

promise to broadcast meetings on C-SPAN? Robert Gibbs' response: The President's number one priority is getting a bill through the House and the Senate.

Yes, Mr. Speaker, we get that.

Let's get ourselves out of this hole that we've dug at any cost, with any sweetheart deal, whatever we have to do to get 60 votes. Let's pass this darned thing so that I can stand up here at the State of Union and declare victory. We can all pound our chests and do the high fives and the knuckle to knuckle, or however you do that these days, and declare victory and, for goodness sakes, move on to something else because this is killing us.

Unfortunately, Mr. Speaker, if and when that happens, it is going to kill the American people. I have great concerns, and my colleagues do as well.

I yield back to the gentleman from Athens, Georgia.

Mr. BROUN of Georgia. I thank the gentleman for yielding.

As you and our colleague from Tennessee, Dr. ROE, were talking about the Senate bill and as you went on, it just occurred to me that I spoke just earlier about the Newspeak in the leadership in Washington—in the House and the Senate as well as in the Presidency—and about how “transparency” now means being obscure and opaque and how “openness” means being in secret.

As to the deals that are being struck, from everything we understand in my language, when people are threatened with harm if they don't go in a certain direction, that's called “extortion.” If somebody is offered a perk or money or something for going in a particular direction, that's called a “bribe” if one accepts it.

Mr. Speaker, we're having a lot of extortion and a lot of bribery going on in this process. I will repeat that. There is a lot of extortion and bribery going on in this process, and the American people deserve better. The American people deserve more. They need to stand up and reject this process of secrecy, of obscurity, of opaqueness, of broken promises, and of everything that we see going on in this House.

Mr. GINGREY of Georgia. If the gentleman will yield back to me, I want to point out to my colleagues, Mr. Speaker, that I realize our time is limited.

As we conclude our hour, the gentleman didn't mince any words. We know that, my colleagues, and I love him for that. He speaks plainly; he is blunt; and you can understand him unlike the typical politician, but what he is talking about are things like—and we mentioned it—the Corn Husker kickback. We're having fun with these names.

One-hundred million dollars for Nebraska's support of Obama health care. I credit the Governor of Nebraska who says, No, we don't want it. God bless him. The Louisiana purchase: \$300 million to purchase the Louisiana vote. That's about 12 million more dollars than it cost to purchase the whole Lou-

isiana Territory in current dollars. UCONN: \$100 million for Connecticut's support. I guess that's Mr. CHRIS DODD of the Obama health reform. Gatorade: 800,000 seniors in Florida get to keep their Medicare Advantage.

What about the other 10.2 million seniors in the rest of the country? What about the 175,000 in my great district, the 11th District of Georgia? What happens to them? Mr. Speaker, they get pushed under the bus. That's what's happening to them. It's not right.

Well, here is what the American people think. Here is what they think. I know the President knows this, and I know the Democratic majority knows this, and I know that's why they want to pass this thing in the dark of night. They don't want C-SPAN looking in. They don't want Republicans looking in. They don't want the American people looking in. They want to get out of that hole and get out of town. That's what their plan is.

Obama's health care marks hit a new low as 54 percent disapprove of Obama's handling of health care and only 36 approve. Look at his overall approval rating going back to February of 2009, Mr. Speaker, when it was 61 percent. Let's just fast-forward here over on this slide to January of 2010, and we are talking about 46 percent. Scary times for the majority party. Scary times for this President. But scarier times for the American people.

We hear this expression all the time. Mr. President said it himself: It is time to press the reset button in dealing with Vladimir Putin, the Russian President. It is time to reach out with an unclenched fist to Ahmadinejad, this dictator over in Iran, who is trying to develop a nuclear weapon despite all of our pleadings and reaching out with an open hand. It is time to push the reset button with Kim Jong Il in North Korea.

□ 2100

Well, Mr. Speaker, I suggest this time to push the reset button with the American people, and give them a fair shake and be honest with them and tell them what is in this bill, these 2,500 pages that they can't understand. They could if they had time or if they had an opportunity, and C-SPAN is trying to give them that opportunity to shine the light of day on this process.

That is what it is all about. That is what Madam Speaker promised. That is what this President promised. It is time for them to deliver.

Mr. Speaker, I want to yield a few more minutes, whatever time remains, to my good friend from Tennessee, Dr. ROE.

Mr. ROE of Tennessee. Very quickly, Mr. Speaker, I think what the American people want for us to trust is transparency. The people have to trust us for us to govern, and they can't trust us if they don't know what is going on.

I know, Mr. Speaker, you went home, I went home for the holidays; and they

said, What is going on with the health care bill? And I told them, You know as much as I do. Because we are in the dark just as you are. And that is not the way it ought to be.

Mr. GINGREY of Georgia. I thank the gentleman from Tennessee. I thank the gentleman from Texas. I thank the gentleman from the great State of Georgia.

Mr. Speaker, we thank all for the opportunity for the members of the GOP Doctors Caucus to spend some time tonight to explain to our colleagues on both sides of the aisle what our concerns are. I think we did it in a very fair way. We did it in a way that is not a personal attack on any individual, any Member of this body, any member of the administration. We are just asking to give the American people a fair shake.

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

HEALTH CARE BILL

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

Mr. BURGESS. Mr. Speaker, I would like to continue much as we have done over this past hour, talking about this same issue, the health care bill that is now before the House and Senate, even though none of us have seen the finished product, and what has happened on the issue of transparency over these past several weeks since the House adjourned in the middle of December.

I am going to talk a little bit more about the resolution of inquiry because I believe that is an important tool that is available to the minority Members of the House. And I think it is a tool that we need to use, a tool that we need to exercise in order to get the American people the information that they are going to need to make up their minds about this bill.

If time permits, we will talk a little bit about some of the structural issues, some of the procedural issues that still are yet to occur if this bill indeed passes and is signed into law: What are the ramifications thereof? When will things happen? What will occur at the level of the Federal agency at the Department of Health and Human Services?

But I thought, first, it might be useful just to do a brief recap of where we have been this past year.

As most of us know, it has been not quite a year since the inauguration took place here in January of 2009, a historic day. A record number of people came and stood to watch the inauguration and to hear the speeches that occurred that day.

We had a very spirited campaign during the fall. We had the appearance, for the first time, of some rather stark economic news that hit the headlines and perhaps dictated some of the course of the campaign, and certainly

dictated some of the course of the very early legislative process in this body.

I will tell you, as someone who watched the campaign of 2008 for President, as someone who watched that very closely and was very interested in the health care policy aspects of that campaign, I was, frankly, surprised. When the campaign came to a conclusion and the votes were counted and the President won, I was surprised that there was not a bill that was almost ready to come to either the Senate Finance Committee or one of the committees of jurisdiction on the House side.

I rather expected that to be the Senate Finance Committee, because in October of 2008, Senator BAUCUS, the chairman of the Senate Finance Committee, convened several stakeholders over in the Library of Congress in the Members' briefing room there, had a day-long session, and took testimony and began, for all the world, to look like he was crafting a health care bill; produced a white paper shortly thereafter that, for all the world, looked like it was going to be a health care bill.

So after the election, I thought that we would see, relatively quickly, the introduction of at least some draft language as to what this health care bill was going to—what form it was going to take now that the election was over.

We all remember the election. Senator MCCAIN had his ideas on health care. We might come back to those in just a moment, because some of that, we are back to the future now with some of those same tax issues that are now being raised by the Democrats as a means to pay for the Democratic health care bill. They are talking about using some of the same procedures that Senator MCCAIN was talking about during the fall of 2008. So that is a little bit of irony, when they spent so much money blasting the Presidential candidate on the Republican side over his approach to health care.

But we heard President Obama's approach. He said there was going to be a mandate to cover children. He said there was not going to be an employer mandate nor would there be an individual mandate, but that anyone who didn't have insurance would be able to have insurance just as good as a Member of Congress under a program like the Federal Employee Health Benefits Program.

So those were the issues that were discussed and the platform that the President produced during the campaign. Then we had the election. I again was surprised that no bill came forward. I thought perhaps that Christmas of 2008 we might see from perhaps one of the Senators or from someone on the House side, again, at least a draft or an outline or some structure of what this bill was ultimately going to resemble.

Then everyone came back to town for the swearing in in early January of 2009. We stayed around for the inau-

guration. Three weeks later, the inauguration occurred. And I thought, well, very quickly now we will see some structure on the health care bill.

Now, arguably, there was a great deal of difficulty with the economy. The stock market was in free-fall in those days shortly after the inauguration, and there was a sense of urgency to do something about the economy.

I think the wrong decisions were made in February. But, in all honesty, I think the wrong decisions were made in September and October of 2008, when President Bush put forward the economic stabilization plan and Secretary Paulson, then-Secretary of the Treasury, put forward the economic stabilization plan that they proposed in late September of 2008. I thought those ideas were wrong. I thought the stimulus bill was wrong in February.

In fact, when you look back over this year and you look at the expenditure of political capital on that stimulus bill, had the health care bill been ready to go, had there been anything more than just rhetoric during the campaign, and had there actually been legislative language laid down or at least legislative principles developed from which legislative language could be developed; if we had taken that health care bill up in February, because of the enormous popularity that the President enjoyed in those early days after the inauguration, I think that the President could have pretty much gotten whatever he wanted during those early days. But the decision was made, for whatever reason, not to do that, but to go forward with the stimulus; and that is the legislation that came out of February.

We also had a bit of a disconnect with the nomination for the Cabinet Secretary position for Health and Human Services and the name originally put forward. In fact, that individual had cleared through the Senate committees that were necessary to confirm that individual. But then, for problems that no one could have foreseen, that individual withdrew his name from consideration, and we went for several months without an agency head at Health and Human Services. And I think you can see during that interval that the agency did suffer from not having anyone at the helm at that point of that organization, because, obviously, Secretary Leavitt left upon the completion of the Bush Presidency, and there was no name at that point even to be confirmed by the Senate. So it was problematic that there was not a Cabinet Secretary named for Health and Human Services. And I think, in fairness, that did cause some of the delay on the health care front.

We had, of course, as will always happen during the course of our legislative year here, we had things that happened around the world, things that happened in this country. We had a novel flu, H1N1, that came on the scene that took a lot of attention and time and discussion. We still had problems with the economy. No bill was produced during all this time.

Now, when the Senate Health, Education, Labor, and Pensions Committee met in June for the first time, they began to hear and began to mark up a bill in the Senate committee. And that was really the first glimpse that the American people had of what this new administration and what this new Congress was going to do as far as health care policy, and it was startling. It was a startling revelation because the cost and coverage numbers that came out of the Congressional Budget Office were some of those first passes through the Health, Education, Labor, and Pensions Committee in the other body, some of the cost and coverage numbers were quite startling.

The cost was quite high, the coverage numbers were quite low, still leaving many people in this country uninsured; and there was quite a scramble to try to adjust things, try to pull the costs down and try to bring the coverage numbers up. In fact, we saw that evolve over the next several months, not just in June, as the Senate Health, Education, Labor, and Pensions Committee dealt with the bill, but on into the summer when the three committees in the House who have jurisdiction over the bill, as they dealt with the bill, and then finally the Senate Finance Committee for the last part of the bill. We saw quite a bit of maneuvering and some magic numbers occurred.

We have got to keep the cost under \$1 trillion. I think \$900 billion is where everyone generally agrees they want to keep that number. And if you exclude people who are in the country without the benefit of a Social Security number, we have got to insure in excess of 90 percent, perhaps 93 or 94 percent. Bearing in mind that 85 percent are insured today, we want to get that number up to 90, 92, 93 percent for that cost of nearly \$1 trillion over 10 years.

So there was a lot of maneuvering around cost and coverage. Cost and coverage really hadn't been a discussion during the campaign of 2008. Cost and coverage really wasn't a discussion around the time of the inauguration. But cost and coverage really stole the show during the summertime.

Now, that was complicated because we had just gone through a terribly, terribly difficult budgetary process in the House and in the Senate, and the deficit numbers were higher than anyone ever thought possible, that anyone thought that they would ever see in their lifetime. So we were already dealing with a budget that was literally bursting at the seams, and then we found a \$1 trillion price tag on this bill that came out of the Senate.

And then, for reasons that I just simply cannot explain, the leadership of the House of Representatives decided in June, while all this drama was unfolding with the Senate, Well, we will just do the cap-and-trade bill. We will just do this energy bill and raise taxes on energy, and maybe that will help us offset some of the cost of this health care bill. It was the darnedest thing I had ever seen.

We had marked up a bill in committee. It seemed pretty terrible to my observation during the committee process, but nevertheless we marked up a bill that was voted out of committee, and then it just lay there for about a month. It was like no one wanted to touch it. People were stepping around it. No one wanted to actually address this cap-and-trade bill.

Then, suddenly, it was brought to life, brought back from the dead, literally, and passed within less than a week's time here on the House floor. And we passed it late in the day right before we left for the 4th of July recess. After the news shows and the news cycle was over for that weekend, we passed that cap-and-trade bill.

I remember walking out of this House. It was a scant number of votes. There really were not a lot of the excess votes that the Speaker had for that cap-and-trade bill. And I remember walking out of here, and this was not a good feeling of what the House just did.

I have got to tell you, when I got home to my district on Saturday morning, just 12 hours later, the people in my district were up in arms about what the House had done. Even though I had voted against the cap-and-trade bill, there was a lot of anxiety and, in fact, anger in my district because I hadn't stopped this legislative travesty from coming forward. And what in the world did Congress think it was doing with passing this type of energy tax when the country was faced with this severe a recession?

We just had a summer before where gasoline prices had gone through the roof. We perhaps got a little bit of relief there, but it was only because the economy had faltered, but at least energy prices were down. And, now, you are going to raise taxes on energy to put us right back where we were the year before? I don't think so.

So a lot of Members came back here from that July recess significantly set back by what their constituents had told them during the recess over the July 4th weekend.

You can just imagine, Mr. Speaker, walking in your 4th of July parade. You are somewhere behind the American Legion, in front of the Cub Scouts. And as you are walking down Main Street in one of the cities in your district, people are yelling at you from the side about this bill that you passed. And nobody read the bill. That had been over the news. And people were yelling: Next time, read the bill, and even adding adjectives to those exhortations.

So many Members of Congress came back a little bit shaken by what they had encountered in their districts because of some of the actions that Congress had taken.

People thought nobody would notice about us passing a cap-and-trade bill late on a Friday afternoon or late on a Friday night right before a holiday break, but the American people were

engaged. The American people were paying attention. And as a consequence, as we worked our way through July, remember, the big scheme or the big plan was that we were going to take this bill up in the three House committees, my committee of Energy and Commerce, the Committee on Ways and Means, Committee on Education and Labor.

Those three committees were going to take up identical bills, work through them, pass them out of their committees, and then we were going to bring the health care bill to the House floor, vote on it right before the August recess, was the plan, and then we would all go home for the August recess having passed this massive health care bill.

□ 2115

Well, it didn't work out like that. Now, the time for the markup in committees was significantly condensed. Although, no, we're not supposed to talk about process too much, I will tell you this is the type of legislation that really, yeah, it's going to take months. My understanding is—I was not here in 1990 when the Clean Air Act was passed, but it was my understanding it was a months-long markup process in Energy and Commerce. That's the way it should be.

This is complicated legislation. It's going to affect a lot of aspects and a lot of people's lives. There really was not a reason to rush this through unless you didn't want anybody to know what you were doing. And that's the impression that the American people got from this Congress, that we were trying to do it fast so we could sneak something through before anyone really realized what had happened to them, just as we did with cap-and-trade. But because we did it with cap-and-trade, the American people said, Aha, not so fast, and you saw Members begin to waver. And they wavered just enough so that the bill did not pass out of all three committees until we were right up against the August recess.

The bill passed out of my Committee of Energy and Commerce, which was the final of the three committees to mark the bill up. I think we got more time than any of the other committees. Some just had a single day, a 24-hour period, to mark up this complex and complicated legislation. We had at least had several days, though there were several of those days that we didn't actually work while the Democratic leadership tried to fine-tune the bill and take some of the rough spots out of it. But we did have at least a period of time in our committee to read the bill, become familiar with it, and then it passed.

One of the myths that I should dispel is that the Republicans were not involved in the process. Republicans have been involved in the process from day one. Number one, I was involved in the campaign in 2008. I talked to the transition team right after the election and

said, Health care is going to be important this year. I know something about that. I would like to be consulted as you write this legislation. I went to my chairman with the same comments. I didn't give up a 25-year medical career to sit on the sidelines while Congress deals with a bill that affects most of my friends back home who are physicians. No. I wanted to be involved in that process, but we never were.

We were never asked. We were never consulted. We were vilified along the way that we had no ideas and that we would not offer ideas. I had 50 amendments—50 amendments that I offered in committee, in the Energy and Commerce Committee. Now, some of them were great amendments, some of them were relatively modest amendments, but every one designed to improve what I thought was a bad bill. Now, it was still likely to be a bad bill at the end of the process, I was likely to vote against it, but at least it would be a better bad bill as it came out of committee than it would have been had there been no input.

Now, in fairness, the committee did ultimately accept several of my amendments, and several of my amendments were put in the House bill as we passed it out of committee July 31. Unfortunately, those all left the bill some time after that when the bill went to the Speaker's office to be rewritten. But I appreciate the fact that the committee was able to or was willing to accept at least a few Republican ideas.

Then the bill goes to the Speaker's office. A great deal of mystery surrounding it. Where is the health care bill? No one knows. No one knows what's going to happen to it. Are we going to get it the first of October, are we going to get it the middle of October? Remember, the President came right here to the House of Representatives and spoke to a joint session. It had the Senate and the House, both sides. You may remember there was some excitement that night because of some debate that occurred on the floor during the President's speech. But the President said, I welcome ideas from both sides. I want Republicans to offer ideas. But when we offered ideas, the sound of crickets chirping.

The President said during July that, You know what, I'll invite any Republican Member to come down to the White House and go through this bill line by line so they will understand what I'm trying to do. I said, Great, Mr. President. Fired a letter off. Made a call down to the White House. That was around the time of the famous beer summit that you might remember. I said, I don't drink beer, but I'll bring Diet Coke if that will help pass the time. But I would appreciate the opportunity of going through this bill line by line. Again, never heard a word. Did see something quoted indirectly in one of the newspapers on the Hill that the White House really was not interested in speaking with me on that subject.

The President then offered during that speech in the middle of September, the President said, I will sit down with anyone. It's interesting. The President will sit down with Ahmadinejad and Hugo Chavez without preconditions, but he's not sure about congressional Republicans. But that night at least he said, I'll sit down and meet and talk with congressional Republicans about this bill. Again, great many ideas to offer, Mr. President. I even produced a summary of the 50 amendments that I'd introduced in committee, many of the health care bills that I'd introduced during the course of this year, and said, Let's talk about some of these ideas down at the White House. Again, no answer back for that.

In October, kept trying to get information out of my committee chairman—the Subcommittee on Ways and Means—Mr. STARK, my subcommittee chairman, Mr. PALLONE. When can we see a bill? We're going to get this bill and we're going to take some time to read it and understand it. When can we see this bill?

Well, you'll have plenty of time. Don't worry about that. It will be coming along at some point. Maybe it's too complicated to read before we vote on it.

That bill left our committee July 31, in excess of a thousand pages. We went home to our August town halls during the summer and people didn't like a thousand-page bill changing their health care. They said, Members of Congress won't read it. You won't accept the insurance for yourself, so we don't want it either. A thousand-page bill upset people. That was actually a revelation for me during the summer. I thought the Republicans ought to have their own bill to counteract the Democratic bill, but, in fact, what people were telling me is, We'd like to see you do something specifically with pre-existing conditions. I'd like to see some specifics on increasing competition by being able to buy across State lines. We'd like to see something specific about holding down health care costs by offering some sensible liability reform, which we don't see in this bill. These were the things that the American people wanted us to see. Perhaps you might even argue that seven small bills might have been better than one large bill.

What happened next was after that bill left our committee at a thousand-plus pages, it went over to the Speaker's office, and then in secret, with the White House participating, no Republicans, and I submit no back-bench Democrats were involved in that process either, the bill comes out at the end of October, the first of November, and it's 2,000 pages. Well, if a thousand-page bill upset people some, a 2,000-page bill really upset them. As a consequence, we heard from our constituents. In my office, the phones were ringing off the hook day and night, calls almost uniformly against what-

ever was going to happen next in the House with the passage of this bill. As people learned more about the bill, they got more and more uncomfortable about it.

What occurred next was we passed this bill on the floor of the House late on a Saturday night after we'd been kept up here all week and all weekend to pass this bill. It passed by a slim, slim number of votes. In fact, just a few votes changing one way or the other and the bill would not have passed.

It was interesting that the Cable News Network, CNN, produced a poll the morning that we voted on the bill. And I don't remember the precise numbers, but it was approximately 26 percent of the American people liked the bill the way it was and wanted us to pass it just the way it was. A larger number, perhaps 35 percent, wanted major changes in the bill before it was passed. A similar number, about 25 percent, felt that Congress shouldn't even be doing this, that we were overstepping our authority by even working on health care. And then a smaller number was simply disinterested.

So you had 26 percent of the American people thought we were doing the right thing that day when we passed that bill. So it's no great surprise that after that bill passed that, again, many Members have heard from their constituents and, again, there's a great deal of angst and anxiety out there in the country over what has happened. But, undaunted, they picked it up in the Senate and let's go forward. Let's get this bill done. And you heard it discussed in the last hour.

I've told people now for several weeks what we're doing up here has really nothing to do with health care. When's the last time you heard anyone talk about a vaccination rate, or when's the last time you heard anyone talk about something to reduce hospital-acquired infections? No, we're not talking about that. We're talking about how many Medicaid dollars do we need to give away in Louisiana in order to secure a Senate vote. It's an arithmetic equation. The first one to 60 wins. And, as it turns out, the Senate majority leader and the Senate Democrats have 60 votes, and they were able to collar in every one of those and pass the bill right before they left on Christmas Eve. So Santa Claus may have put coal in the stocking of many Americans who were expecting something worthwhile to come out of the House and Senate this year, but he left the Senate floor on Christmas Eve and now is our first blush back in the Chambers to deal with the aftermath.

Now what has caused all the flap since then is normal process is the House passes a bill, Senate passes a bill. There's going to be differences. The House is a different structure than the Senate. The House has a 2-year term. There are more of us in the House. We tend to be a little more rough-and-tumble than the gentle-

manly arena over in the Senate, but that's the way the Founders designed it. So there's always likely to be some differences between the House and the Senate bill. That's not a problem.

The House and the Senate have a way of reconciling that. They get the two together and let's call a conference committee. Conferees are appointed by the Democrats in the House, the Republicans in the House, the Democrats in the Senate, Republicans in the Senate. The conference committee meets and works out the differences. It might pass on a party-line vote. Of course, there are more Democrats on the conference committee than Republicans but, hey, they won the election, and that's what elections are all about.

But the conference committee is not going to happen because—it's not going to happen because this debate now has become an internal debate on the Democratic Party. We will continue to be blamed on the Republican side for obstructing this bill, but please understand there is nothing that we can do. We lack the numbers to stop this bill—supermajority in the House, a 60-vote majority in the Senate. All the Republicans can stay together and the bill still passes because we just simply do not have the numbers.

The arguments that are going on right now are arguments entirely within the Democratic conference. And it is a conference committee, if you will, of the Democratic conference where they're trying to work out the difference the Democrats have with Democrats over the bill, and ignore the Republicans—blame them, to be sure, because they're useful to blame as being obstructionists, but realistically no Republican is obstructing or slowing down this bill. We can't. We would like to, but we can't.

Now, actually, there is perhaps something that might happen. We talked a little bit earlier about sometimes events that happen, change things here in the Chambers, events that happen out of the country. There is going to be a special Senate election in one of the States in the next week's time. In fact, a week from today there's going to be an election from the Senate. If that Senate seat were to change from Democrat to Republican, that would shift the balance from 60 Democrats to 59 Democrats. I'm sorry, 58 Democrats and two Independents that vote with the Democrats for a functional 60-vote majority in the Senate. But they could lose one of their votes. What happens then? Can we rush this bill through before that new Senator can be sworn in to stop things? I don't know. It will be interesting to see what the plans are, what people try to do. But that could be a game changer that no one would have anticipated a month ago as we left out of these Chambers, that a Senate seat that has historically been in Democratic hands for years and years and years could possibly change.

But such is the angst of the American people over what they've seen us

do. And because we've done so much of it, so much of it in secret in the Speaker's suite of offices, again, with the heavy hand of the White House applied at all times; the Majority leader's office over in the Senate, with the heavy hand of the White House applied at all times, why shouldn't—okay, fine, lock the Republicans out.

□ 2130

We lost the election. Maybe we deserved to be locked out, but don't lock the American people out. Which kind of brings us back to the issue of C-SPAN and Brian Lamb's letter to the President. We have all heard. We saw on the news shows a couple days ago. We saw the multiple clips that were up on various Web sites of the President during the campaign saying over and over, I want this process to be open. I want the ideas to be brought in. I just ask that we do this out in the open, around a big table. Bring the C-SPAN cameras in so all can see. If your Member of Congress would rather stand with the special interests than stand with the American people, I want you to see that.

Mr. President, I think you got it right. I want to see that. That's the reason I filed the resolution of inquiry. Because if a Member of Congress is going to stand with a special interest—and not all special interests are Republican special interests, bear in mind. Some of them may be a union special interest on the Democratic side. We heard another discussion tonight by the AARP. Who knows where the special interests are? The American people know, and the American people need to be able to watch that and make those decisions for themselves. This is a big deal.

The first President Bush, during the campaign for President, famously said that the Democrats are going to come to me with tears in their eyes and say, Raise our taxes. And he said that I'll turn to them and say, read my lips, no new taxes. And then he walked back from that pledge, and it cost him. It cost him in the next election. It cost a lot of credibility on the Republican side for a President to walk back on that pledge. So if you have a President who said that this is going to be such an open and aboveboard process that I'll put the cameras in the room, you'll be able to see which Members of Congress are aligning with the American people and which Members of Congress are aligning with the special interests, who's taking up for the insurance companies, who's taking up for the drug companies, who's taking up for the unions, who's taking up for this special interest group or that special interest group? You will be able to see that on C-SPAN, and the President has now walked back from that pledge. In fact, his press secretary wouldn't even openly acknowledge that they were walking back from that pledge.

Well, let's stop and think for a minute. What is the symbolism of C-

SPAN to the American people? People are watching tonight on C-SPAN. C-SPAN is like a window into Congress. It's impartial. It doesn't have an editorial objective. It doesn't come with an agenda. Sometimes it can be frighteningly boring, but at the same time, it is what the American people have identified as their way to keep an eye on Congress. My predecessor, the former House Majority Leader Dick Armey, when he was deciding to run for Congress that first time back in 1983 or 1984, said that he watched the proceedings on C-SPAN, and it troubled him, and he thought he could do better.

You know what? The same thing applies to me. I watched C-SPAN from labor and delivery on the little television that the hospital provided. And I would see things happen, like the House vote on an increased expansion of the debt limit, and I would get frustrated and upset. C-SPAN has been a way to invite the American people back into the people's House, and that has been an important aspect of what has happened with C-SPAN. But think back for just a minute. Why did C-SPAN happen? It wasn't just something that got created on the eighth day because they were running out of things to do. C-SPAN happened because of Watergate. C-SPAN happened because the Watergate hearings that were held were covered by 24-hour continuous, live television coverage.

Television executives said, Nobody is going to watch that stuff. That's so boring, no one's going to watch that. It's like watching your grass grow, watching your grass die in wintertime. But people watched, and they were fascinated by the process. As a consequence, the C-SPAN cameras then came on, and they have not been turned off from Watergate until this day. And the American people get that. C-SPAN is synonymous with good government and good governance.

So if you're not proud enough of your work to put it up there on C-SPAN, what have you got to hide? Why have we developed the major House legislation completely in secret? Why have we developed the major Senate legislation—which now, by the way, is up to 2,700 pages. Why have we developed that completely in secret? I say the White House was involved. We all know that people from the White House were here in the Capitol building the days that those bills were worked on. But since we couldn't watch it on C-SPAN, we don't know who from the White House was sitting in, what they were saying, whether they were simply standing there with their arms folded, or were they participating? Were they part of the give-and-take, Hey, if do you this, we'll do this. We'll try to help you with this. We'll try to protect you here.

We don't know because none of that, none of that has been available to the American people. But the American people do get this. C-SPAN is good gov-

ernment. C-SPAN is good governance. C-SPAN is sunshine on the process. Sure, there's a value in opacity. Anyone can tell you that. But if you're able to kind of get, you know, some of the guys together in secret and kind of work things out amongst yourselves, and then you come to the House floor and say, Well, here's what we think the American people want. No, it's what these guys decide by themselves behind closed doors. Nobody wants that. Republicans lost the majority because the then minority leader NANCY PELOSI said that the Republicans were crafting bills in secret with the special interest groups, writing the legislation.

Well, guess what, folks: Nothing's changed. It's just different special interest groups today than perhaps there were 5, 6 or 7 years ago. The way to ensure that this process is fair and above board is to keep the cameras on, not to include the Republicans in the room. I think we should be in the room, by the way. But that's not necessarily the key to the transparency. The key is to let the American people in the room if they choose to do so. If they're uninterested, if there are other things going on, if there are football playoffs, Final Four, beauty pageants, and the American people are not interested and don't want to watch the goings-on on C-SPAN, so be it. They had the opportunity. They chose to do other things. No one to blame but themselves if they don't like the final product.

But at least they had the option of turning on that channel and watching the proceedings. Our committee hearings, our committee markup was covered on C-SPAN hour after hour after hour, and many of us would sit there and write in little Twitter messages about what was going on now in the committee process. And the three people who are interested in what I send out on a Twitter feed were grateful to get that little bit of information, that little kernel of information. Then they go turn on C-SPAN and say, Yeah, sure enough they're talking about community organizers in health clinics now.

Well, the American people ought to have that option, and the fact that they don't, the fact that we will not give it to them then raises the question in their minds, What do we have to hide? You've got a big bill, now 2,700 pages. We don't think you're reading it. We don't think you'll take the insurance that it produces for yourself, for your families. Why should we be satisfied about what you're doing to—we heard it quoted earlier—one-sixth of the American economy? Why should we be satisfied that you're going to change the health care arrangement that 85 percent of the country says they are either satisfied or very satisfied with? Why are we going to change that arrangement simply to bestow additional political power on a select group of Members of Congress and Senators?

Because remember, this bill has nothing to do with health care any longer. If you don't believe me, watch—

oh, you can't watch, that's right. But remember what happened over on the Senate side. This wasn't about how do we improve outcomes. This was, how do we get the outcome we want, which is to pass this bill? There is something wrong with the process when you say, We can't let you read it. We can't wait. We've got to do it in a hurry. And oh, by the way, the benefits that are going to come to you off of this bill actually start in 2014. Your taxes will start next week.

The American people get that. That's a problem. It's a 2,700-page bill—or at least the one that they passed on the Senate floor was. Goodness knows what it will look like. Whatever happens to it, it's going to be a big bill. There is going to be a lot of legislative language. Well, what happens to legislative language after the bill becomes law? The President signs it down at the White House, a big signing ceremony. People from all over gathered around him, a great day is had by all, a wonderful photo op. What happens then to this signed piece of legislation, this public law that has now been created through this very flawed process?

Well, it goes over to the Federal agency, the Department of Health and Human Services. And there the rules and regulations are written that will dictate what happens in health care to everyone in the country. Those rules will be written, and they'll be written in secret as well. To be sure, there will be a notice of proposed rulemaking. There will be thousands and thousands and thousands of pages generated in the Federal Register of this notice of proposed rulemaking and the rules and regulations that come out of this 2,700 page bill. I would submit that those rules and regulations will probably number in the tens of thousands of pages once it gets through the goings-on over at Health and Human Services.

But here is something that's kind of strange about all of that. One of the big arbiters of those decisions is an individual who is in charge of a part of the agency of Health and Human Services, the Centers for Medicare and Medicaid Services. CMS we call it. CMS has an administrator. The administrator at CMS is going to be the one in charge of writing a lot of those rules and regulations.

Well, now, who is the administrator at the Centers for Medicare and Medicaid Services? Let's stop and think for a minute. Well, there isn't one because a year into this administration, no name has been put forward to the Senate for confirmation for the administrator of the Centers for Medicare & Medicaid Services. And yet we're in a rush to get this bill passed. We've got to get this thing done. Time's a wasting. People are hurting. We're going to pass this legislation. It's going to go over there to an empty auditorium until that position is filled. It's not the Senate that is blocking a Presidential nomination. Don't fall for that. There has been no name put forward in a year's time.

Now, do you think there's going to be a fight over that nomination over in the Senate? Yeah. I'll bet there is because that individual is going to hold a tremendous amount of power with a 2,700-page bill that affects every jot and tittle of how medicine is practiced in this country. Yeah. There is going to be a pretty big fight over in the Senate, and there should be because it is going to be a very, very powerful position.

So we certainly don't want to rush someone through like we've seen with some of the other Federal agency heads in this past year and have someone in that job who doesn't fit the bill. We want someone who is competent. We want somebody maybe who has run an integrated delivery system at some point along the line. We want someone who has some experience in dealing with not just the creation of health care policy but the actual delivery side, putting the meat on the bones, if I can use that analogy, someone who has actually worked in the trenches in health care.

I think that would be an enormously important first step. But again, we don't even know who that individual is at this point. Since the acting administrator left at the end of the Bush administration, it has basically been filled by agency personnel who are career bureaucrats, and their ability to deal with a 2,700-page bill is anyone's guess. I'm not being critical of the Department of Health and Human Services. That's just the way it is. Right now you've got people who are acting in that capacity, but they are not direct Presidential appointees.

So there is not that accountability. There has not been advice and consent from the Senate, as is required under the Constitution for a Presidential appointment. This is not a czar, after all. This is an actual administrator of one of the agencies within the Department of Health and Human Services. So there are a lot of moving parts yet to happen.

Now we've seen this bill have more than its share of near-death experiences. Maybe it would be the best thing if one of those near-death experiences actually stuck and forced us to go back and craft something that would actually be useful for the American people. Now I'm not talking about delaying. Remember, it's 2014 before any of these good and great and wonderful programs are going to come to a town near you. There is no urgency about implementing any of the great things that have been talked about in conjunction with this bill. They are going to languish by the wayside.

So since we have that gift of time, why not try to get it right? Because I will tell you this: I've heard people say, Well, let them pass their bill, and then perhaps the Republicans can fix it and repeal the parts they don't like. No, it doesn't work like that. It doesn't work like that. Once you start collecting taxes from people for a yet-to-be re-

ceived benefit at some point in the future, it becomes very, very difficult to roll that back.

We have a lot of discussion in this House of Representatives about what are the right things to do with Medicare in the future. And goodness knows that any one of us might do things a little bit differently in setting up the Medicare system if we could roll the clock back to 1965 and start over, but we can't. We have what we have with that program. And it becomes—as you've heard over and over again on the floor of this House—it becomes very, very difficult then to take big chunks of it away. We are going to take \$500 billion out of Medicare. That's going to hurt some people.

□ 2145

It is not going to be without pain for some people to do that. There are going to be constituencies that are benefited, and some that are upset. Such is the nature of doing those types of things. Well, you can just imagine if you have the whole health care bill and now you are trying to do that kind of major surgery on that bill after the fact, it is going to be very, very painful, indeed.

So I would submit that as many near-death experiences that this bill has had and as many times as it has been resuscitated literally off the floor of the House and brought back to life, perhaps we would all be better off if one of these times this bill did not survive, and we went back and tried to do the right thing. Again, I enumerated those a moment ago.

What I heard repetitively in the town halls I did this summer and this fall: we are scared of what you are doing. We don't think that you are competent to do the things you have said you are going to do, but we would like to see something done about people who, through no fault of their own, lose employer-sponsored insurance, have had a tough medical diagnosis and now find that they are frozen out of the insurance market, they are on the outside looking in, and it becomes very difficult for them to get back into a condition of insurance.

We would like to see some of the protections that are out there for the ERISA-administered plans, we would like to see those out in the individual market. And we would like to see more flexibility for COBRA plans, for people who lose their job and then lose their employer-sponsored insurance; and, oh, under COBRA, you can keep it for 18 months but you have to pay not just your premium but the two-thirds that the employer was kicking in during the time of your employment. And guess what, you have just lost your job so that is a very difficult payment to maintain. I know, I saw patients with this when I was in practice.

But we could do things to allow more flexibility within the COBRA plan so that it didn't have to be an identical insurance plan that person carried under COBRA. It could be a plan that

had perhaps a benefits package that was more in keeping with what that person could afford at that time. But we don't know; we have never had that discussion. We have never had a hearing or a discussion on that. We have never had an opportunity to have a give and take between the right and the left over what that might look like.

Preexisting conditions, we talk about things like risk pools and reinsurance. Maybe there is a way to do that. The CBO scored one proposal that cost \$25 billion over 10 years. Well, that is expensive; but it is a whole lot less than \$1 trillion. If that is the main problem the American people want to see fixed, why not work on that. Perhaps there is some place we can get that \$25 billion without adding to the deficit. Maybe that would be a legitimate use for some of the moneys in the Medicare slush fund, but we don't know because we never tried. We never had the hearing, and we never seriously addressed how do we do anything other than take it all over, which is what we have done with this bill.

Liability, the Congressional Budget Office has said there is \$50 billion of savings over 10 years or more. Some people say that is a drop in the bucket with health care costs. Maybe so, but it is a start. And it is a pretty big drop, and it is one that we can ill afford to just ignore. Why don't we have those discussions, and why don't we have those hearings. Why don't we do the right thing for the American people and not just continue to protect a special interest group who may have a significant interest in keeping the liability laws the way that they are.

We have had some big changes down in Texas, and it has improved things for people. It has brought more practicing physicians into the State. It gets a lot of criticism because prices and costs have not come down, but that does take time. A journey of a thousand miles starts with the first step, and you have got to take that first step, which is liability reform, before you are ever going to get any of those other benefits. But, indeed, costs have come down. The cost of insurance has come down. The number of doctors available for delivering the care has increased, and we all know the laws of supply and demand: if you increase the number of doctors in a community, costs will diminish. People will have more open appointment slots, and they are anxious to fill them. If there is excess capacity to fill in their clinics, they are going to want to fill those appointment slots. So perhaps they are willing to take someone who will pay over time, or perhaps they will offer a discount to get more people in. That's the way things work.

Instead, we have this massive government overlay that is going to control every aspect of your doctor's and patient's life, and it has never been tested. We have a system that 85 percent of the American people are satisfied or

very satisfied, and we are going to change it all with something no one has ever seen in this country. God help us if they don't like it. Well, we know that they don't like it because they have told us they don't like it. A CNN poll, CNN which generally tends to be very favorable to programs proposed by this President, generally tends to be very favorable to Big Government solutions to social problems, 26 percent of the people polled by CNN said, hey Congress, we like what you are doing, go get them. The other 75 percent said slow down and do things differently or you shouldn't even be working on it at all, or we don't know what you are doing and we don't care. But only 26 percent endorsed the activities of this House of Representatives. And that is consistent with the numbers that you see even tonight that are reported by the various reporting agencies, Web sites and cable news services who report around 55 to 58 percent of the American people don't like what they see us doing with health care.

That brings me back to the resolution of inquiry which was filed on December 17. A resolution of inquiry is a tool that the minority has or in fact a Member on the majority has in order to ask for information that they believe is being withheld from them that they need in order to make an informed legislative resolution. It is H. Res. 983, introduced on December 17 just as we left town for the Christmas break. It requires 14 legislative days to mature at which time it must be either voted on in committee or discharged from the committee to the House floor where it becomes then what is called a privileged resolution to ask that that information be delivered.

Now, I know we don't have the numbers to pass anything on the Republican side. I know a resolution of inquiry introduced in the Committee on Energy and Commerce, if the chairman wants to simply quash it, he has the votes to do that. He will ask his side to vote with him on voting "no" on the resolution of inquiry, and that's where it stays.

But I was encouraged by a newspaper article that appeared on the day that the resolution was filed. It appeared in one of the newspapers up here in Washington called *The Hill*, and in it Chairman WAXMAN was quoted as saying, and remember this resolution of inquiry was requesting documents from the White House that were produced in meetings last May and June when the White House invited six parties to participate in talks down at the White House.

They came up with \$2 trillion in savings over 10 years that they were going to then use to pay for this health care bill. Those were representatives of the pharmaceutical industry, the American Medical Association, the American Hospital Association, an association of American insurance plans, the medical device manufacturers, and the Service Employees International Union. So you

had a rather disparate group of individuals representing doctors, insurers, hospitals, medical device manufacturers, pharmaceutical manufacturers, and union representatives who each brought something to the table to say we can give you this much in savings if you will help us with whatever if there is a problem. We don't know what was offered up by the groups that were meeting at the White House, and we don't know what was offered back by the people in attendance at the White House.

Chairman WAXMAN was quoted as saying: If there are such documents, BURGESS should get them, but I don't know if there are such documents. I think some of these things that he wants are not written down, and different people have different ideas of what was agreed.

Well, fair enough. Maybe there wasn't anything written down. It is a little hard for me to believe that a \$2 trillion agreement would be reached on nothing more than a handshake. But if indeed that is the way it went down, then someone should at least tell me.

I sent a letter to the White House September 30 talking about this very issue and asking for specifics as they came out of those meetings and as yet have gotten no answer from the White House. If the answer is, we have no documents, that there never were any documents produced, we did all of this \$2 trillion of savings simply on a wink and a nod and a handshake, fine, just tell me that.

But at the present time, you are left with situations as developed in the Senate Finance Committee when a tax was suggested on some of the hospital charges and the hospital association said, wait, that wasn't part of our deal. Well, if that wasn't part of the deal, what was the deal? Can you give us some of the details on what was agreed to? Again, as legislators trying to write this legislation so it won't conflict with anything that has been agreed to by the White House, it seems it would make good common sense that they would want to share that with us. I frankly don't understand why that information has not been forthcoming.

Now this resolution was introduced on December 17. Sometime likely toward the end of the first week of February or at the beginning of the second week in February, it will have to come to a vote in the committee. We will see what they do with it. Again, the chairman may say, look, nice try, but we are not interested in pursuing that right now and vote it down; or it may come to the floor as a privileged resolution.

But at least over that period of time we have the opportunity to talk about this. We have the opportunity to talk about these secret deals that were struck down at the White House, and then it ties in very much with the story that everything is going to be up and out in the open on C-SPAN, but we don't want to let the C-SPAN cameras

in the room while we craft this final legislative product that is going to deal with health care and how health care is administered in this country for the next two or three generations. That is pretty important, but we are not going to get to see any part of what is going on.

The American people understand that C-SPAN is sunshine. C-SPAN represents good government. C-SPAN was the foil that the American people had against the excesses of a Presidential administration that overstepped its bounds and brought us the spectacle of Watergate and the crumbling of a Presidency. C-SPAN is the preventive medicine that keeps that from happening again in the future.

The first President Bush went back on a pledge he made in the campaign. He made it one time, and he was dealt with very severely by the American people and did not win a second term as President. And many people feel that going back on that pledge of no new taxes, and it wasn't so much the fact that he raised taxes, it was that he raised taxes after he told us he wouldn't. Now we have a President who said it will be out in the open, trust me. You will be able to see it. If your Member of Congress is standing with the insurance companies instead of you, you will know that. Well, guess what, now you don't.

I will tell you since there are no Republicans in the room, there are no Republicans standing with the special interests as this health care bill is being written because we are not allowed in the room and we are not allowed to be part of the process. But we don't know what Democrats are defending the insurance companies or the unions. We don't know what Democrats are defending the pharmaceutical manufacturers. And we don't know what Democrats are defending the doctors, if indeed any actually are. We don't know because we are shut out of the process. Not just us as Republicans, but us as the American people. And that is what is so inflammatory about what has happened this past week here in Washington, D.C.

□ 2200

So a lot has occurred since the House and the Senate went out just before Christmas. We are now back in town. We are told we have an artificial time frame of doing this before the State of the Union address, though it appears that the State of the Union address is a little bit fluid because we don't want to schedule it on top of the season's start of a new television series, so some give-and-take about when that actual address is to be scheduled. I thought it was the end of January. It's now sometime in February.

We do have a big Senate election, and people would do wise to tune into that and be aware of what is happening in a part of this country where a Senate seat that has been safely in Democratic hands for two or three generations may

in fact change hands a week from tonight. How long will it take to get that new Senator sworn in? How long will it take to get that new Senator to town so they will be able to vote on this very important health care legislation? Will it take longer if that is no longer a reliable "yes" vote but becomes a problematic "no" vote? Will there be an attempt to run out the clock or stretch out the clock so that we don't seat that new Senator? I think the American people need to pay attention to that because all of those things are an integral part of this process that we call "health care reform" that is now playing out in its final chapter here on the floor of the House and the Senate.

Mr. Speaker, you've been very generous with the time, and I'm going to yield back the balance of my time.

SEPTEMBER 30, 2009.

President BARACK OBAMA,
The White House,
Washington, DC.

DEAR MR. PRESIDENT, I write you once again on the topic of health care reform. As you know, Democrat leaders in the House of Representatives are currently working to merge the three committee bills. Meanwhile, the two Senate bills are waiting to be merged pending completion of the Senate Finance Committee's mark-up of the Baucus plan.

I have closely followed the health care debate for months, making note of actions by all parties involved, including the House, Senate, White House, advocate groups, and the health care industry. These reforms have wide-reaching implications, and you have stressed the importance of conducting business in public so that the American people are aware and involved in the process.

In fact, during a Democratic Presidential primary debate on January 31, 2008, you said: "That's what I will do in bringing all parties together, not negotiating behind closed doors, but bringing all parties together, and broadcasting those negotiations on C-SPAN so that the American people can see what the choices are, because part of what we have to do is enlist the American people in this process."

It has now been over four months since the White House announced numerous deals with major stakeholders in the health care debate to save upwards of \$2 trillion in the health care system. Little to no details regarding the negotiations have been released, and recent actions and press reports have reminded me of the importance of openness and transparency throughout the legislative process.

Roll Call reports today that negotiators working in the House to merge the three committee bills plan to trim the cost of the legislation by roughly \$200 billion. I wonder what programs or services are being cut, who will be affected, and how these cuts are being decided.

In the Senate Finance Committee's mark-up, Senator Bill Nelson (D-Fla.) introduced an amendment regarding drug prices in Medicare and Medicaid. During the debate on the amendment, Senator Tom Carper (D-Del.), while arguing against the amendment, said "Whether you like PhRMA or not, we have a deal," referring to the deal PhRMA cut with the White House earlier this year.

In addition, within the Senate Finance Committee plan is a commission to slow the growth of Medicare spending, most likely through changes to reimbursement policy. However, hospitals would be exempt from this commission because, according to CongressDaily, "they already negotiated a

cost cutting agreement" with the White House.

Despite your promise to make all health care reform negotiations in public, we still have very few details on what exactly was agreed to during these highly publicized negotiations. In fact, even the stakeholders involved have, at times, seemed at odds with what was actually agreed to. But the one thing we all know is that, through press statements, many deals were made. Unfortunately, even where brief descriptions of policy goals are available, details on achieving these goals are absent, a point made by the Congressional Budget Office (CBO).

I am compelled to ask—how could Congress have done its' due diligence in creating the policy before us without crucial details surrounding these deals? Were the votes we have seen in the Senate Finance Committee as of late a direct result of these backroom negotiations? Will CBO be able to actually score any of these deals to apply those cost savings to legislation? Were these negotiations in the best interests of patients?

Having little to no information, I cannot judge. However, this begs even more questions. Is Congress enacting the best policy reforms for Americans, or are certain changes being made or not made because of the negotiations orchestrated by the White House? Will smaller stakeholders suffer more from our policy choices because of what larger groups may have negotiated behind closed doors?

Mr. President, I do not write this letter to chide you for engaging in what I consider the most pressing debate before Congress. I applaud you for your leadership in compelling Congress to act. In order to fully understand the policy choices before us, though, we need to know what took place earlier this year during these meetings at the White House. You have made it very clear that you value transparency and have sought to make your Administration stand out in this regard. As a member of the House Energy and Commerce Committee's subcommittee on Oversight and Investigations, so do I. The last thing I would want to see is a formal investigation of these meetings.

Thus, I formally request full disclosure by the White House in the following areas regarding all meetings with health care stakeholders occurring earlier this year on the topic of securing an agreement on health reform legislation, efforts to pay for any such legislation, and undertakings to bend the out year cost curve:

1. A list of all agreements entered into, in writing or in principle, between any and all individuals associated with the White House and any and all individuals, groups, associations, companies or entities who are stakeholders in health care reform, as well as the nature, sum and substance of the agreements; and,

2. The name of any and all individuals associated with the White House who participated in the decision-making process during these negotiations, and the names, dates and titles of meetings they participated in regarding negotiations with the aforementioned entities in question one; and,

3. The names of any and all individuals, groups, associations, companies or entities who requested a meeting with the White House regarding health care reform who were denied a meeting.

In our efforts to improve access to health care services, the American people expect us to act in their best interests, rather than protecting business interests of those who are interested in currying favor in Washington, DC. If these health related stakeholders have made concessions to Washington politicians without asking anything in exchange for the patients they serve, Congress and, most importantly, the American

public deserve to know. Conversely, if they sought out protections for industry-specific policies, we need to know that as well.

We must learn what these negotiations mean for the millions of concerned Americans. How they will be better served, including having affordable health coverage and access to the providers they need? These negotiations may have produced consensus on policy changes that are proper and needed, but Congress will never know for sure that we are acting in our constituents' best interests until all the facts are known.

I look forward to the opportunity to speak with you at your earliest convenience on this matter. Should your staff have any questions about this request please contact me or my Legislative Director J.P. Paluskiewicz at my Washington, D.C. office at 202-225-7772.

Sincerely,

MICHAEL C. BURGESS, M.D.,
Member of Congress.

LEAVE OF ABSENCE

By unanimous consent, leave of absence was granted to:

Mr. ABERCROMBIE (at the request of Mr. HOYER) for today and January 13.

Mr. HASTINGS of Florida (at the request of Mr. HOYER) for today and the

balance of the week on account of official business.

Ms. EDDIE BERNICE JOHNSON of Texas (at the request of Mr. HOYER) for today and through January 27.

Mr. CRENSHAW (at the request of Mr. BOEHNER) for today on account of personal reasons.

SPECIAL ORDERS GRANTED

By unanimous consent, permission to address the House, following the legislative program and any special orders heretofore entered, was granted to:

(The following Members (at the request of Ms. WOOLSEY) to revise and extend their remarks and include extraneous material:)

Ms. WOOLSEY, for 5 minutes, today.
Mr. DEFazio, for 5 minutes, today.
Mr. CONNOLLY of Virginia, for 5 minutes, today.

Ms. KAPTUR, for 5 minutes, today.
Mr. GRAYSON, for 5 minutes, today.

(The following Members (at the request of Mr. CONAWAY) to revise and extend their remarks and include extraneous material:)

Mr. POE of Texas, for 5 minutes, January 13 and 19.

Mr. JONES, for 5 minutes, today and January 13 and 19.

Mr. BURTON of Indiana, for 5 minutes, today and January 13.

Mr. GOODLATTE, for 5 minutes, today.
Mr. TIM MURPHY of Pennsylvania, for 5 minutes, today.

Mr. PAUL, for 5 minutes, January 13.
Mr. MORAN of Kansas, for 5 minutes, today and January 13 and 19.

Mr. CONAWAY, for 5 minutes, today.
(The following Member (at his own request) to revise and extend his remarks and include extraneous material.)

Mr. KUCINICH, for 5 minutes, today.

ADJOURNMENT

Mr. BURGESS. Mr. Speaker, I move that the House do now adjourn.

The motion was agreed to; accordingly (at 10 o'clock p.m.), the House adjourned until tomorrow, Wednesday, January 13, 2010, at 10 a.m.

EXPENDITURE REPORTS CONCERNING OFFICIAL FOREIGN TRAVEL

Reports concerning the foreign currencies and U.S. dollars utilized for Speaker-Authorized Official Travel during the third quarter and fourth quarter of 2009 pursuant to Public Law 95-384 are as follows:

REPORT OF EXPENDITURES FOR OFFICIAL FOREIGN TRAVEL, DELEGATION TO NORTHERN IRELAND AND SCOTLAND, HOUSE OF REPRESENTATIVES, EXPENDED BETWEEN NOV. 8 AND NOV. 18, 2009

Name of Member or employee	Date		Country	Per diem ¹		Transportation		Other purposes		Total	
	Arrival	Departure		Foreign currency	U.S. dollar equivalent or U.S. currency ²	Foreign currency	U.S. dollar equivalent or U.S. currency ²	Foreign currency	U.S. dollar equivalent or U.S. currency ²	Foreign currency	U.S. dollar equivalent or U.S. currency ²
Hon. John Tanner	11/8	11/11	Northern Ireland		849.60						9,334.80
	11/11	11/18	Scotland		3,229.80		³ 5,255.40				
Hon. John Boozman	11/8	11/11	Northern Ireland		1,175.16		(³)				3,623.81
	11/11	11/16	Scotland		2,448.65						
Hon. Jo Ann Emerson	11/8	11/11	Northern Ireland		1,068.24		(³)				3,516.89
	11/11	11/16	Scotland		2,448.65						
Hon. Baron Hill	11/8	11/11	Northern Ireland		1,175.16		(³)				3,623.81
	11/11	11/16	Scotland		2,448.65						
Hon. Carolyn McCarthy	11/8	11/11	Northern Ireland		961.32		(³)				3,409.97
	11/11	11/16	Scotland		2,448.65						
Hon. Jeff Miller	11/8	11/11	Northern Ireland		1,175.16		(³)				3,623.81
	11/11	11/16	Scotland		2,448.65						
Hon. Dennis Moore	11/8	11/11	Northern Ireland		1,175.16		(³)				3,623.81
	11/11	11/16	Scotland		2,448.65						
Hon. Mike Ross	11/8	11/11	Northern Ireland		1,175.16		(³)				3,623.81
	11/11	11/16	Scotland		2,448.65						
Hon. David Scott	11/8	11/11	Northern Ireland		1,175.16		(³)				3,623.81
	11/11	11/16	Scotland		2,448.65						
Hon. John Shimkus	11/11	11/16	Scotland		2,232.00		³ 3,968.10				6,200.10
Hon. Albio Sires	11/8	11/11	Northern Ireland		1,175.16		(³)				3,623.81
	11/11	11/16	Scotland		2,448.65						
Hon. John Turner	11/8	11/11	Northern Ireland		1,175.16		(³)				3,623.81
	11/11	11/16	Scotland		2,448.65						
Melissa Adamson	11/8	11/11	Northern Ireland		876.33						9,361.53
	11/11	11/18	Scotland		3,229.80		³ 5,255.40				
Kathy Becker	11/8	11/11	Northern Ireland		1,112.67		³ 4,971.10				8,428.27
	11/11	11/16	Scotland		2,344.50						
Gene Gurevich	11/8	11/11	Northern Ireland		1,112.67		9,696.50				13,153.67
	11/11	11/16	Scotland		2,344.50						
Vincent Morelli	11/11	11/16	Scotland		2,232.00		10,808.80				13,040.80
Dr. Amanda Sloat	11/8	11/11	Northern Ireland		1,112.67		9,696.50				13,153.67
	11/11	11/16	Scotland		2,344.50						
Delegation Expenses:											
Representational Funds								22,078.66			22,078.66
Miscellaneous								458.44			458.44
Committee total					58,938.38		49,651.80	22,537.10			131,127.28

¹ Per diem constitutes lodging and meals.

² If foreign currency is used, enter U.S. dollar equivalent; if U.S. currency is used, enter amount expended.

³ Military air transportation.