

and were often cut out of the decision-making process.

The risk is too great. We need to think of who is going to benefit from this bill and who will be harmed if it is repealed. And I call upon all of my colleagues to search in their hearts and their souls for the real impact that this bill is going to have if repealed.

And with that, I yield back the balance of my time.

CONGRESSIONAL BLACK CAUCUS AND THE AFFORDABLE CARE ACT

The SPEAKER pro tempore. Under the Speaker's announced policy of January 5, 2011, the gentlewoman from the Virgin Islands (Mrs. CHRISTENSEN) is recognized for 30 minutes.

Mrs. CHRISTENSEN. Mr. Speaker, it's an honor for me to join my colleagues in the Congressional Black Caucus for this half hour or so to talk to the American people about the importance of the provisions of the Affordable Care Act. For African Americans and other people of color, as well as rural Americans, who make up more than half of the uninsured, we cannot allow the law and the consumer protections to be repealed. Not when we have just gotten one foot in the health care door, some of us for the very first time.

For African Americans, who have higher death rates from all causes than any other population group, the preventive services, the strengthening of the public health force, the diversifying of an expanded health workforce, the community health workers, the community health centers, the Offices of Minority Health, those equity provisions cannot be repealed. It's a matter of life and death for us.

I know that the Republicans and their leadership who are calling for repeal won't ever say that they want to take away those benefits of the law that make sure sick children can be ensured, that allow families to keep their children who can't get jobs right away on their insurance until they are 26, or make sure that your insurance will be there for you when you need it most, when you get sick. They won't tell you that they want to take those away, but that's exactly what would happen if they are allowed to unravel this very carefully put together law.

Moreover, it should cause concern to every freedom-loving and justice-seeking person in this country that two of the very first acts of this 112th Congress have been to take away rights, privileges, or benefits from United States citizens. They took away the vote in the Committee of the Whole from Representatives elected and sent here by over 5 million Americans.

And now the leadership is trying to take away services and benefits that in effect would take away the right that everyone should have to health care. Whatever the leadership tries to take away next, good people must stand and speak and act to prevent them from doing so, as we must not let them re-

peal the job-creating health care reform law now.

□ 2130

Rev. Dr. Martin Luther King, Jr., who we remembered yesterday, spoke about the appalling silence of good people.

So, my fellow Americans, what I am saying to you is we cannot be silent. I know it must be difficult for you, our constituents, you, our employers, to know what the Affordable Care Act does and what it doesn't do, because there is so much distortion of the facts. So to help explain what the bill, what the law does, and how devastating the repeal would be, I want to now yield to my colleagues.

I will begin by yielding to the gentleman Georgia (Mr. JOHNSON).

Mr. JOHNSON of Georgia. I thank my colleague for yielding to me.

I must admit that I feel somewhat, gosh, it seems like only yesterday that the Republicans were accusing us of not taking care of what was the business at hand, which was job creation and what they call reckless spending. They accused us of wasting our time in the 111th Congress where we should have been dealing with jobs and spending, and they are doing the same thing.

They are wasting their time. The first month of the 112th Congress, they are wasting their time trying to repeal health care for Americans, the Affordable Care Act. It's mind-boggling to me that after the Democrats' first month in office we dealt with the recovery package, jobs, and thereafter we went through a long process of putting in place a measure that will create 4 million new jobs in this economy that they ran into the ground.

We pulled the car out of the ditch, got the car running, ready to create 4 million new jobs, health care, 4 million new jobs to accommodate the 32 million more Americans who would have access to the health care system in this country as a result of our passage of that act. And the Republicans, the first thing they do is want to kill a job-creating act that will enable their constituents and mine to have affordable health care.

It boggles the mind that we would want to turn the clock back, that we would want to start walking in the opposite direction, taking away benefits that have already gone into effect under the health care act that we passed. They want to hurt small businesses which are able to receive a 35 percent tax credit when they spend money insuring their employees.

I saw a report earlier today indicating that hundreds of thousands of new policies have been issued by insurance companies based on these small businesses of less than 50 people that are choosing to offer health care insurance to their employees. That is significant.

The health insurance industry is making a profit by offering fair coverage to Americans. Preexisting condi-

tions were something that young people, children, were denied insurance for under the old regime of insurance regulation. Under our act that the Democrats passed, no more can you ban children from getting insurance based on preexisting conditions, and that is something that's good.

My colleague from Iowa was just talking about a young child in his district who would be denied coverage for a preexisting condition if his parents had to go back into the market to purchase insurance due to loss of a job or whatever, move, whatever the case might be. So this is quite significant. We don't want to take that health care coverage away from the children who have received it even though they have preexisting conditions.

The \$250 rebate for seniors who had reached the dreaded doughnut hole, seniors got a \$250 check in the mail in 2010 to help them with that. In 2011, they will get a 50 percent discount on all brand name and generic drugs, 50 percent. That is going to help so many Americans with their drug bills. This is what they want to repeal. They want to cost you, as a consumer, more money for prescription drugs.

And I am happy to stand on the side of those who say "no" to a repeal of the health care legislation that we passed.

They want to be able to repeal provisions in the law that prevent and prohibit insurance companies from canceling your insurance when you get sick. That's a commonsense regulation to protect American consumers. My friends on the other side of the aisle would, at the behest of those in the insurance industry who spent about \$100 million to defeat health care legislation—and that was unsuccessful, so they went out and spent hundreds of millions of dollars more to defeat the Democrats who voted for it. And so now we are at the point where they want to reciprocate to those who elected them at the expense of the very American people who voted for them. It doesn't make a whole lot of sense to me, Mr. Speaker, it really does not.

Lifetime caps on coverage already in effect, they would repeal that. They would allow the sale of insurance policies that would have a cap on them, a lifetime cap. So you would pay ever-increasing premiums with an ever-lessening amount of lifetime insurance coverage.

Well, we have taken that cap off. We have taken the unfairness out of that equation by mandating that those clauses in insurance contracts are void and unenforceable. So no more lifetime caps on insurance. These are some of the things that enabled the insurance companies and their corporate bosses, offices, shareholders and the like to obtain millions and millions and billions and billions of dollars of profits every year, going up every year.

Your premiums going up also, just reckless; no regulatory impact, no care about what that's doing to America.

It's actually costing the taxpayers a lot of money, Mr. Speaker, because if people don't have insurance, that does not immunize them from getting sick.

□ 2140

We're all going to get sick one day. We're all going to need medical care. We're all going to, at some point, need the care of a doctor or a nurse. And it costs money. And if we don't have insurance, it can't be paid for. So people without insurance don't get access to the health care system until they get so ill that they have to go to the emergency room. And at that point, taxpayers have to subsidize that cost. And so it stands to reason that with 17 percent of our gross domestic product being spent for medical care in this country, and the fact that that has an impact on our interstate commerce, it means that the Federal Government certainly has a role to play in regulating the health insurance industry. And that's exactly what we did.

I want to now recognize, or flip it, if you will, back to my good friend from the Virgin Islands.

Mrs. CHRISTENSEN. I want to thank you, Mr. JOHNSON, for helping to clarify some of the important areas that are provided for in the Affordable Care Act. Everyone is entitled to their own opinions, but not everyone is entitled to creating their own facts. And I think what we're hearing tonight are the facts.

I would like to yield now 5 minutes to the gentlewoman from Texas, Congresswoman SHEILA JACKSON LEE.

Ms. JACKSON LEE of Texas. I thank the gentlelady. It is a pleasure to be able to join my colleagues on the floor, including Congressman GREGORY MEEKS of New York, who we'll have the opportunity to hear from, and I thank Dr. CHRISTENSEN for your continued leadership, and my colleague on Judiciary Committee, we had the opportunity to contribute to the debate today.

The Judiciary Committee has as its jurisdiction the Constitution, and our friends on the other side of the aisle keep talking about that this is unconstitutional. It baffles me and almost frustrates me because I'm trying to grab hold to what the argument is, particularly since we have had Medicare by the Federal Government since 1965, and it has withstood any constitutional challenge, and that was implemented under the Commerce Act.

But frankly, if we have an argument to make on the Constitution, I will share with you why this is clearly a constitutional bill, because we are actually denying people both due process and equal protection under the law under the present system because we have a nation that is divided between the haves and have-nots. Forty million-plus, 44 million, now I hear 32 million persons were uninsured. That's what grabbed our attention. Those people did not have access to health care.

Clearly, if you look at the Constitution that says that the 14th Amend-

ment says equal protection under the law, all people treated equally, and the Fifth Amendment says can't deprive someone of life or liberty without due process. Well, I can tell you over the time that we debated this bill we saw the numbers of people who actually died because they could not get access to health care. We are reminded of our good colleague, Congressman CUMMINGS, who told the story over and over again of a young teenager, 12- or 13-year-old boy, African American boy, who had an abscess, a tooth abscess, and clearly could have been saved, his life was before him. But he died because his mother did not have insurance or really did not have access to go anywhere to have this particular health matter taken care of. It became a crisis, and he died.

So I want to say to my friends, these are the basic points that I want to raise today while I discuss this question of the 14th Amendment and the Fifth Amendment. First of all, you hear the question of how offended people are, I don't want to be told to buy insurance. Why should I have to be forced to buy insurance? Well, as everyone knows, there is a 10th Amendment that says what is not left to the Federal Government is given to the States. States require you to have auto insurance. If you do not have it, you are fined. You get a ticket. Because they have calculated that the burden of not having health insurance is too great to bear. And so when we think of people not having health insurance because they don't have access, we have determined that the burden is too great to bear, \$143 billion if this bill is repealed right away, and \$1 trillion over 20 years that we will lose, or the deficit will be built. And I would imagine it might be more if you determine the people that will be uninsured who will go on to the county system.

Does everybody know in these districts around the Nation who are complaining about this bill that your hospitals, your county hospitals that are burdening your local taxpayers will be actually compensated for uncompensated care? I don't know about anyone here, but I can tell you my hospitals are jumping for joy.

And so I just want to point this out. Children with preexisting conditions are denied coverage, that is the sickle cell child, that is the individual with heart disease. We determined in our Democratic Policy and Steering Committee that children are the greatest that have the possibility of dying because of lack of coverage. And so all of these children, asthma, parents who have children with asthma, they are born, and there are babies with asthma. Do you realize they cannot or could not get insurance even on their parents' insurance? Asthma. How many children have died with asthma? Particularly in the minority community, where we have been subjected to poor quality living conditions. Maybe the air quality, because of where we live,

industrial waste, or maybe it is because of the quality of the house that you are in, asbestos, other ailments that create conditions that cause respiratory illnesses in children, those are respiratory illnesses, young people age 26. A young man by the name of Andrew today said he's been working very hard, he graduated from college, but unfortunately the job that he had offered to him has been pushed back because of the economy. He is working to get more experience as an intern with no compensation. His family cannot afford to keep him on to pay for independent insurance at this point. But yet he is being constructive, and he can be constructive because he can be on his parents' insurance. Pregnant women and breast and prostate cancer patients, in particular, African American women and minority women have a devastating form of breast cancer. My father had prostate cancer, and at the age he was and the atmosphere that we were in and the medical access he had at that time, one, he didn't tell the family, two, we were uninformed about this thing called prostate cancer, and we didn't find out about it until it had metastasized. My father actually had lung cancer and brain cancer.

There is a statistic: An African American male over 65 that did not have the proper access to health care to be able to catch his prostate cancer. Now this bill will provide for preventive care so that members, no matter what economic station you are in or status you are in, you have the ability to access health care, meaning you can go to a community health clinic or the community health centers, excuse me, or you may be able to buy your own health insurance at the rate in the amount you can.

There is a complaint here, as I said, about lacking the ability or not wanting to buy health insurance. Well, I would argue to that person, the argument I made about the 10th Amendment and automobile insurance, but I also argue, would you rather have these individuals die or burden the massive public health system? Or would you rather have them have access to be healthy as opposed to being sick?

Then something has been said, job-killing bill. And one of the points that the Republicans make is 650,000 jobs lost. They are not telling the accurate story. The 650,000 jobs lost are people deciding not to work or to work less because they now have the ability to get their own insurance that is not tied to a job through the exchange. That is the accuracy of it. It's voluntary, voluntary separation from a job because I am independent now to be able to go into business, to be a sole entrepreneur, a sole proprietor, and still have my insurance. And so these people would immediately be thrown off because a pregnant woman would be considered a preexisting disease; breast cancer, obviously one of the more devastating diseases; prostate cancer. And

do you know what else? Heart disease which kills or has 43 million women today living with heart disease, some of whom do not know it because they do not have preventive care.

And then, our seniors have been frightened by death panels. Seniors, let me simply say to you, there will be living panels because you will get a 50 percent discount on your doughnut hole process and brand name prescription drugs. But more importantly, you'll be able to have a primary care doctor, you'll have community health clinics you can go to, you'll have what we call a medical home so you won't have to be worrying about, who is my doctor? You will have a consistent doctor, maybe even electronic records.

Particularly hard-hit are minority seniors or seniors in rural areas where hospitals are not even. But if they can go to a community health clinic that can diagnose them so they don't have to go to an emergency room or be helicoptered to a major city because they reached a crisis, seniors, this is a living bill for you.

□ 2150

And then, of course, this whole question of the deficit, I've already mentioned, but this idea of small businesses, let me tell you that small businesses are jumping for joy. Dr. Odetta Coin today said to us that she is glad that her pediatric practice will be able to get tax credits for her employees to provide health care and that she will be able to add another nurse practitioner just because this bill provides for small businesses.

So I can only say that this whole question of job loss is shaky, the whole question of the Constitution is shakier, and I conclude by saying this, and I will be on the floor again tomorrow: The Constitution has been misused in this debate. I beg of people to get the Constitution. It is quite the opposite. H.R. 2 is unconstitutional, because it creates an unequal system in America, a system of unequalness as relates to health care. We've lived that way but we have not been able to get those who have been most deprived to take this case up all the way to the Supreme Court. Why did I not have health insurance? Why does my neighbor have it and I don't have it? Well, we are now equalizing. With the Patient Protection and Affordable Care Act, we're giving you the protection of the Constitution to the 14th Amendment and the Fifth Amendment of due process and equal protection. I can't imagine a better way to value America than to say that all of us deserve the dignity of our flag and our Constitution.

I thank the gentlelady, Dr. CHRISTENSEN, for her leadership.

Mrs. CHRISTENSEN. Thank you, Congresswoman JACKSON LEE, and thank you for tying in to the constitutional issues, because we're going to be asked to provide constitutional references for every legislation that we introduce and the constitutional issue

has been raised over and over again and I thank you for addressing that in your remarks.

I would now like to yield to the gentleman from New York, Congressman MEEKS.

Mr. MEEKS. I want to thank the gentlelady from the Virgin Islands. I also want to thank the gentlelady from Houston, Texas, SHEILA JACKSON LEE, for that excellent statement on the Constitution and the 14th and the Fifth Amendments.

I am so serious about this issue that on this night when I don't have much of a voice, it is important to talk about what is really going on here. When you think about the Constitution, the first thing that we were doing when we came back in the 112th was the reading of the Constitution. The Constitution was really put in place to help and protect Americans. It's one thing to read the Constitution. It's another thing to live the Constitution. I think the gentlelady put out the facts clearly down to the 14th and the Fifth Amendments, this is constitutional. I think it is also clearly what the Constitution, what the individuals who wrote in 1787, it was a committee of the Federal Convention, that it should remind us that the sacred text employs and empowers us to provide for and protect the American people.

What is the most precious thing that one has? Is it money? What is the most precious thing? It's called life. Without life, what do we have? And what is the most important thing in living a good life? It's health. So wouldn't it seem that what would be the most appropriate thing to do is that we provide health care for Americans? It is without question I think that we can agree, whether we're Democrat or Republican, we believe that we have the best country on the planet, in the history of the planet. But look at the blemish that history will record on our great Nation if we do not provide or give access to health care for all Americans. This is a struggle that we have had for debate after debate after debate, from President before President before President. And finally this Congress did come together in the 111th Congress and said, we're going to provide health care to 95 percent of all Americans. No, we're not perfect. The fact of the matter is I don't know any bill that has ever been passed in any legislative body that is perfect. We've got to work, and in fact we talk about our union, to make it a more better union. The health care reform bill clearly does that.

Now the logic to come and to repeal the whole bill confuses me. For even the Constitution of the United States of America was not a perfect document. Clearly for those of us who happen to be African Americans, when the Founding Fathers wrote it, they said we were only three-fifths of a human being. Clearly the Constitution didn't give women the right to vote. The document itself as it was initially written was flawed. But we as a Nation didn't

say come and strike the entire Constitution; repeal the Constitution. That's not what was done. What we did was we said, Let's fix it. Let's look and see where we can agree upon to amend it. In fact, there was a small debate on the floor right here which Constitution would be read. Would it be the amended version? And that's what we talked about, the amended version of the Constitution. That's what was read here.

So where is the logic now where we clearly have the law of the land to come and say, get rid of it all? You've clearly heard from the gentleman from Georgia and the others that have spoken this evening about making sure that there is no individual who's denied health care because of a preexisting condition. This bill assures us of that. If you have a child under 26 years of age, not working, they can stay on their parents' health care. Seniors and the doughnut hole, we fixed that.

So if you've got a serious problem that you want to negotiate and talk about that's within this bill that's a problem, that's a flaw, that needs to be amended, then I think that as a body we can sit down and work together to get that done.

And so I say when I look at where we are, or ask my staff, for example, in my little district in New York, the Sixth Congressional District.

The SPEAKER pro tempore. The time of the gentlewoman from the Virgin Islands has expired.

Mr. MEEKS. Let me just end by saying this.

Let's make sure that health care is not a privilege for a few but a right for the many. Let us make sure that we do not destroy this great health care reform bill that's now law.

Ms. EDDIE BERNICE JOHNSON of Texas. Mr. Speaker, let me thank our CBC Chair, Emanuel Cleaver and the gentlelady from the Virgin Islands, Congresswoman CHRISTENSEN for anchoring this Special Order in order to pursue a very important discussion on the leadership of the Congressional Black Caucus and the Health Care Reform.

We remain committed to our diligent work to be the conscience of the Congress, but also to provide dedicated and focused service to the citizens and Congressional Districts that have elected us. I hope that this discussion will highlight the impact of how the repeal of the Affordable Act would impact the American people; particularly, within the minority community.

We know that not all Americans have equal access to health care.

It is all too unfortunate that persons of low-income, or of diverse racial and ethnic backgrounds, and other underserved populations have higher rates of disease.

This same population frequently experience fewer treatment options, and reduced access to the care they need.

Worst of all, minority populations are also less likely to have health insurance than the population as a whole.

But now, because of the Affordable Care Act, minorities can benefit from:

Preventative Care that includes regular screenings, annual wellness check-ups, cancer screenings, and immunizations—all at no additional cost.

Care that is coordinated to help patients manage their chronic diseases such as diabetes, heart disease, high-blood pressure, cancer, and many other ailments that require multiple health teams.

Training to increase diversity within the health professions so that patients have more choice of providers who are racially and ethnically diverse. Also, health plans will be required to use language services and community outreach in underserved communities.

Expansion of the health care workforce with increased funding for community health centers, which provide comprehensive health care for everyone no matter how much they are able to pay.

Banning insurance companies from discriminating against those patients who have been sick. No longer will sick patients be excluded from coverage or charged higher premiums. Neither will women have to pay higher premiums simply because of their gender.

I am confident that if we repeal Affordable Care Act, we present a grave, unhealthy danger to the lives of our most vulnerable populations who need health care most by playing politics.

I urge my Republican colleagues to revisit the thought of repealing the Patient Protection and Affordable Care Act by working with eager Democrats to continue building a bridge to a healthier America—for all.

REMOVAL OF NAMES OF MEMBERS AS COSPONSORS OF H.R. 61

Mr. SCALISE. Mr. Speaker, I ask unanimous consent that the following Members be removed as cosponsors of H.R. 61: Mr. BILBRAY, Mr. COLE, Mr. JEFF DUNCAN, Mr. FRANKS, Mr. GIBBS, Mr. TOM GRAVES, Mr. KLINE, Mr. LAMBORN, Mrs. LUMMIS, and Mr. MCHENRY.

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

There was no objection.

GENERAL LEAVE

Mrs. CHRISTENSEN. Mr. Speaker, I ask unanimous consents that all Members may have 5 legislative days to revise and extend their remarks and add any extraneous material on the subject of my Special Order this evening.

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

There was no objection.

LEAVE OF ABSENCE

By unanimous consent, leave of absence was granted to:

Ms. MCCOLLUM (at the request of Ms. PELOSI) for today on account of official business in the district.

Ms. CLARKE of New York (at the request of Ms. PELOSI) for today.

Mr. HUNTER (at the request of Mr. CANTOR) for today on account of travel delays.

Mr. AUSTRIA (at the request of Mr. CANTOR) for January 7 on account of

attending the funeral, in the district, of a slain police officer.

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:)

Mr. MCDERMOTT, for 5 minutes, today.

Ms. WOOLSEY, for 5 minutes, today.

Ms. KAPTUR, for 5 minutes, today.

Mr. BLUMENAUER, for 5 minutes, today.

Mr. KEATING, for 5 minutes, today.

Mrs. LOWEY, for 5 minutes, today.

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

Mr. POE of Texas, for 5 minutes, today and January 19, 20, and 24.

Mr. JONES, for 5 minutes, today and January 19, 20, and 24.

Mr. DOLD, for 5 minutes, today.

Mr. PAUL, for 5 minutes, January 19 and 20.

Mr. BURTON of Indiana, for 5 minutes, today and January 19 and 20.

Ms. BUERKLE, for 5 minutes, today.

Mr. FRELINGHUYSEN, for 5 minutes, today.

Mr. PAULSEN, for 5 minutes, today.

Ms. ROS-LEHTINEN, for 5 minutes, today and January 19.

Mr. FLEMING, for 5 minutes, today.

Mr. DREIER, for 5 minutes, January 19 and 20.

Ms. FOXX, for 5 minutes, January 19.

ADJOURNMENT

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

The motion was agreed to; accordingly (at 10 p.m.), the House adjourned until tomorrow, Wednesday, January 19, 2011, at 10 a.m.

EXECUTIVE COMMUNICATIONS, ETC.

Under clause 2 of rule XIV, executive communications were taken from the Speaker's table and referred as follows:

74. A letter from the Director, Regulatory Management Division, Environmental Protection Agency, transmitting the Agency's final rule — Notice of Prevention of Significant Deterioration Final Determination for Russell City Energy Center [FRL-9245-9] received December 28, 2010, pursuant to 5 U.S.C. 801(a)(1)(A); to the Committee on Energy and Commerce.

75. A letter from the Director, Regulatory Management Division, Environmental Protection Agency, transmitting the Agency's final rule — Approval and Promulgation of Implementation Plans; Texas; Emissions Banking and Trading of Allowances Program

[EPA-R06-OAR-2005-TX-0012; FRL-9246-3] received December 28, 2010, pursuant to 5 U.S.C. 801(a)(1)(A); to the Committee on Energy and Commerce.

76. A letter from the Environmental Protection Agency, Environmental Protection Agency, transmitting the Agency's final rule — Approval and Promulgation of Air Quality Implementation Plans; Montana; Attainment Plan for Libby, MT PM_{2.5} Nonattainment Area and PM₁₀ State Implementation Plan Revisions [EPA-R08-OAR-2006-0952; FRL-9246-4] received December 28, 2010, pursuant to 5 U.S.C. 801(a)(1)(A); to the Committee on Energy and Commerce.

77. A letter from the Director, Regulatory Management Division, Environmental Protection Agency, transmitting the Agency's final rule — Approval and Promulgation of state plans for Designated Facilities and Pollutants; State of Florida; Control of Large Municipal Waste Combustor (LMWC) Emissions From Existing Facilities [EPA-R04-OAR-2010-0392(a); FRL-9246-6] received December 28, 2010, pursuant to 5 U.S.C. 801(a)(1)(A); to the Committee on Energy and Commerce.

78. A letter from the Director, Regulatory Management Division, Environmental Protection Agency, transmitting the Agency's final rule — Action to Ensure Authority to Issue Permits under the Prevention of Significant Deterioration Program to Sources of Greenhouse Gas Emissions: Federal Implementation Plan [EPA-HQ-OAR-2010-0107; FRL-9245-3] (RIN: 2060-AQ45) received December 28, 2010, pursuant to 5 U.S.C. 801(a)(1)(A); to the Committee on Energy and Commerce.

79. A letter from the Director, Regulatory Management Division, Environmental Protection Agency, transmitting the Agency's final rule — Approval and Promulgation of Implementation Plans; Mississippi: Prevention of Significant Deterioration; Greenhouse Gas Tailoring Rule Revision [EPA-R04-OAR-2010-0811-201070]; FRL-9244-4] received December 28, 2010, pursuant to 5 U.S.C. 801(a)(1)(A); to the Committee on Energy and Commerce.

80. A letter from the Director, Regulatory Management Division, Environmental Protection Agency, transmitting the Agency's final rule — Approval and Promulgation of Implementation Plans; Alabama: Prevention of Significant Deterioration; Greenhouse Gas Tailoring Rule Revision [EPA-R04-OAR-2010-0697-201072; FRL-9244-5] received December 28, 2010, pursuant to 5 U.S.C. 801(a)(1)(A); to the Committee on Energy and Commerce.

81. A letter from the Director, Regulatory Management Division, Environmental Protection Agency, transmitting the Agency's final rule — Approval and Promulgation of Implementation Plans; Kentucky; Prevention of Significant Deterioration; Greenhouse Gas Permitting Authority and Tailoring Rule Revision [EPA-R04-OAR-2010-0691-201069; FRL-9244-6] received December 28, 2010, pursuant to 5 U.S.C. 801(a)(1)(A); to the Committee on Energy and Commerce.

82. A letter from the Director, Regulatory Management Division, Environmental Protection Agency, transmitting the Agency's final rule — Action to Ensure Authority to Issue Permits under the Prevention of Significant Deterioration Program to Sources of Greenhouse Gas Emissions: Finding of Failure to Submit State Implementation Plan Revisions Required for Greenhouse Gases [EPA-HQ-OAR-2010-0107; FRL-9244-7] received December 28, 2010, pursuant to 5 U.S.C. 801(a)(1)(A); to the Committee on Energy and Commerce.

83. A letter from the Director, Regulatory Management Division, Environmental Protection Agency, transmitting the Agency's final rule — Action to Ensure Authority to