

was a little kid. I go and get a generic for like \$2.50. And now if I want to spend my HSA on it, I can't go spend \$2.50. I've got to go pay megabucks to the pharmaceutical companies in order to get a prescription drug.

Wow, maybe that is part of the deal that made them think, You know what? You know Joe Six-Pack, as my friend from Arizona says, may not get anything out of it, but by golly, we're going to make a lot of money on this bill. Let's throw our support behind it, and the President will love us for it, too.

Mr. BURGESS. One interesting point. You have these groups that went down to the White House in May and June—and I'm not going to criticize them for going down and advocating on behalf of their industries, on behalf of their groups. But what is so onerous about this is the President has proclaimed this Sunshine Week. Transparency is going to be the watchword of his administration. Remember? We heard it over and over again. Everything will be up on C-SPAN, everybody will be able to see it—except for these deals that were struck down in the White House in May and June. And now they come back and say, Well, there really wasn't anything written down. Two trillion dollars in savings and you didn't write a word of it down?

Now, in Texas, as the gentleman knows, we trust each other. A handshake is as good as a signature a lot of times. But when it's \$2 trillion, you're probably going to need a little more than a handshake even in Texas, because are people going to perform as they said they were going to perform?

When Senator MCCAIN wanted to push an amendment that dealt with reimportation in the markup of the Senate bill, in the debate of the Senate bill at Christmastime—I don't agree with reimportation. I think it's unsafe. I think it's unwise. But Senator MCCAIN was prevented from offering that amendment because, to quote somebody at the time, That wasn't part of the deal that we had.

Well, wait a minute. If there is a deal that someone knows about, is it written down somewhere? Could we please see what else is in that deal? We're the legislative body. If there are deals struck at the White House—and it is Sunshine Week—if there are deals struck at the White House, let us see what those deals are.

I'm not criticizing the groups that went down there and advocated on behalf of those groups. That is fine. They should have done that. But we, as the legislative body, should have been privy to any of that information as we tried to craft the legislation that would have to either enact or confirm or deal with those deals.

Mr. SHADEGG. Well, it seems to me that while we do not know what the quid pro quo was for any given deal, we know a couple of things: We know the insurance companies went in first and foremost and said, We want an indi-

vidual mandate. We want the government to compel every American to buy federally approved, Federal Government approved health insurance, and we want the IRS to enforce that mandate. You must buy Federal Government approved health insurance. That is what the insurance companies wanted going into the deal. Funny, that is what they got. They got an agreement that there would be an individual mandate.

So if this becomes law, every single American will be required to buy a government-approved health insurance plan. And if they don't, the IRS will tax them. Huh.

We also know, although the gentleman points out, there is no individual mandate in the Senate bill—there are some things that are pretty close to it—the insurance companies didn't want competition. They certainly didn't want across-the-State-line competition, they didn't want the State tax code to say you and I could buy it tax-free so they would have to compete with each other like the auto insurance companies. It sounds to me like we can kind of decipher some of the outlines of the deal that occurred.

Mr. BURGESS. And I can be as critical of the insurance companies as anyone else, but they take the path of least resistance. Their capital is not necessarily any more courageous than anyone else's. The easiest way to get to what they want is an individual mandate.

But I suspect if we set up pretaxed expenses, buying across State lines, if we develop that market for them, I'll bet they'd find a way to compete, I'd bet they'd find a way to work in that market and win in that market.

Mr. SHADEGG. I think the gentleman makes an excellent point.

The truth is America's health insurance companies are playing under the rules we set, and the rules we set say they really don't have to compete for my individual business, for JOHN SHAD-EGG as an individual customer, or yours, or our colleague from Texas because the Tax Code says we cannot buy health insurance like our employers can. We can't buy it tax-free, but our employers can.

I think the gentleman is absolutely correct. I think the reason that the auto insurance industry competes every day, day-in and day-out, pounding us on TV saying, you buy our plan from GEICO or Progressive or Allstate or Farmers, we will give you better service for a lower cost; and the health insurance companies don't compete day-in and day-out saying, you buy our health insurance plan from United or from Aetna or from Blue Cross-Blue Shield, and we will give you a better price at a lower cost.

The reason they don't compete like that is because the government sets the rules. And the rules say that they sell pretty much exclusively to big companies, and we say to the poor working stiff who can't get employer-

based health care, too bad, pal. You kind of don't count in the system. The insurance companies don't really want their business, they don't market to you, and if you buy their product, you have to buy it with after-tax dollars. Tragically not fixed in this bill.

Mr. BURGESS. Let me point out just one thing.

We hear over and over again Republicans have no solutions for health care. HealthCaucus.org is a Web site that deals only with health care policy. On that Web site, Dr. BURGESS's prescription for health care reform, the seven or nine things that I heard consistently in my town halls this summer are up there. People can download that and look at that themselves.

Suffice it to say that we really have been frozen out of this process from the beginning. They were not interested in our input last year because they had a supermajority in the House of Representatives. You can't pass a bill with 40 extra votes? What's the matter with you?

Well, now, the entire argument, the entire argument is within the Democratic Caucus. They don't have the votes on their side because it is a badly flawed product and a badly flawed process that they are trying to push through on the American people.

People do need to understand this bill has nothing to do with health care any longer. This bill has, as has been pointed out tonight, if we wanted to fix these things, we would have fixed them. This bill is about higher political power for the party in charge, and they want to obligate the American citizenry to re-up their contract every 2 years in order to not lose the benefits that they are ostensibly going to get with the bill.

The bill is a bad deal, Mr. Speaker. I would submit that the American people need to continue to weigh in on this. All is not lost. Time is not up. There is time to make a difference.

I'll yield to the gentleman for a final thought.

Mr. GOHMERT. I just appreciate all the work you've done. There are several bills that have been proposed by Republicans.

Mr. BURGESS. I thank the gentlemen for their time this evening.

HEALTH CARE REFORM

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

Mr. RYAN of Ohio. I appreciate the opportunity to come up and continue the discussion on health care from a little different perspective than my friends on the other side have been giving the American people.

I want to talk about the need for health care reform in the United States of America and what we need to do here in the Congress to get it done.

We had a nice discussion yesterday in Cleveland with the President of the

United States. I've been one who has said that if we're going to do this, we need to do it. We have got other issues that we're dealing with simultaneously now with jobs, passing a second jobs bill. My community back in northeast Ohio has benefited a great deal from the original stimulus package that has passed here. But we need to continue the work of getting the American people back to work. And in the short term, that means job packages, that means financial reform so we should bring some integrity back.

But in the next week or so, we have to pass this health care bill. And I know there's been a lot of controversy surrounding this bill. There's been an extended discussion over the course of the last year or so on this issue. We have talked about all of the issues, and now it's time for us to have a vote in the House of Representatives—hopefully here in the next week—and pass this bill so that we can move the country forward and start addressing the other issues with regulatory reform on Wall Street, trying to bring some discipline back to the financial system. It's also allowing us to go back and continue to focus on the jobs issue.

But under this bill, you talk about long-term economic growth as we try to be competitive in the United States, globally competitive competing with China, competing with India. The American businessperson now has an anchor strapped around their neck in the form of health care costs. And if we think that we can continue to grow our economy, hire American workers, make the proper capital investments, make the investments in technology, if our businesses are asked to compete while dealing with the health care system that over the last 5 years has increased over 120 percent for small business people, we are asking our small business owners to go into the shark-infested waters of the insurance market so that they can cover their citizens, their workers, and then ask to compete on the global playing field.

□ 2045

They can't do it. The small business people are screaming for health care reform. Now, you want to get into an ideological battle, but what we are trying to deal with on this side of the aisle are practical, pragmatic solutions to the problems that are facing us, looking at the facts, looking at the issues that are facing our country, and addressing those issues in a bipartisan way.

I know many on the other side have said, well, we have been locked out of the debate. I want to know one time when the last President spent 7 hours sitting around a table with people from both parties to discuss any issue, let alone health care. President Bush never sat down, Madam Speaker, for 7 hours. President Bush never came to our caucus and had the kind of discussion and question and answer that President Obama had a few months ago

when he went to the Republican Caucus. And I think this shows why he is the President of the United States, by dealing directly with their questions. He was able to do that and has included the Republicans and tried to include the Republicans every single step of the way.

But the Republicans are getting their marching orders from their pollsters and their consultants. And one of the memos was leaked early last year, as many of us remember, that said to the Republican Caucus, do not let Obama pass health care, because he will succeed, and the Democrats will succeed, and you will be in the minority for decades. That is what their consultants told them.

So right from the get-go, our friends on the other side of the aisle had no interest in being part of the solution here because their pollsters were telling them that they had to defeat this bill before we even knew what the bill was. Our friends on the other side were calling it socialism and government-run medicine before we even had a bill to actually look at and discuss.

So they got the media machine all cranked up, got everybody all fired up before we even had something to talk about. So fast forward through a long discussion, long talks where we included both sides of the aisle to try to solve these problems, and now we have a solution. We have a compromise that President Obama has submitted for us to vote on. And we continue to get some numbers, hopefully here tonight, on the exact scoring, but we are close, we know give or take a few bucks where we are at, and we know that this bill will cover 30 million more Americans and this bill has a number of issues in it that are going to benefit the American people.

Let's look at some of the issues, some of the pieces of this legislation that will be implemented within the year. Small business tax credits, the President's proposal will allow small businesses tax credits up to 35 percent. We close the doughnut hole in Medicare. Now our seniors have \$2,000, \$3,000, where it's covered through Medicare part D, and then they fall into a doughnut hole for months and months and months until part D picks back up again several thousand dollars later. Our Medicare recipients have to come out of pocket. We close that hole up. We close that doughnut hole up.

We end the rescissions so that insurance companies can't kick you off the rolls once you get sick. We eliminate insurance companies from being able to deny people coverage because they have a preexisting condition. That is in this bill. We have a provision in this bill that says no child can be denied health insurance because they may have a preexisting condition. We eliminate the lifetime caps of policies so that when someone in your family gets sick and they need coverage, that all of a sudden the insurance company can't say, well, you have spent your allotted amount of money, you're on your own.

It is our moral responsibility to prevent millions of Americans from getting hurt, from getting hurt under the current health care system. And there is no denying it: free preventative care under Medicare under this provision, free Medicare under private plans in this piece that we are putting together here.

Also for people who are 55 and older, between 55 and 64, this creates a temporary reinsurance program until we get the exchange up and running to help offset the cost of expensive health claims for employers that provide health care benefits for those people between 55 and 64 years old. That's what's in this bill. Those are the things that just come online this year. And the improvements will continue.

This is a good bill. Is this a perfect bill? Of course it's not. But we have people on the left saying it doesn't go far enough and voting against the bill, and we have people on the right saying it's socialized medicine. But if it were socialized medicine, people on the left would be voting for it.

This is a pragmatic bill, a pragmatic solution to the health care crisis in the United States of America. And our friends on the other side of the aisle and our friends in the insurance industry say that we should start all over, we should start from scratch, get out a blank sheet of paper. Well, maybe the insurance industry should start from scratch and go back to 1992 and '93 and revoke all of their increases that they have given to the American insurance consumer over the last 20 years or so, rescind all of those increases. You start over. Let the insurance industry start over, and then maybe we can consider starting over.

But people in my district over the last few months, few days, few weeks, were getting 20, 30, 40, 50 percent increases. Small businesses are almost going bankrupt because of the increase of 50 percent to their health care costs. This fixes it. This allows small businesses to go into the exchange, to get tax credits so that they can provide insurance for their employees.

Now, some of those things that I read, and I know a lot of our friends on the other side say that people don't want this, here is the poll that says American people don't want this. And I'm the first to recognize and acknowledge that we probably haven't done a very good job of telling the American people what's in this bill. And that was the essence of Speaker PELOSI's comments about when you pass the bill you'll find out what's in it, meaning that when we pass the bill, the rhetoric and the fiction that has surrounded this bill for the longest time will fall away, and there will be a document that we can all point at, and the American people between now and November will be able to look at what has passed.

We know what's in this bill. We've been debating this for a month. I like how our friends on the other side in one breath say we're trying to jam it

through, and then you look, and the American people are tired of the debates. But you can't have it both ways.

Now all of those things that I mentioned, here is a Kaiser poll: tax credits for small business, 73 percent of the American people more likely to support the bill. Tax credits are in the bill. In fact, these are all in the bill. Insurance exchanges, 67 percent of the American people support the insurance exchanges. The ability to keep what you have, 66 percent of the American people are more likely to support this bill if you can keep what you have. You can keep what you have in this bill. Ban preexisting condition denials, 63 percent are more likely to support this provision of banning preexisting conditions denials. Expanding Medicaid, which is what we do, 62 percent; dependent coverage through 26 which means if you're 26 or under, you can stay on your parents' insurance. How many people support it? Sixty percent. Closing the Medicare doughnut holes, as I mentioned earlier, 60 percent; subsidy assistance to individuals, 67 percent more likely to support the bill.

So we have not done a good job of messaging this bill, but I will tell you what is going to happen. We are going to have an election in November, and I'm looking forward to it. I'm looking forward to the debate because in the debate our friends on the other side are going to want to repeal this piece of legislation. They are going to run their campaign in November about repealing health care reform.

So they are going to have to go out and run commercials saying, those small businesses tax credits are up to 35 percent, we want to repeal them. The ban on preexisting conditions, we want to repeal that. The ban that says no kid, no child can be denied because they have a preexisting condition, they're going to run a campaign in the fall saying, we want to repeal that. The lifetime caps that we're going to eliminate so you can get coverage no matter how sick you get, our friends on the other side are going to run an election saying, we want to repeal that.

The subsidies that people are going to get so that they can afford health insurance, our friends on the other side are going to run a campaign in November saying, we want to repeal that. Helping people 55 to 64 get reinsured, they're going to want to repeal that. Closing the doughnut hole in Medicare, I can't wait to go to the senior centers in my district when this has already been implemented and we've started to close that doughnut hole and the seniors have seen some of the progress, and we go in there and we say, our opponents want to repeal that provision where we closed up that doughnut hole.

Let's have this debate. Let's have this discussion. Let's do it. That's what this is all about. We implement our agenda, then we go out and defend it. And we know what happened. The 8 years, more like almost two decades, 14 years, 12 years actually, that our

friends on the other side were in charge, and then with President Bush controlling the House, the Senate, the White House, our Republican friends on the other side had an opportunity to implement their political philosophy.

House, Senate, White House, we got their supply side economics, we got their foreign policy, we got their health care policy, we got their energy policy and we got their education policy. And look what happened. We got their Wall Street policy, and look what happened. We had a collapse of the financial markets, we had college tuition balloon through the roof, we had energy costs balloon throughout the roof, we had health care costs balloon through the roof, the collapse of our economic system, a prescription drug bill that was not paid for with a doughnut hole you could drive a truck through, and a foreign policy that forced us to a war, an elective war in Iraq.

All of these things were implemented when our friends were in charge. And we had elections on those. And now we are going to pass health care, and we are going to pass our agenda and you look and you see what happened with this stimulus package, the economy is starting to open up, trying to straighten up Wall Street. But we know we can't move forward until we get health care costs under control. We know small businesses are never really going to be able to grow at the pace and the capacity that they need to grow to with this health care anchor hanging around their neck.

Now, I believe that, and many of us on this side of the aisle believe, the government has a moral mission, a mission, a moral mission to protect its citizens. Whether it be terrorists or criminals on the street, there is a moral mission to the government to protect people. And that doesn't stop at the borders. That doesn't just stop with the issues of crime. That responsibility hits every aspect of our society. And if we have an industry that is hurting people, then we have a responsibility to step in and push back that industry and say enough is enough. You're hurting people.

In our country, the government has a moral mission to stop that from happening. That is what this debate is all about, yes, the role and the responsibility of government. And the government is not allowed to just completely step aside while industry abuses happen and happen and happen.

□ 2100

And that is what this debate is about. That is what this bill of rights, health care bill of rights is all about.

And our friends on the other side say, We are for this stuff. They say, We are for it. You pull it out; we are for it.

Well, that is interesting, because we had some votes over the last day or so in committee. This is the House Budget Committee that is starting to pass the legislation that is going to be needed.

Here we go. Protecting Medicare for America's seniors and closing the prescription drug doughnut hole, 15 Republicans voted against it.

Closing the doughnut hole, voted against it. If you talk to them, Well, we are for closing the doughnut hole. We have got to close the doughnut hole.

Protecting Americans from insurance caps, as I just talked about, and banning annual and lifetime limits on health care coverage, 15 Republicans voted "no," we don't want to do that.

Holding health insurance companies accountable, 15 Republicans voting "no."

Bringing down the cost of health insurance for everyone and providing tax credits to small businesses, all of them voted "no." Every Republican on the Budget Committee voted "no" for giving tax credits to small business people.

I mean, this is the equivalent of our friends on the other side who all voted against the stimulus package, and then they go back to their districts when money is coming in and they say, This bridge, this road, this money is going to create jobs in our district.

But you voted "no" against the stimulus package. Don't tell anybody. That is the kind of thing that has been going on in Washington. That is called the old Potomac two-step. The old Potomac two-step.

So we have these provisions in this bill that, when you pull them out and you explain them to the American people, have anywhere from 57 to 73 percent. This is what the American people have been crying out for. And when this bill passes, we are going to have a lot to campaign on and run on.

But our friends on the other side like to talk a little bit about polarizing issues. One of the most recent polarizing issues that they have tried to pull out is the issue of abortion and trying to say that this is going to publicly fund abortions.

Well, we have a letter here from, I believe, 25 or so of the top pro-life citizens in our country: Joel Hunter, senior pastor of Northland Church. I believe he was head of Focus on the Family at one point; Jim Wallis from Sojourners Magazine; a lot of evangelical and Catholics; the former associate general secretary of the U.S. Conference of Catholic Bishops, all saying that this Senate health bill upholds abortion funding restrictions. The Catholic Health Association, 600 Catholic hospitals.

I went to Catholic school for 12 years. I know where the Catholic church and the Catholic hospitals stand on the issue of public funding for abortions, and believe me, believe me, I had a lot of nuns and a lot of priests and a lot of brothers going to Our Lady of Mount Carmel, in Warren, John F. Kennedy High School, and I will tell you that those nuns and those administrators who run Catholic hospitals, 600 of

them, would not support this legislation if they believed that there was public funding for abortion.

And I think the head of the Catholic hospitals said that—we are all pro-life, but they believe that the language in the Senate bill, some of the language that we kicked around here early on in the House version, will sufficiently prevent public funds from being used for abortions.

That is 600 Catholic hospitals saying that. That is not me saying that. That is not the Democrats say that. This is Joel Hunter and a variety of others who are professors of Christian formation and disciplines, discipleship, Pentecostal, theological seminary, Leadership Institute, Loyola University, University of Dayton, Duquesne. These are some of the leaders. Jim Wallis from Sojourners; Ron Sider, Evangelicals for Social Action; Catholics and Alliance for the Common Good, on and on and on.

But our friends on the other side, because I know, I was getting calls in my office today, getting people all hopped up on the abortion issue. Let's look at the facts. Let's look at what is in this bill, and we are going to have that debate. And just like the discussions in August about death panels and we are going to kill people's grandparents and all that nonsense that we heard in August, where did that go? It dissipated. It just disappeared because it wasn't the truth. And so it just faded away. And all of these arguments that our friends on the other side are making now are just going to fade away because they do not reflect the facts. What reflects the facts are the things that we are trying to deal with here.

Now, look at some of the stuff that we are trying to address. Between 2009 and 2010, monthly prices in the doughnut hole increased by 5 percent or more for half of the top 10 brand-name drugs. So increased by 5 percent or more for monthly prices for these drugs that most of our seniors get.

Now, from 2006, full negotiated prices for top brand-name drugs between 2006 and 2010, and I will just use some of the percentages here: Plavix, for example, 25 percent. Lexapro went up 25 percent; ADVAIR, 32 percent. Unbelievable increases in prescription drugs. And we are asking our seniors to continue to pay these increases that happen when they fall into the doughnut hole.

So, Madam Speaker, we have got a moral responsibility because so many people are being hurt in our country today, and I stand here this week as we stand on the brink of passing a significant piece of legislation that is not perfect, and I don't think anybody says it is. We are all human here in this Chamber and in the Senate. The President and his team, we are all human. We are going to make mistakes. It is not going to be perfect. But what we are doing is moving forward in a significant way.

One of the huge issues we have in this country is that we have millions

and millions of Americans who don't have health care, so what they do is they show up at the emergency room and have no money. They are not on Medicaid. They are not on Medicare. They don't have private insurance. They are not a veteran, so they go into the emergency room when they get sick. This is what happens.

Not only is that inhumane and not only, I would think, do we have some kind of moral duty as elected officials in the United States to say, you know, that is just—I have got a problem with that. That is just not right. What do we do? We have got to do something.

So this bill is an attempt for us to do that, to step in and help people, empower them to be able to afford insurance, and create a system where they are able to afford their health insurance and go into this exchange and be able to afford insurance. Because some people say, Well, I don't want to pay for those people. I got mine and I got my health insurance and I am cool. I have got a job and it is all right.

But you are already paying for them, because what happens is four or five uninsured go into the hospital, go into the emergency room, costs a lot of money but don't have any way to pay for it, and then you walk in behind them and you have your insurance card. Guess who is paying for their treatment that they didn't pay anything for? You are and the next guy who walks in with an insurance card and the next person. These costs all get shifted and so you see these huge increases.

So we have a system where we don't prevent anything. We wait until people get deathly sick, go into the emergency room, stay there for a week instead of getting a \$20 prescription that would have saved us all a boatload of money.

This is not a discussion about whether the government is going to run the health care industry or the insurance companies are going to run the health care industry. This is about doctors running the health care industry. This is about making sure doctors don't have to call up the insurance companies and haggle with them over what is covered and what is not covered.

It is 2010 in America. We are the wealthiest country on the planet, and we have the most dysfunctional health care system going. Yes, we have got tremendous high-end care. But if you were setting up a system, you wouldn't certainly say to 30 million people in your country, Just wait until you get absolutely deathly sick, then show up at the emergency room and we will take care of you then. That is not how you would set it up.

And our friends on the other side love to have this discussion about we are losing your freedom. You are losing your freedom. You are not losing your freedom. How free are you when you are sick and you can't get anybody to take care of you? How free are you then? How free are you when you want

to leave your job and go get another job, but you can't because you have a preexisting condition or your spouse has a preexisting condition or your child has a preexisting condition and you are stuck? That is not our idea of freedom.

How free are you if you want to go start a business and create wealth and jobs in the United States, but you can't because you have a preexisting condition? How free are you as a small business person? If you are just the average small business person, you had a 126 percent increase over the last 5 or 6 years. Now, how free are you to run your business the way you see fit, to make the investments that you want to make into capital, into technology, into worker training, into wages for your workers, more into the pension plan for workers, hire more workers? How free are you?

And these folks that can't afford health care and they get a lot sicker than they would normally have gotten, what kind of quality of life is that? Life, liberty, pursuit of happiness. These things mean something. And when you talk about what the Founding Fathers meant when they said life, liberty, and the pursuit of happiness, they meant that government has the responsibility, a moral responsibility to protect people's lives, liberty, and their ability to pursue happiness. And when we have a system in place now where an industry is limiting that freedom, reducing that quality of life, the government has an obligation to protect them so that they can be free, and that is what we are doing with this piece of legislation.

I mean, look at what is happening here, the issues that we are addressing. Think about this. This is what is in the bill. This big bogeyman that you hear about on Fox News that is going to end western civilization as we know it if this thing passes has a 35 percent tax credit for small businesses. It says that children cannot be denied health insurance because the kid has a preexisting condition. It is going to say that the lifetime caps that people have on their insurance will be eliminated so, no matter what, kids will get covered. It will extend coverage so that young people can stay on their parents' insurance until they are 26 years old. If they are getting out of college and want to go on to get an advanced degree or they hit a rough patch with the job market or they are trying to figure things out, you are not going to be booted. And how many parents aren't going to have to worry about that anymore? Free preventative care under private plans, free preventative care under Medicare so we can prevent a lot of these problems from happening.

If you are 55 to 64, there will be a re-insurance opportunity for employers who are employing people 55 to 64 to make sure that those people have coverage. The doughnut hole will be closed over time so that senior citizens can afford their prescription drugs. And

when you look at all these things, from time and time and time again, these are very popular among the American people.

Tax credits for small businesses, 73 percent more likely to support. Insurance exchanges, 67 percent. Keep what you have, 66 percent. Ban preexisting conditions, 63 percent. Medicaid expansion, 62 percent. Dependent coverage through 26, 60 percent. Close the Medicare doughnut hole, 60 percent. Subsidy to individuals, 57 percent. And all of these things, as we start to vote on them, our friends on the other side say, Well, we are for those.

So in the last day or so the House Budget Committee was working on this legislation and they had some opportunity to vote on these issues, and so I just want to share with Members of the House how our friends on the other side on that committee voted.

Protecting Medicare, closing the prescription drug doughnut hole, 15 Republicans voted against that.

Protecting Americans from insurance caps, banning annual and lifetime limits on health care coverage, 15 Republicans voted against that.

□ 2115

Holding health insurance companies accountable; 15 Republicans voted against that. Bringing down the cost of health insurance for everyone and providing a tax credit to small businesses; 15 Republicans voted against that.

These are the basic provisions of our health care reform bill that between 57 and 73 percent of the American people support. This is not Medicare for all. This is not single-payer. There's no public option in this bill. Many of us on this side don't like some of that—the fact that those aren't in there. But this is a significant step forward, some basic reforms, and when we have 15 members of the Budget Committee on the Republican side consistently vote against tax credits for small business to get health care, you know they're doing it for one reason: They're doing it for politics. Madam Speaker, this is all about politics. Go back to the memo that someone left somewhere in some room that the press got a hold of that told the Republicans, Do not let Barack Obama pass health care reform. Do not let them. Do not let the Democrats get this big victory because you will be in the minority for another decade or two.

And so right out of the gate they had no interest, Madam Speaker. Our friends on the other side had no interest in cooperating. No interest in adding to the debate. They were against this bill before there was even a bill written. They were calling it socialism before there was one item printed on this piece of paper here telling us what was on this bill.

That's not what the American people want. The American people want us to sit down, work together—no one is going to get everything they want—and pass something and move it for-

ward that's going to help the American people, that's going to allow us to meet our moral obligation to protect the American people, to protect those kids who are being denied because of a preexisting condition, to protect those seniors who fall into the doughnut hole, to protect those families who get denied because of a preexisting condition, to protect those families who hit a lifetime cap and get thrown out on their own.

This is what this is about—to help empower thousands of small businesses who've got the anchor around their neck because they get 20, 30, 40 percent increases in health care. That's what this bill is about. It's about protecting our citizens, it's about empowering our citizens, it's about making our citizens freer than they are today when they're trapped in this ungodly health insurance system that hurts many of them. We can't stand by and stick our finger up in the air and see which way the wind is blowing and allow millions of people to go get hurt, and then 30, 40, 50 years from now go sit on the rocking chair. Our children are going to ask us what we did when we were in Congress. What did you do to move the country forward? And we're going to say what? We failed. We didn't muster up the courage to make the tough votes. We didn't have the ability to look through the clouds and the smoke and the mirrors, look past the bogeymen that have been created on this bill.

I love it. I love how these arguments have just fallen apart, from death panels, now abortion. They're saying everything is publicly funded abortion here. And 600 Catholic hospitals are endorsing the bill. Now how do you say that this is public funding for abortion when 600 Catholic hospitals have endorsed this piece of legislation? So our friends on the other side need to go to all these 600 hospitals and all the sisters that are there, intimately involved in the health care of their patients, and all of the Catholic administrators of all of these hospitals and say, You're pro-abortion. Good luck having that argument. It's a phony argument that's being created for politics, just like the death panels were, just like the illegal immigrants were going to be covered under this bill. All of those issues have been demagogued in this House and across this country to try to scare legislators and the American people. And the dust is going to settle, and we're going to be able to look back on this vote.

I look forward, Madam Speaker—I will tell you this—I look forward to the debate in the fall discussing with the American people exactly what is in this bill. I look forward to talking to my Chamber of Commerce, my friends in small business, that they're going to get a 35 percent tax credit, and they're going to be able to go into this exchange and negotiate with a bunch of other small business people, thousands, to have some bargaining power to reduce their health insurance costs. I

look forward to going into a debate saying, You know what was in this health care bill? We made sure that no insurance company could deny any child because they have a preexisting condition. No insurance company could deny a citizen of this country because they have a preexisting condition. That our seniors are going to get more prescription drug coverage. That our citizens, when they hit a catastrophic health event in their life, that there won't be any lifetime caps or limits to how much they can be covered. Madam Speaker, that is what this health care debate is about.

No matter how many times our friends on the other side try to say they want to work with us, they have been given the opportunity to sit down and work. And they say they're for a lot of these things but, again, already in committee, peeling out the votes, closing the prescription drug hole in the Budget Committee, 15 Republicans voted “no,” we don't want to close the doughnut hole. Protecting Americans from insurance caps, banning annual and lifetime limits on health care coverage. This is the vote. That's all the vote was on. Fifteen Republicans from the Budget Committee voted “no,” we don't want to protect Americans from the caps and ban annual lifetime limits. Holding health insurance companies accountable, 15 Republicans said, No, we don't want to hold them accountable. Bringing down the cost of insurance, providing a tax credit to small businesses, 15 Republicans voted “no” for a tax credit for small business because their consultants and pollsters told them they couldn't let this bill pass.

So out of 15 Republicans on each one of these votes, a majority of the Republicans on all of these votes, out of the 15, voted “no,” we don't want to do it. In some instances, it was close to all of the 15.

Madam Speaker, we have an opportunity here to make history. But that's not why we're doing it. We're doing it because this government, from its inception, this government from its inception has had a moral mission; a moral mission to protect and empower its citizens. And when an industry and their unsavory business practices are hurting the American people, we have a moral obligation to intervene. And we have a moral obligation to empower by making sure that our citizens are free to go in and have expanded choice, that they are free from an insurance company saying, You're off the rolls now because you got sick. You're empowered because you can be healthy and get access to care and you can experience the liberty that this country has provided—life, liberty, and the pursuit of happiness. That's what this bill is about, and I look forward to having an opportunity to continue to advocate for it.

With that, Madam Speaker, I yield back the balance of my time.

HEALTH CARE REFORM

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

Mr. KING of Iowa. It is my privilege and I'm honored to be recognized to speak here on the floor and to address you tonight. Having listened to my friend and colleague from Ohio talk about the high moral calling that there is for them to pass socialized medicine, I'll just tell you, Madam Speaker, it's hard for me to reconcile those things. It's hard for me to think of a country—a beautiful country with a deep, rich, free tradition that would give up its freedom and its liberty and its sense of responsibility for the sake of the government providing something that 85 percent of people are providing for themselves.

The statements that were made by the gentleman from Ohio about what is not freedom—it's not freedom to be able to start your business and have to worry about paying health care premiums or it's not freedom to see those premiums go up by a large percentage every year. That whole spiel, Madam Speaker. And I think it misses the point entirely. I think the freedoms that I'm hearing the gentleman from Ohio talk about are the types of definitions for freedom that I hear talked about by those that live in places like Canada or the United Kingdom or France or one of those countries that has socialized medicine; one of those countries that says freedom is having free health care provide by somebody else paying for it as a taxpayer. It's not the measure of freedom. It's not the measure of liberty. The measure of freedom and liberty is entirely different. You can't ever measure freedom by what is free, because freedom is never free. And it is a huge dichotomy in this Congress that people on this side of the aisle that want to subvert the definition of freedom. And so I will just say freedom is not about what is free.

Let's talk about liberty. Liberty is to be able to make the decisions for yourself, but be bridled by morality. That's the difference between liberty and freedom.

Other people in the world talk about freedom as in what's free from government, as if that's a measure of liberty. But when you talk about what's free from government, first of all, it's never free. Somebody has to pay the taxes, whether it's the people who are earning and paying taxes now or whether it's the children or grandchildren that they would foist this debt upon with this socialized medicine bill.

Madam Speaker, we could stand here tonight and we could talk about nuance after nuance of what's in this bill and what isn't. The truth is, the gentleman from Ohio doesn't know. And I suspect that nobody in the entire Democrat caucus knows. I'm confident nobody on the Republican side knows what's in this supposed negotiated

change. A night or more ago, there was a bill that was brought to the Budget Committee. It's a shell bill. It doesn't have in it the changes that they're trying to get established here. It's a shell bill. It's designed to start the clock ticking so that when they get the arms twisted and the Speaker uses all the leverage at her disposal and we can hear the bones breaking across Capitol Hill from arms twisted up behind people's back, some of them carrot—some of them stick.

When all of that is done, they want to have this machinery in place so that the Speaker, who sits up in her office making these deals behind closed doors, will have a bill come down here to the floor that nobody has seen, at least so far, and a bill that will be a reconciliation package that is unprecedented in its tactic, in its procedure, to propose changes to a bill that is the Senate version of the bill.

And this is the unbelievable part, Madam Speaker—the very idea that we have before us this week, and at least threatened to come forward if the votes can be put together this week, a socialized medicine bill, a bill that could not today pass the United States Senate. A Senate version of the bill wouldn't pass in the Senate. Everybody in America knows that. That's why the results of the election in Massachusetts made so much difference. The people in Massachusetts, arguably the least likely in this modern era to save liberty for Americans, voted SCOTT BROWN in as their Senator. He said that he would oppose this Senate version of the health care bill.

□ 2130

The bill that passed on Christmas Eve can't pass today on the eve of St. Patrick's Day. Not out of the Senate it can't, Madam Speaker. And so we are in this odd, perverse situation where perhaps for the first time in the history of America—and if this happens, certainly with the largest magnitude of impact, a bill that can't pass the Senate in its current condition—that being the configuration of the Senate as reset by the people in Massachusetts and the American people—a bill that can't pass the Senate comes to the House that's to be passed here on the floor of the House under the Slaughter rule, which deems it has been passed but doesn't require people to vote on it.

And so we have a bill that could very well go to the President of the United States where he is salivating to sign it, a bill that couldn't pass the Senate, a bill that couldn't pass the House, but nevertheless could become the law of the land. That is the breathtaking anomaly of what we're facing here, and it's in a bill that cannot be brought here to the floor of the House because, even though Speaker PELOSI can let 37 Democrats off right now, according to the most recent news reports, those 37 happen to represent “noes” or hard “noes,” and another 55 are undecided.

And if the Speaker's to pull the votes together, she's got to run the table on

the 55 undecided and hold all of the “noes” together. Every undecided would have to decide that they're going to be in favor of socialized medicine for this to work. And the brokered deal would be that they would bring the Senate version of this to the floor under a rule that would be self-enacting, a rule that would be configured right up here on the third floor in that little old Rules Committee that I call the hole in the wall, where the hole in the wall gang usurps the liberty of this deliberative body and usurps the franchise of the Members of Congress and send the bill down here under a limited amount of debate time.

Probably it would be a closed rule, so there would be no amendments to the rule; and the rule would be self-enacting which would automatically deem that the bill that has passed the Senate in the past that couldn't pass the Senate today is deemed to be passed by the House of Representatives, even though the Members on this floor don't have the will to vote for it so that it would go to the President of the United States, whom I said is salivating to sign it.

He would sign it, and we would have the law of the land, a bill that swallows up one-sixth of the economy of the United States and nationalizes the management of the health care of every American, over 300 million of us, into law enacted, without being able to pass the United States Senate, without being able to be supported and passed for the purposes of becoming law in the House of Representatives.

And then behind that, the Speaker is asking people who have gone through a crucible to get here—and I will say, Madam Speaker, I respect the intelligence of my colleagues on both sides of the aisle. I think it would be hard to believe that there are people in this Congress that would be so stupid to believe that they could be promised that if they just vote for the Senate version of the bill with all of its warts, moles and scars and all of the smelly things that are part of it, the Cornhusker Kickback, the Louisiana Purchase, the Florida Gator Aid, the national health clinics to the tune of \$11 billion, and about six or seven other special packages and components that are in the Senate version of the bill, none of them passing the smell test.

But asking this House to vote for a rule that automatically enacts it so they don't have to vote for the bill on the promise that there would be a reconciliation package that would be passed here in this House that would go over to the Senate that would be designed to fix the flaws in the Senate bill, strip out the Cornhusker Kickback, strip out the Louisiana Purchase, strip out the Florida Gator Aid, and strip out the \$11 billion worth of public health clinics that have been leveraged by BERNIE SANDERS from Vermont and those other six or seven egregious bargains that have been made and convince the Democrats, 216 of them, to