must work together on a bipartisan basis to achieve real reform that will bring down costs and increase access for all Americans without increasing the national debt.

SPECIAL ORDERS

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

HEALTH CARE

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

Mr. GARAMENDI. Madam Speaker, if I might, we heard just a moment ago from one of our esteemed colleagues from the Republican side that there were no savings in the health care bill. In fact, there are substantial savings, at least according to the Congressional Budget Office, and over time, the American deficit would be substantially reduced. Let me just tell you some of the reasons why. First of all, by extending coverage to most all Americans, you eliminate one of the most pernicious and most difficult cost increases in the system, and that is that the uninsured wind up in the emergency room, usually very, very sick, and that gets to be a very, very expensive matter. That cost is in the system and is passed on to both the Federal Government as well as to those people that are buying private insurance.

Also there is a major effort in the legislation to extend the medical technology information systems. We know that that will reduce errors and omissions, and create not only better care but reduced cost. We know that the system will also have a Medicare panel look at ways of reducing the costs in the Medicare system. Finally, there are programs in the system and in the legislation to promote wellness. Healthy people are not expensive. If you are well, you are not going to be increasing the cost of the systems. There are many, many parts of this bill that will significantly reduce the cost, and therefore, this is a good piece of legis-

Finally, I want to speak to one of the issues that our Republican colleagues constantly put before us as a way of reducing costs, and this is the ability of the insurance companies to sell products across State lines. Now, I was the insurance commissioner in California for 8 years, 1991 to 1995 and again from 2003 to 2007. During that period of time, we had insurance companies that were not licensed for business in California, selling products illegally in the State of California. There was a reason why we had a procedure to make sure that insurance companies that were selling health insurance in California were licensed. We wanted to know that they were legitimate companies, that they actually would have the financial strength to pay claims, that their policy actually provided benefits, and that they were able to carry out the contract that they had made with people.

All too often, we found that companies that were selling policies illegally in California without the proper license were selling junk to the public.

I remember a case in San Diego, a woman who was working, a lawyer, had lost her employment with a law firm. She went out and purchased an individual policy. It was cheap. It was actually too good to believe. She got sick, and she wound up with an enormous expenditure, and she had to actually file bankruptcy in order to cover that cost.

So we know that if companies are simply selling across State lines without the proper underlying strength and without the proper regulation, it will not solve the problem. In fact, it will create a whole set of other problems. That is not the solution. What we need is a national program and, in fact, we have such a program in the proposal that will hopefully be before us next week. That proposal establishes a national benefit program. It establishes a mechanism for the pooling of risk and pooling of companies in what are called exchanges, either State, regional exchanges, or a national exchange. That is a procedure that is in the bill and does provide the kind of protections that every consumer needs and also provides some competition. Because one of those companies that will be operating in the exchange—at least the national exchange—will be a nonprofit company that will have a national reach and be able to have the actuarial strength of being able to spread the risk across the entire Nation and all parts of it.

So I'm looking forward to next week. It's going to be a terrific week. We will finally deal with something that the Nation has wrestled with for a century, and that is how to expand health insurance to the entire population. We're well on the road.

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

(Mr. POE of Texas addressed the House. His remarks will appear hereafter in the Extensions of Remarks.)

CONGRATULATING DETROIT CATHOLIC CENTRAL HIGH SCHOOL

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

Mr. McCOTTER. Madam Speaker, today I rise to acknowledge the Division I State Champion wrestling team from my alma mater, Detroit Catholic Central High School. On February 27, 2007, the Catholic Central Shamrocks defeated Rockford 39–24 to hoist their first State championship trophy since 1988. Third-year Head Coach Mitch Hancock, an individual State final winner for the Shamrocks in 2000, saw all 14 of his wrestlers earn a berth to the

Individual State Finals. This is the first time in recent Division I history that an entire team has qualified for the Individual State meet. Three Shamrock grapplers brought home State titles to complement the team championship. Following in the remarkable tradition of legendary Catholic Central Coach Mike Rodriguez, who was both coach and mentor to current coach Mitch Hancock, the Shamrocks brought home their eighth State wrestling team title and earned Coach Hancock the Division I honors for Wrestling Coach of the Year.

Madam Speaker, with a season record of 27–4, the 2010 Catholic Central Shamrocks deserve to be recognized for their determination, achievement, and spirit, and we are all very proud of their determination and effort.

Equally, Madam Speaker, I also rise today to acknowledge the Division I State Championship bowling team from my alma mater, Detroit Catholic Central High School. This has been a toteworthy year for the gentlemen at Catholic Central, as the championship marks the fourth State title for the school during the 2009–2010 year. The Michigan High School Athletic Association recognized bowling as an official sport in 2006. Thus, it is impressive how the Catholic Central team has risen to State prominence in a very short time.

Two members of the State championship bowling team qualified for the individual finals, and although they did not ultimately win, they represented C.C. High admirably and honorably. This year, after defeating Salem 1,856–1,824 pins in the quarterfinals, the Shamrock bowlers outdueled Flint Carman-Ainsworth 1,855–1,747 to earn a berth in the finals, setting them up to take on Macomb Dakota. On March 5, 2010, the Catholic Central Shamrocks rolled over Macomb Dakota 1,834–1,565 to earn their first State championship trophy.

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Coach Al Bridges saw his bowlers in seventh place after the morning qualifying round, yet in true Shamrock fashion the team kept fighting and refused to give up. As the day wore on, CC kept moving up in the standings, leading by 143 pins after the Baker games. From that point on, the Shamrocks never looked back.

Coach Al Bridges credits good conditioning and a lot of practice for the payoff of winning a championship. In earning their first bowling title, the 2010 Catholic Central Shamrocks deserve to be recognized for their determination, achievement, and spirit.

In conclusion, Madam Speaker, the hard work and dedication of each of these State championship teams epitomizes what it means to be a Shamrock. By the teaching of our Basilian fathers, through goodness, discipline, and knowledge, the entire Catholic Central family, including this alumnus, share in their accomplishments.

In recognition of their effort, I ask my colleagues to join me in congratulating the Detroit Catholic Central Shamrocks for achieving these State titles and for honoring their devotion to Mary, alma mater. Live and die for CC High.

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

(Ms. WOOLSEY addressed the House. Her remarks will appear hereafter in the Extensions of Remarks.)

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

(Mr. JONES addressed the House. His remarks will appear hereafter in the Extensions of Remarks.)

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

(Mr. DEFAZIO addressed the House. His remarks will appear hereafter in the Extensions of Remarks.)

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

(Ms. KAPTUR addressed the House. Her remarks will appear hereafter in the Extensions of Remarks.)

NUCLEAR WASTE

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

Mr. WHITFIELD. Mr. Speaker, today I rise to discuss an issue that I think very few people in America are aware of. It relates to the very important topic of nuclear waste and the impact that that has upon our Federal policy and its effect on our energy needs and our Federal debt.

Most Americans support nuclear power as a major source of our electricity. Today it provides 20 percent of all the electricity produced in America. Now, we know that over the next 15 or 20 years our demand for electricity is going to double what it is today. I might also remind everyone that coal is providing 51 percent of all the electricity produced in America. As I said, nuclear power provides about 20 percent.

The administration and many people are focused on alternative forms of energy, particularly solar and wind power. Now, all of the experts will tell you that while, yes, some energy can be produced from solar and wind power, it will never come close to meeting the demands of the American people in energy.