

HEALTH INSURANCE REPEAL

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

Mr. JOHNSON of Georgia. Madam Speaker, yesterday's action of repealing the health care reform, cynically called the Job-Killing Health Care Act by my friends on the other side of the aisle, is definitely an ironic misnomer—job killing—when the health reform is poised to create 4 million new jobs. The number of jobs created by repeal? Zero.

So we're not about protecting jobs on the other side of the aisle. We are about protecting insurance companies' bottom line.

REMEMBERING ASHLEY TURTON

(Mr. MCGOVERN asked and was given permission to address the House for 1 minute.)

Mr. MCGOVERN. Madam Speaker, I rise to celebrate the life of Ashley Turton. Ashley had an incredible career both in the public and private sectors and was respected by so very many people of every political persuasion. She was a wonderful mother of three children, and her death is especially difficult for those of us on Capitol Hill because we got to know Ashley through her work as ROSA DELAURO's chief of staff. She was part of our family. She was a woman of great skill and a woman of great personality.

We also know her husband, Dan Turton, who also worked on the Hill for many years and served as the chief of staff to the House Rules Committee. He currently works for the White House.

I attended, along with hundreds and hundreds of others, Ashley's memorial service last Friday here in Washington, DC. Those who eulogized Ashley captured her spirit, her determination, and her great compassion.

She was a remarkable woman and will never be forgotten. And our prayers are with Dan and Ashley's family.

INSTRUCTING CERTAIN COMMITTEES TO REPORT LEGISLATION REPLACING THE JOB-KILLING HEALTH CARE LAW

Mr. DREIER. Madam Speaker, pursuant to House Resolution 26, I call up the resolution (H. Res. 9) instructing certain committees to report legislation replacing the job-killing health care law, and ask for its immediate consideration.

The Clerk read the title of the resolution.

The text of the resolution is as follows:

H. RES. 9

Resolved, That the Committee on Education and the Workforce, the Committee on Energy and Commerce, the Committee on the Judiciary, and the Committee on Ways and Means, shall each report to the House

legislation proposing changes to existing law within each committee's jurisdiction with provisions that—

(1) foster economic growth and private sector job creation by eliminating job-killing policies and regulations;

(2) lower health care premiums through increased competition and choice;

(3) preserve a patient's ability to keep his or her health plan if he or she likes it;

(4) provide people with pre-existing conditions access to affordable health coverage;

(5) reform the medical liability system to reduce unnecessary and wasteful health care spending;

(6) increase the number of insured Americans;

(7) protect the doctor-patient relationship;

(8) provide the States greater flexibility to administer Medicaid programs;

(9) expand incentives to encourage personal responsibility for health care coverage and costs;

(10) prohibit taxpayer funding of abortions and provide conscience protections for health care providers;

(11) eliminate duplicative government programs and wasteful spending; or,

(12) do not accelerate the insolvency of entitlement programs or increase the tax burden on Americans.

The SPEAKER pro tempore (Mrs. EMERSON). Pursuant to House Resolution 26, the resolution is debatable for 1 hour equally divided and controlled by the chair and ranking minority member of the Committee on Rules or their designees. The amendment printed in part B of House Report 112-2, if offered by the gentleman from Utah (Mr. MATHESON) or his designee, shall be considered read, and shall be separately debatable for 10 minutes equally divided and controlled by the proponent and an opponent.

The Chair recognizes the gentleman from California (Mr. DREIER).

Mr. DREIER. Madam Speaker, I yield myself such time as I may consume.

Madam Speaker, today we begin the process of implementing health care reform. I underscore that. Implementing health care reform is what we begin today.

This resolution, H. Res. 9, initiates the second step of a two-part process, which, as we all know with the 245-189 vote last night, saw repeal of the health care bill.

Having taken that action to wipe the slate clean, we're now moving on to the far more challenging task of crafting real solutions for the American people to ensure that we can drive down the costs of health insurance and health care.

This resolution instructs the four committees of jurisdiction to draft legislation that brings about meaningful health care reforms. Furthermore, this resolution lays out 12 clear guidelines that define what real reform is. Some of these guidelines are simply common-sense principles, such as the need for reform that doesn't hurt job creation or the need to eliminate duplicative wasteful spending.

But if there is one overarching principle for true reform, it's that we cannot pick winners and losers. Real reform must be accessible to every American.

If a family is forced to give up a health plan that is working for them, can we call that reform? If a small business must lay off employees to comply with new mandates, can we call that reform? If a doctor is forced to close her family practice because the cost of malpractice insurance is prohibitive, can we call that reform? If government bureaucrats make decisions that should be left to doctors and patients, can we call that reform, Madam Speaker? Obviously not.

Our goal is to increase access to quality health care for every single American, including those with preexisting conditions. H. Res. 9, that we're going to be considering here today, puts us on the path to do just that.

As I said at the outset, this is a tremendous challenge. Achieving the goal of meaningful health care reform, which we all share, will demand an open and collaborative process. The four committees of jurisdiction have a great deal of work ahead of them. This is a process in which we all must contribute—Democrats and Republicans alike.

We have good ideas that are coming from both sides of the aisle, and I believe that they will be considered through this deliberative process. These ideas must be shared, analyzed, and debated. If we all participate in this open and transparent process, I believe that we can address the health care challenges that we face in an effective and meaningful way.

Ultimately, we all hope to arrive at the same place. We all share the same goal, that is, access to quality care for all. That's what House Republicans want to achieve, and that's what my Democratic colleagues want to achieve as well. And that's what President Obama wants to achieve. We all have our own views on how we get there.

□ 0920

In this body alone we have 435 views on the best way to reform our health care system. We owe the American people nothing short of a rigorous and thorough debate. But if we conduct that debate in good faith, Madam Speaker, grounded in the recognition that we all hope to achieve the same outcome, I believe that we, in a bipartisan way, Democrats and Republicans together, can come up with real solutions.

Now, we saw the day before yesterday that the President said that he is willing and eager to work with Republicans on the issue of health care. That's a sentiment that I, and I know my colleagues on this side of the aisle, share wholeheartedly. This resolution, H. Res. 9, puts us on a path towards doing just that. It will begin this critically important process.

So I hope very much that we will have strong, bipartisan support for this resolution. I will say that we have an amendment that will be coming forward, a Democratic amendment that the Rules Committee has made in

order, I am happy to say, that will add to that list that our friend Mr. MATHE-SON has provided. And I will also say that contrary to the argument that has been put out there that we don't have solutions, there is a wide range of proposals that exist. And we look forward to having this committee process vigorously pursue just that.

Madam Speaker, I reserve the balance of my time.

Mr. MCGOVERN. Madam Speaker, I yield myself 4 minutes.

Madam Speaker, I rise in very strong opposition to this resolution and very strong opposition to the very closed process in which we are discussing this resolution. Once again, I am deeply disappointed that instead of working to create jobs and strengthen the economy, the new Republican majority continues to focus on reopening old wounds and fighting old battles. The resolution before us today is allegedly the replace component of the Republicans' repeal and replace strategy. I say allegedly, Madam Speaker, because this resolution is not a serious legislative effort. It is a series of talking points. It is a press release.

What this resolution does is ask the committees of jurisdiction to hopefully, maybe someday, if they would be so kind, to report legislation to the House that meets certain vague goals. Instead of repeal and replace, this is repeal and relax. Trust the Republicans to do the right thing. No thank you, Madam Speaker.

Yesterday, this House voted, without a single hearing or markup, without a single amendment, to eliminate the Affordable Care Act in its entirety. The Members who voted for that bill voted to return to the days when insurance companies could discriminate against people based upon preexisting conditions. They voted to eliminate the ban on annual and lifetime limits on care. They voted to eliminate the ability for young people to stay on their parents' insurance plans up to the age of 26. They voted to reopen the doughnut hole in Medicare. Basically, they voted for a tax increase on senior citizens who need prescription drugs. They voted to eliminate tax credits for small businesses who want to do the right thing and provide health insurance for their workers. All of that, Madam Speaker, would have the force of law. All of that was done with real legislative language. But not the resolution before us today.

Instead of real language that would provide real benefits to real Americans, this resolution is simply a collection of empty promises. And the ironic thing is that most of the provisions included in the resolution were actually addressed in the Affordable Care Act. According to this resolution, we should, quote, "lower health care premiums through increased competition and choice." Well, the Affordable Care Act already does that. Of course, many of us argued for a public option, which would have lowered premiums even fur-

ther with increased competition and choice, but my Republican friends didn't want to have anything to do with that.

The resolution before us today says we should "preserve a patient's ability to keep his or her health plan if he or she likes it." Well, the Affordable Care Act already does that. Increase the number of insured Americans? Well, we did that by 30 million people. Protect the doctor-patient relationship? We did that. And so on and so on.

On the critical issue of people with preexisting conditions, however, it's interesting to see the language that my Republican friends use in this press release that they call a resolution. They say they support, and I quote, "provide people with preexisting conditions access to affordable health coverage." Well, that sounds nice. But what we did in the Affordable Care Act was to actually ban insurance companies from discriminating against those people. I will be very interested to see how my Republican friends handle that critical issue and how much influence the big insurance lobby has around here now that they're in charge. And the doughnut hole? The resolution is absolutely silent on the doughnut hole.

Madam Speaker, health care is of vital importance to every single American. It is a big deal. And to treat health insurance reform as just another opportunity for happy talk and wishful thinking is not the way to do business in the people's House.

I urge my colleagues to reject this resolution.

I reserve the balance of my time.

Mr. DREIER. Madam Speaker, I yield myself 15 seconds.

I do so to say to my friend that I appreciate his very conciliatory remarks. Everyone has acknowledged that this measure is flawed. The President said in his press conference right after the election it was flawed. We have had the courts already throw the mandate out. We need to deal with the problem even before this measure is being implemented. So it seems to me to be absolutely essential that we proceed with this work.

With that, I am happy to yield 2 minutes to a hardworking member from our Rules Committee, the gentleman from Lawrenceville, Georgia (Mr. WOODALL).

Mr. WOODALL. Thank you, Mr. Chairman.

Madam Speaker, I have been a Member of this body for 2 weeks and 2 days, and I could not be prouder to be on the House floor today in support of the chairman's resolution. For the entire last year in my district we have been focused on one thing and one thing only, since March of 2010, and that is the repeal of the President's health care bill.

You know, before March of 2010 my district cared about health care reform. We talked about tort reform, we talked about putting patients back in charge of decisions. We talked about

ending the tax preference that businesses get so that we can purchase insurance on our own and own those policies as we do our other insurance policies. But the moment this bill was signed into law, the moment the President's bill was signed into law that discussion stopped and the repeal discussion began. And with the repeal yesterday, we now begin anew the discussion of how properly to reform the system. And I am anxious to have that discussion.

You know, we learned a lot in our time in the minority. One of those things we learned is that bringing simple, straightforward resolutions to the floor is better for the process. It's better for the American people. The Speaker has made that commitment. We continue that commitment today with these instructions to go back to the drawing board and bring things forward one at a time.

Now, I sat through 10 hours of hearings in the Rules Committee, where folks came forward and said go ahead and repeal the bill, but save this one provision. Let's have this one provision stay. Go ahead and repeal the bill, but keep this other one provision. We now have that opportunity. We have now repealed the bill here in the House, and we have the opportunity to bring those provisions forward one by one.

And I will tell you what, I am not going to like all those provisions. And some of those provisions are going to pass the House. And that's the way it ought to be. You shouldn't have a one-size-fits-all, take-it-or-leave-it kind of system. You ought to be able to have that discussion on both sides of the aisle. And I have no doubt that provisions are going to come forth from our committees that I am going to vote "no" on, but my colleagues on the left and on the right are both going to vote "yes" on, and it's going to pass. And that's the way the process ought to be, one provision at a time, one idea at a time. Tort reform, insurance reform, putting patients back in charge of those decisions, putting doctors back in charge of those relationships.

Mr. MCGOVERN. Madam Speaker, I yield myself 15 seconds.

Madam Speaker, I think our objection is not with the idea of having a serious debate on these issues. There are areas where we can come together and hopefully make the bill even better. Our objection is the fact that my friends on the other side voted to repeal everything, voted to allow insurance companies to once again discriminate against people with preexisting conditions.

The SPEAKER pro tempore. The time of the gentleman has expired.

Mr. MCGOVERN. I yield myself an additional 15 seconds.

They voted to take away the benefit from senior citizens that we put in there to help try to close the doughnut hole in the prescription drug bill. And what do they do in terms of replacing it? They come not with an alternative;

they come with a press release. That's not serious legislating. That's politics as usual.

Madam Speaker, I yield 2 minutes to the gentleman from New Jersey (Mr. PALLONE).

Mr. PALLONE. Madam Speaker, I am just amazed. I listened to the gentleman from Georgia who just spoke, and he said that in his district all of the focus is on health care and health care repeal. Well, I don't know, when I go home all I hear in my district is jobs and the economy. People are concerned about the economy. They want us to create jobs, they want us to focus mostly on that issue, not on repeal of health care.

□ 0930

The other problem I have with the gentleman from Georgia's comments is he seems to think that because the House passed this repeal yesterday that the health reform is repealed. Well, let me tell everyone it's not, and this is just a ruse. This bill, this health reform wasn't repealed. The Senate isn't even going to take it up. The President has said that he would never sign a repeal bill.

So the Republicans are just wasting their time, rather than focusing on what we should be focusing on, the jobs and the economy. They keep talking about this false repeal that is never going to happen.

Now, I also wanted to say something about what Mr. DREIER said before. He talked about increasing access, increased choices. That's not what goes on if this bill was ever repealed. The choice is now for people who have pre-existing conditions, they can't get insurance. They have to pay more if they try to get it, or the kids that are on the policies that would be taken off if we had the repeal, or the people that would again face lifetime caps.

You don't have choices under the old system because you were denied care through the insurance companies' discrimination. The only way you have choices and access is under the health reform that this House and this country have put into law where you are guaranteed you get insurance, even if you have a preexisting condition. You don't have to worry about lifetime caps. You can put your kids on the policies.

So don't talk to me about choices and access. People don't have choices and access with those discriminatory policies that would be put back in place by the insurance companies. As they continue to raise premiums, more and more people will not have access to health care and have access to health insurance. The only way you have access and choices is if we keep the health reform in place.

Mr. DREIER. Madam Speaker, I am happy to yield 2 minutes to my very, very good friend and California colleague, the dean of our delegation, Mr. LEWIS.

Mr. LEWIS of California. I very much appreciate my colleague yielding.

Madam Speaker, I think the entire public knows that America has had in place for a long time one of the finest health care delivery systems in the world. It's the envy of many.

That is not to say that it's perfect. That's not to say that we don't have major challenges like preexisting conditions and like questions of portability. But, indeed, if the people who put in place a health care plan last year had had their way, they absolutely would have taken the next step; that is, to have a centralized, government-run health care system. That's the pattern of their future.

At this moment, Great Britain, which had such a thing in place for some time, is attempting to back off of their system and have more relationships between physicians and their patients. Indeed, they are doing that because their system does not work.

It's very important that we not allow the former majority to take their next step; that is, to have government-run health care. With that, yesterday, we passed a repeal that will take us to conference with the Senate, and, in turn, today we are beginning the process of reexamining where we have been to make certain that we put in place health care that is positive for all Americans, not health care that's run by the IRS.

Madam Speaker, our health care system is the envy of much of the world. That does not mean it is perfect.

There is no question we must resolve major challenges such as pre-existing conditions, portability and cost. But we can deal with these by breaking down barriers between States, liability reform and tax incentives. We certainly do not need IRS-enforced mandates.

Despite the loud and clear protests of the American people, the Democrat leadership of the House and Senate rammed through a job-destroying health care act last year. It created a large and costly new government bureaucracy that gets between doctors and patients. The law includes hundreds of new burdensome taxes, regulations, and mandates on businesses and individuals.

There is no doubt in my mind that supporters of this massive bill would have passed a government-run single payer system if they could have gotten away with it. What they did pass was a first step towards total government run healthcare. The same kind of healthcare system that Great Britain is trying to abandon, because it doesn't work.

We must stop America from going down the path of a government-run, single-payer healthcare system.

Yesterday the House acted on our promise to repeal Obamacare, and today we must vote to start the process of replacing it with common sense, affordable solutions.

Mr. MCGOVERN. Madam Speaker, I yield 2 minutes to the gentleman from New Jersey (Mr. ANDREWS).

(Mr. ANDREWS asked and was given permission to revise and extend his remarks.)

Mr. ANDREWS. I thank my friend from Massachusetts.

Madam Speaker, well, we could have a bill on the floor today that expands

fair trade for American companies, but we don't. We could have a bill on the floor today that finds ways to stop sending a billion dollars to the Middle East to buy oil every day and instead create jobs producing energy in America, but we don't. We could have a bill on the floor today talking about ways to regenerate our real estate market and get people buying and selling houses again, but we don't.

What we have is an empty promise that someday, somehow, the new majority will come to the floor with a bill that will fix the health care problem. Quoting from Speaker JOHN BOEHNER, he said on June 18, 2002, "Instead of focusing on new health care mandates that will increase costs on employers and swell the ranks of the uninsured, Senate Democrats should focus on providing access to health insurance for the 39 million of Americans who remain without health coverage. That should be our first priority."

So at a time when Republicans had a majority in this House, a President in the White House, and for most of the time a majority in the Senate, their first priority, which was to deal with the health care problem, they didn't do. That's the standard against which we should measure today's promise. It doesn't leave much room for much optimism.

I would say, instead of focusing on yet another empty promise, let's focus on putting Americans back to work.

Mr. DREIER. Madam Speaker, I yield myself 30 seconds.

Madam Speaker, everyone has acknowledged that the legislation that has passed is flawed. Everyone has acknowledged that. The President of the United States, when he said that the 1099 issue imposing mandates on small businesses needed to be rectified in his first news conference after the election, recognized that there were problems.

We had, the day before yesterday, the distinguished assistant minority leader, the former majority whip, Mr. CLYBURN, say that he believes that Republicans and Democrats should work together to improve this bill. We have already had a Federal court determine that it is unconstitutional to impose this mandate. Madam Speaker, we need to work together to resolve the very, very great challenges that we have ahead of us.

I reserve the balance of my time.

Mr. MCGOVERN. Madam Speaker, I yield 2 minutes to the gentleman from Texas (Mr. DOGGETT).

Mr. DOGGETT. Madam Speaker, with last year's important health insurance reform law, we provided real guarantees to American families against insurance monopoly abuses. Today, Republicans tell these families, "Forget the binding guarantees. We have 12 platitudes for you."

This isn't a Republican prescription—this is a placebo. And for the American middle class, it's a very bitter pill indeed.

Yesterday, House Republicans, in a remarkable measure, with one vote, decided to increase the national debt, reduce the solvency of the Medicare Trust Fund, raise insurance premiums, and charge seniors more for their health care.

During the last 12 years that these Republicans were in charge, 6 of them with near total domination of the government here in Washington under the Bush-Cheney administration, they failed to enact even one of these 12 platitudes in this flimsy 2-page excuse of a bill. Twelve health care platitudes up now, missing in action for 12 years.

Who wouldn't be for some of them? They are broad platitudes that propose something that they apparently kept hidden under a bushel for the last 16 years and now will unveil. Well, I think it will just be the same old tired, rejected, reread Republican proposals to give more income tax breaks to those at the top.

If you believe that they have got something new to offer to genuinely reform our health care system in a way that will help middle-class Americans instead of health insurance monopolies, I think you will want to buy some of that Republican ice cream that helps you lose weight. Our families don't need Republican platitudes; they need real help.

I will have to stay I think the tea party types are right about one thing. There are dangers from soaring debt, dangers they forgot for a decade. There are dangers from Big Government. But, you know, that's not the only threat our families face. They face threats from big banks and from big insurance monopolies.

The SPEAKER pro tempore. The time of the gentleman has expired.

Mr. MCGOVERN. I yield the gentleman 1 additional minute.

Mr. DOGGETT. Our middle-class families are threatened not only from the challenges of government, but from the big pharmaceutical monopolies that charge our people more than anywhere in the world, from the giant insurance monopolies. And sometimes, sometimes our families need government to come down on our side because otherwise those giant economic forces will take advantage of our families by writing out the very protection that the sick and injured need the most, protection that they write into the fine print of an insurance policy that no ordinary person can understand, where they are told that they are not covered anymore, that they have a preexisting condition, that you have reached your policy limits and cannot get the care that your doctor says is vital to sustain your life, that this policy just doesn't cover sick people or that it can be rescinded.

I say we need to provide people genuine protection. That's what we did last year. That's what they want to eliminate this year. Let's be on the side of the people, not the 12 Republican platitudes to benefit insurance monopolies.

Mr. DREIER. Madam Speaker, I yield 1 minute to one of the hardworking members of this brand-new class that has come in carrying this strong message, the gentleman from Columbus, Ohio (Mr. STIVERS).

□ 0940

Mr. STIVERS. I thank the gentleman for yielding.

Madam Speaker, I voted for the repeal of the health care bill yesterday because I think doing otherwise would have been supporting the status quo, and that's unacceptable. I believe there are some good ideas that were in the original health care bill that can be used and improved; but some of those ideas are in H. Res. 9 today that instruct the committees on next steps on health care.

However, there is one idea that I think we need to add to that list. I think we need to add the allowing of young folks to stay on their parents' insurance through H. Res. 9. In this tough economy, many students are unable to find jobs right out of school. As a member of the State senate, I sponsored a bill that would allow those up to age 30 to stay on their parents' plan, and I just heard from a constituent that his 23-year-old son Justin is back on his parents' insurance.

Moving forward, I'm committed to working with my colleagues in a bipartisan manner to support reforms we agree on, like allowing young adults to stay on their parents' plan. This was included in the Republican alternative last year, and it should be included in the replacement bill this year.

Mr. MCGOVERN. Madam Speaker, I want to thank the gentleman for his comments in recognizing the fact that the provision that allows parents to keep their children on their insurance until they are 26 is a good idea. But he voted yesterday, along with all the Republicans, to repeal that, to take that away. And this press release that they're now saying is a bill on the House floor here doesn't even address that issue.

So I wish the gentleman would have actually voted with his convictions yesterday and voted against repeal, because what he did, if, in fact, this bill becomes law, will deny parents to be able to keep their kids on their insurance until they are 26.

I yield 2 minutes to the gentlewoman from Florida (Ms. WASSERMAN SCHULTZ).

Ms. WASSERMAN SCHULTZ. Madam Speaker, I rise today to oppose the Republicans' cynical attempt to replace the health care reform law.

Yesterday's decision to repeal the Affordable Care Act was truly damaging to the American people, but today's decision to tout the central reforms of the Affordable Care Act as Republican ideas is simply baffling. If the provisions in H. Res. 9 were really the Republicans' priorities, they would leave the Affordable Care Act intact because all of these provisions exist in the current law.

If we all agree on the importance of keeping young adults on their parents' insurance, prohibiting insurance companies from dropping coverage for the sick and strengthening Medicare, then this spectacle is a colossal waste of time that we don't have. If Republicans really want to guarantee these consumer protections to the American people, they would not stage partisan antics with this kind of resolution.

Even when Republicans had control of the entire government for 6 years, they did nothing to reform our Nation's health care system. And during that time, premiums skyrocketed, the number of uninsured Americans grew to 47 million, and those with insurance saw their benefits decimated. Of course, it would have been great to have the Republicans as willing partners during the last 2 years as we worked hard to pass the Patient Protection and Affordable Care Act. Unfortunately, they insisted on being the Party of No even as we incorporated so many of their party's ideas into the law.

Rather than roll back the hard-fought consumer protections and freedoms that unshackled Americans from the whims of private insurance companies, as former Republican Senate Majority Leader Brill Frist said, Republicans should be working with us to build on and improve the health care system.

Not to mention, every potential minute spent in committee focusing on redundant legislation is another minute that we are not helping American families and businesses emerge from this recession. Democrats have pledged to measure all legislation by the proposal's success at creating jobs, strengthening the middle class and bringing down the deficit.

Unfortunately, the Republican majority's hasty vote to repeal the Affordable Care Act fails on all such accounts. The American people deserved and got real reform. This vague resolution stating so-called Republican principles on health care reform is like giving the American people a wish sandwich. There's nothing between the bread, but we wish there was.

Mr. DREIER. Madam Speaker, I yield myself 15 seconds to say to my very good friend that the fact of the matter is the Republicans sent association health plans to make sure that small businesses could drive the cost of health insurance down to the Senate, and our friends in the other body in the other party killed that measure. We put into place for seniors access to affordable prescription drugs. And so we have worked diligently to make this happen.

With that, I am happy to yield 1 minute to my good friend from Fort Myers, Florida (Mr. MACK).

Mr. MACK. I thank the gentleman for yielding.

Madam Speaker, yesterday was a great day for democracy and freedom in this country. Yesterday, the Republican-led Congress voted to repeal a

health care law that was passed by the Democrats that would mandate, that would force people to buy something even if they didn't want to. It's unconstitutional, it's un-American, and it is not what this country stands for.

Now we are hearing a lot of our colleagues on the other side talk about how we want to strip away this and we want to strip away that and we are playing games and this resolution is a game. Well, let me remind you that it was the President of the United States in his State of the Union that talked about tort reform, which was not included in ObamaCare. We intend to include tort reform in this Congress. We also believe that association health plans are very important to ensure that more people have access to health care, something that your side of the aisle failed to do.

There are real ways to do common-sense reforms. It is not by having the government mandate what you have to buy as a citizen of this country. It is unconstitutional. It is un-American.

ANNOUNCEMENT BY THE SPEAKER PRO TEMPORE

The SPEAKER pro tempore. Members are advised to remember to address their comments to the Chair and not to others in the second person.

Mr. McGOVERN. Thank you, Madam Speaker, for maintaining decorum in the House. We appreciate it.

I yield 2 minutes to the gentleman from New York (Mr. WEINER).

Mr. WEINER. Madam Speaker, we are seeing today that after 75 or so hours of markup, hundreds of hours of hearings, 16 months of long debate, thousands upon thousands of meetings and town halls, the Republicans come to Washington and don't know what they want to do in health care yet. My constituents should understand, and the Speaker should understand, that this resolution says, go back and figure out what we want to do.

Ladies and gentlemen, I would remind you that last year during the health care debate, the Republicans had a chance to offer an alternative. They didn't. Now they come to Washington and say, oh, let's have the committees go try to figure this all out. Yesterday they were the Party of No, and today they are the party of "we don't know how to go."

Who are these Republicans? After months and months and months of the national debate, you can go into any coffee shop, any church basement, just about any card game in this country and people have solid ideas about what they think about health care. But not the Republicans. They've got a resolution today that says, hey, committees, go try to figure this stuff out, it's complicated.

And by the way, I don't know, Madam Speaker, if I read it correctly, but I don't think there are any deadlines. I don't think there are any deadlines. I will eat this rostrum if they come back with legislation that actually accomplishes the things that they just repealed yesterday. It's not going to happen.

And this is the fundamental problem that I believe the majority party now has: they have the campaign slogans all down. I just heard the gentleman from Florida do one: "unconstitutional." They have the campaign slogans locked. And I have to give them credit, they were successful with them. They came here, we're against, we're against, we're against. Well, now here it is. Unlike past Congresses that come in all geared up for the things they want to do, they're all geared up with a resolution saying, hey, go figure out what it is that we should do.

The American people deserve a lot better than this. They deserve comprehensive health care that saves them money. That's what was repealed yesterday.

Mr. DREIER. Madam Speaker, I yield myself 15 seconds to say to my friend from New York, it is very interesting that the President of the United States the day before yesterday said that he was willing and eager to work with Republicans to ensure that we rectify this flawed bill. The distinguished assistant minority, the former majority whip, Mr. CLYBURN, said in a program earlier this week that he looked forward to working with Republicans in a bipartisan way to address this.

With that, Madam Speaker, I yield 1 minute to my good friend from Allentown, Pennsylvania (Mr. DENT).

Mr. DENT. Madam Speaker, yesterday the House voted to repeal the misguided health care law of 2010, which is seriously flawed, both in its structure and its practical implementation. I keep hearing discussion about the Affordable Care Act. If one believes the Affordable Care Act will not add to the deficit, I think that one is apt to believe just about anything. But today we have the opportunity to direct the committees to produce practical and effective reforms.

I urge my colleagues to join me in supporting this resolution and commit to working together to enact meaningful reforms that will lower health care costs, expand access to affordable insurance coverage, and foster economic growth and jobs.

The current law is simply unwise and unsustainable. I believe we must replace the misguided policies of the current law with reforms that will address rising health care costs. Specifically, I support medical liability reforms to reduce the practice of defensive medicine. I believe Congress must provide Americans with more options for affordable health coverage, such as low-cost catastrophic plans for younger individuals, patient-driven health care savings accounts, cross-state purchasing and effective high-risk pools or reinsurance models as a backstop.

Again, I urge my colleagues to support this resolution, and let's get on with this serious debate.

Mr. McGOVERN. I yield 10 seconds to the gentleman from New York (Mr. WEINER).

Mr. WEINER. I just want to respond to the distinguished chairman. The

President did not say anything about this dastardly flawed bill. He said we should "implement and improve." You say "repeal and replace." You put that to a vote of the American people. Implement and improve is the way we build important legislation in this country.

□ 0950

Mr. DREIER. Madam Speaker, I yield myself 5 seconds to respond.

Madam Speaker, let me say to my friend that the President did say that he is willing and eager to work with Republicans to rectify the problems that are here, and right after the election, he said that he wanted to correct the 1099 issue, recognizing it is a flawed measure.

I reserve the balance of my time.

Mr. McGOVERN. Madam Speaker, I yield 2 minutes to the gentlewoman from Maryland (Ms. EDWARDS).

Ms. EDWARDS. Madam Speaker, I am actually disappointed that I am standing on the floor of the House of Representatives today yet again defending and protecting the rights of the American people to health care.

It is such a shame that yesterday and the day before for 7 hours our Members on the other side of the aisle spent their time deciding for the American people to take away the ability of parents to provide health care for their young people up to age 26.

They spent 7 hours, other than finding jobs, trying to make sure that small businesses who are providing health care don't get a tax credit anymore for the health care that they are providing for their employees.

They spent 7 hours trying to strip away the ability of our seniors to make sure that they don't have to reach into their own pockets, deeper pockets, not deep anymore, to pay for prescription drugs.

Yesterday and the day before they spent 7 hours debating whether it is a good idea for insurance companies to be able to deny people health care for preexisting conditions when they know that at least 129 million of us, 65 percent or so of us, actually have preexisting medical conditions.

So it is really disappointing that here we are yet again with the Republicans saying we took it all away in one day, and now we are going to think about some of it that we might replace again.

Well, we have created a health care law for the American people that is about affordability and accessibility. And I know that the Democrats are going to stand on the side with the President, implementing the law. And thank goodness for the American people. They should know that the Republicans didn't do anything yesterday other than putting a whole bunch of stuff on a piece of paper that has no chance of going anywhere. The paper is not even worth the ink that is printed on it.

Mr. DREIER. Madam Speaker, as a native of the Show-Me State, I am very

pleased to yield 1 minute to my friend from St. Elizabeth, Missouri (Mr. LUETKEMEYER).

Mr. LUETKEMEYER. Madam Speaker, I am proud to rise in support of this resolution, a bill that would direct committees to craft new health care legislation and which would help steer our country back in the right direction. A serious fix for what ails health care in America will entail more than tweaking the law; it means replacing the health care bill with real reform.

Missouri is the Show-Me State, and last August, 71 percent of Missourians went to the polls and said "no." They rejected this law.

As I go about my district and talk to my employers, they tell me that instead of premiums going down, they have actually gone up 25–40 percent. And instead of improving access to care, we actually have doctors retiring in record numbers.

True reform would be passing significant lawsuit reform so doctors can faithfully perform their jobs of taking care of their patients. I also support increasing access to insurance by allowing small businesses to pool together to get the best plan for their employees.

All along Republicans have offered a commonsense approach to improving our health care system and in a way that controls cost and provides the quality of care that Americans deserve. Today's vote is an important step in realizing that goal.

Mr. MCGOVERN. Madam Speaker, how much time remains?

The SPEAKER pro tempore. The gentleman from Massachusetts has 12¼ minutes remaining. The gentleman from California has 15¼ minutes remaining.

Mr. MCGOVERN. At this time I reserve the balance of my time.

Mr. DREIER. Madam Speaker, I am very happy to yield to one of the other new Members who comes with a very strong message here. She is a nurse, and she is from Gallatin, Tennessee. I yield 2 minutes to the gentlewoman from Tennessee (Mrs. BLACK).

Mrs. BLACK. I thank the gentleman for yielding.

Madam Speaker, I rise on behalf of the people of middle Tennessee who spoke loud and clear this last year that they do not want the Federal Government dictating their health care. The plan that was signed into law by the President was supposed to increase access to health care and lower costs for American families. However, in the months since the bill passed, it has been shown to do neither. We now know that the health care bill not only increases premiums for families but hinders job creation and is filled with unintended consequences that not only diminish the quality of our health care system but also do great damage to our economy, and increase our deficit.

This new Congress was sent here to follow a more responsible path. Through commonsense, market-based

solutions, we can replace a flawed health care bill to have the best health care system in the world.

I am eager to take part in drafting the new Republican plan and focusing on rolling back the individual mandate, eliminating the onerous demands on small businesses, and actually lowering the cost for families and increasing access to quality, personalized health care.

I also look forward to a thoughtful discussion that includes solutions that went ignored before, like tort reform, increasing competition, and tax breaks instead of tax hikes.

As a nurse for over 40 years, my top priority will be making sure our plan honors the doctor-patient relationship that is so sacred in medicine because there is no place for a government bureaucrat in an individual's health care decision.

As a member of the Ways and Means Committee, I am excited to work with Chairman DAVE CAMP and my fellow committee members on a new way forward to responsible health care reform. Let's do the work that the American people sent us here to do.

Mr. DREIER. Madam Speaker, may I inquire of my friend if he has any further speakers on his side?

Mr. MCGOVERN. I have further speakers, but there is a time discrepancy; so I will let you catch up.

Mr. DREIER. Madam Speaker, let me just say that I don't have other speakers here yet. I have others on their way over to the floor. I understand the disparity that exists in the timing, and I could talk for all that period of time, but I don't want the gentleman to suffer through that. So I reserve the balance of my time.

Mr. MCGOVERN. Madam Speaker, I yield 2 minutes to the gentleman from California (Mr. GARAMENDI).

Mr. GARAMENDI. Madam Speaker, as I am sitting here listening to this, I am thinking this must be something like Alice in Wonderland. This is the most bizarre debate I have heard in a long, long time.

We need jobs. We need to be focusing on the American economy. This particular resolution has no sense of reality. I have heard debates here and discussions on the floor about association health plans. I know about association health plans. I was the insurance commissioner for 8 years in California, having to deal with these non-insurance programs that left hundreds, indeed thousands of people, holding the bag when the association health plans went belly up. It doesn't make any sense.

California has had tort reform for 30 years. We have in the law today in America a protection for every individual in America from the onerous hands of the insurance companies that have continued over the years to deny benefits, to make the doctor decisions, and to literally put people's lives at risk—it's called the Patients' Bill of Rights, and our Republican colleagues

want to repeal that. We have a law that is in place. It should be implemented.

The cost issues that have been discussed here on the floor are really a discussion about what has taken place in the past. The law has yet to be implemented with regard to cost containment, the oversight of the insurance companies. All of those things are in the days ahead, and a market system is available with the exchanges. You want to talk about market, that is how you get there, with exchanges.

Replace, repeal—how bizarre is that? Americans have a protection. Yesterday, our Republican colleagues voted to remove their protections. They gave to the insurance companies once again the power to regulate their lives. We cannot allow that to happen. This step today is just Alice in Wonderland.

GENERAL LEAVE

Mr. DREIER. Madam Speaker, I ask unanimous consent that all Members have 5 legislative days in which to revise and extend their remarks on H. Res. 9.

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

There was no objection.

Mr. DREIER. I would like to yield 1 minute to my hardworking colleague from Lincoln, Nebraska (Mr. FORTENBERRY).

□ 1000

Mr. FORTENBERRY. I thank the gentleman for the time.

Madam Speaker, health care reform, the right type of reform, is important to me and important to every American. The right type of reform will actually reduce costs and improve health care outcomes while we protect vulnerable persons. However, the current health care law, as we all know, is a complicated mess that is going to shift costs to more unsustainable government spending and actually reduce health care liberties.

America deserves better.

Following yesterday's vote in support of the repeal of this law, I believe it is important to craft a new commonsense policy that provides new insurance models for families, farmers, and small business owners. Yet, as to any model that we craft, the replacement must continue to build upon a culture of health and wellness, allow newly insured persons to keep their current coverage and also retain protections for preexisting conditions. This will be important.

So now the hard work begins; but this time we have the opportunity to get it right.

Mr. MCGOVERN. Madam Speaker, I yield 2 minutes to the gentlewoman from Wisconsin (Ms. MOORE).

Ms. MOORE. I thank the gentleman for yielding.

Madam Speaker, I rise as the incoming co-chair of the Congressional Women's Caucus to talk to you a little bit about the impact that repealing this health care law will have on women.

As you all may be aware, women are twice as likely to be dependent upon their spouses for health care, and they are less likely than men to have employer-sponsored insurance. For single female heads of household, this has a devastating impact on the entire family when there is no health insurance. Of course, all of us have heard stories from our districts about the devastating impact the repeal of this law will have on women, and I heard such a story just yesterday:

Meet Nicole Lipski. She is 25 years old, is working part time, and is going to school part time; but, because of the health care law, was able to remain on her dad's insurance. Lucky for her, because just last week she had an infected pancreas and had to have her gallbladder removed in emergency surgery, which cost \$13,000 that, fortunately, was covered by her parents' insurance.

You know, this law outlaws gender rating as insurance companies, of course, charge women higher premiums than men for coverage. It also has a disparate impact on women with respect to preexisting conditions—when you consider that being a victim of domestic violence is considered to be a preexisting condition.

Now, you don't have to be a Harvard economist to know that this law is not a job killer, but we do have a Harvard economist to back us up.

The SPEAKER pro tempore. The time of the gentlewoman has expired.

Mr. MCGOVERN. I yield the gentlewoman an additional 15 seconds.

Ms. MOORE. David Cutler, a professor of applied economics at Harvard, released a new study on January 7, finding that repealing the health care law would destroy 250,000 to 400,000 jobs annually, and many of these jobs will be women's jobs—CNAs, LPNs, x ray techs, RNs, and the cleaning woman who cleans up the emergency room.

This law is a game changer and a lifesaver for women's health and employment opportunities for women.

Mr. DREIER. Madam Speaker, I am happy to yield 1 minute to my good friend from Cherryville, North Carolina (Mr. MCHENRY).

Mr. MCHENRY. Thank you, Chairman DREIER, for yielding.

Madam Speaker, last night House Republicans took a major step in keeping our pledge to America by passing the repeal of ObamaCare. Now we must work to replace this budget-busting law with sensible, market-based policies that actually lower costs for families and small businesses and expand access to affordable care.

Small businesses are the job creators that hold the key to our economic recovery. They cannot afford the hundreds of billions of dollars in new taxes in the ObamaCare law and the new employer mandate as well. Our small businesses need certainty in the Tax Code and certainty in the regulations coming out of Washington. ObamaCare only makes matters worse.

I look forward to an open and transparent debate in this Congress on alternative, affordable solutions. That's what the American people want, and that's what my constituents desire. I would also challenge my friends on the other side of the aisle to listen to the American people and to join our efforts to work towards better solutions to our Nation's health care challenges.

Mr. MCGOVERN. Madam Speaker, I yield 1½ minutes to the gentlewoman from Texas (Ms. JACKSON LEE).

Ms. JACKSON LEE of Texas. I thank my good friend from Massachusetts for yielding.

Madam Speaker, let me say that the good news is that the only thing that occurred last evening was simply a vote, because the law of the land is still the Patient Protection and Affordable Care Act. I hope that the President's words are not twisted, because I agree with him: we are all willing to work together to do the right thing, which is to amend a bill.

I don't understand the understanding of my friends on the other side of the aisle. Repealing the law of the land has nothing to do with questioning some of the provisions. Frankly, they're not even listening to a distinguished doctor, Senator Frist, the former majority leader, who said this bill—our bill—is the law of the land, and it is the fundamental platform upon which all future efforts to make that system better for that patient and that family will be based.

What is there not to understand?

Amend the bill. Don't repeal it.

In fact, Senator Frist said if the bill were on the floor, he would have voted for it. I spoke to some students the other day, and they asked about doctors. This bill has in it scholarships for medical professionals, the bill that we have.

In fact, the issue, of course, is one that you cannot dispute: this bill saves lives, so much so that the Republican majority leader ran to the media to promise seniors that they wouldn't lose the \$250 that our bill, the patient protection bill, guaranteed them so that they would have some cover, some cushion, for their prescription drugs.

So, my friends, I know we are doing the right thing. We are all willing to amend, but how ridiculous it is that you would repeal the law of the land or attempt to do so. I know the President still has his veto pen—because this bill will save lives.

Mr. DREIER. Madam Speaker, I yield 1½ minutes to one of our new Members, the gentleman from Oklahoma City (Mr. LANKFORD).

Mr. LANKFORD. Thank you for yielding time.

Madam Speaker, the repeated diatribe from Members on the other side of the aisle that somehow they are the only individuals in this Chamber who care about the health of American families demonstrates again the deep-seated partisanship that we must work to defeat.

We all want great health care in America. We hear the American people loud and clear. They don't like ObamaCare, but they do want something to be done.

We must have real national tort reform to reduce the costs of defensive medicine.

We must encourage medical innovation to deal with the FDA approval process that covers any new discovery in paperwork, costing \$1 billion a drug just to get it through the FDA process.

We must open up more options for insurance carriers, allowing someone who is frustrated with the service or the cost or quality of his carrier to fire them and to get a new insurance provider.

We must reject price fixing as a cost-cutting solution.

We must allow every American to choose their own doctors, even pay their doctors directly if they choose to do that.

We must give senior Americans more choices in physicians who accept Medicare patients.

We must provide States with greater flexibility; and we must deal with portability, high risk, and preexisting conditions.

Republicans have friends and family who are dealing with the same medical issues that Democrats deal with. Suffering, disease, and pain have no respect for political affiliation. We just believe that, if you are sick and hurting, you should contact your doctor, not Washington, DC, to see what to do next.

Let's surprise America. Let's work together, and let's get something done. Let's show them that, even with a divided House and Senate, we can reject the gravitational pull of politics, that we can put aside our differences, and that we can work together for the good of those who are most vulnerable.

Mr. MCGOVERN. Madam Speaker, I yield myself 20 seconds.

I just want to respond to the gentleman who just spoke. We hear these distortions over and over and over again. We heard them during the campaign, distortions that were perpetrated by my friends on the other side of the aisle and by their allies in the insurance industry, and that, somehow, what we passed was a bill that wouldn't allow you to keep your own health insurance. That's just wrong.

What we passed was a bill that actually provides competition and insures tens of millions more Americans.

Madam Speaker, I yield 2 minutes to the gentleman from Minnesota (Mr. ELLISON).

□ 1010

Mr. ELLISON. Madam Speaker, repeal and replace? What about protect and improve? What about improving the bill that is there right now rather than repealing and replacing?

You know, the fact is the Republican Caucus is talking about replacing a bill, and yet whether it's preexisting

conditions or filling in the doughnut hole, I've heard several of them say, "Oh, we want to keep that." But yet they don't want to protect and improve. They just want to repeal. Why? To protect the insurance industry. I can't see any other reason why they are doing this.

The Affordable Care Act is a good bill; and can it be better? Of course it can be better. But that's not what we're talking about doing today. We're talking about taking away benefits that Americans have in their hand. The Republican Caucus is snatching away people who want to get their children on their health care insurance who are under 26 years of age; snatching away free preventative care for seniors; snatching out of the hands of families whose children are trying to be able to get care who may have a preexisting condition; snatching out of the hands of seniors who are filling in the doughnut hole. They are taking away a benefit Americans have right now. This is wrong and it's a shame.

The fact is the Democratic Caucus when we had the White House and both Houses of Congress, within 2 years we brought to the American people a health care bill. When the Republican Caucus has the House for 6 years, between 2000 and 2006, they don't do anything other than do a big fat giveaway to PhRMA.

Mr. DREIER. I yield myself 15 seconds, Madam Speaker, just to say as I had said to my friend earlier, it's interesting that they continue to say that we did nothing. Associated health plans, which Democrats and Republicans like, designed to drive down the cost for small businesses to provide health insurance, was submitted from this Republican House to the other body. The Democrats, in fact, killed that measure. So attempts were made to put into place real reform.

With that, back by popular demand, the Rules Committee member from Lawrenceville, Georgia, for 2 minutes, Mr. WOODALL.

Mr. WOODALL. Thank you for yielding, Mr. Chairman.

Madam Speaker, I return to the well because I wonder if folks have the same small business people in their district that I have in my district. I wonder if folks are doing the same listening in their district that I'm doing in my district. We are here today to respond to exactly what folks have been asking for.

Now to give credit where credit is due, last year before the last Congress expired, Democrats and Republicans came together to extend for 1 year, and I would have liked to have seen it extended longer, but to extend for 1 year the tax cuts that our small business men and women were demanding. But the second part of the indecision that was there in the small business community, of the anxiety that was there, the uncertainty that was there, is what's going to happen with my health care cost. What's going to happen with

the health care plan? Now we have not solved that. We have not solved that anxiety. We have not solved that indecision, because we've only gotten one-half of it done. We've gotten it passed in the House, but we've still got to take it to the Senate and we've still got to take it to the White House.

Now again, in the spirit of giving credit where credit is due, I told folks throughout my campaign that I thought the President identified exactly the right two health care challenges, rising costs and access, and then came up with exactly the wrong solutions to those problems. Now we talk about what's going to happen to folks when the doughnut hole change goes away. Well, did we have a chance last year? And I'm new to Congress. Did we have a chance in the last Congress to vote on that standalone doughnut hole closure? I don't believe we did. Did we have a chance in the last Congress to vote on a standalone preexisting conditions solution? I don't believe we did. Did we have a chance in the last Congress to talk about kids under the age of 26 and what they can do? We did not. But what we do, we have this resolution today that is going to give us, for the first time, the opportunity as a nation to vote on those provisions one by one, because the only option Congress had last time under Democratic leadership to vote for a doughnut hole solution, to vote for preexisting condition solutions, to vote for insurance for kids under the age of 26, was to do it with the unconstitutional mandate, a trillion dollars in new spending, and hundreds of new bureaucracies.

Mr. MCGOVERN. Madam Speaker, I yield myself 20 seconds.

I would remind the gentleman, because he's on the Rules Committee with me, that we could have had a chance to vote on all those things individually and in fact he did have a chance to vote as to whether or not we could vote on them individually on the floor, but he and the other Republicans on the Rules Committee voted each and every one of those protections down. They voted against protecting people against preexisting conditions. They voted against closing the doughnut hole. They voted against allowing people under 26 to be able to stay on their parents' health insurance.

The SPEAKER pro tempore. The time of the gentleman has expired.

Mr. MCGOVERN. They voted against everything.

The SPEAKER pro tempore. The gentleman's time has expired.

Mr. DREIER. Will the gentleman yield?

The SPEAKER pro tempore. The gentleman's time had expired.

Mr. DREIER. Madam Speaker, I would like to yield 30 seconds to our Rules Committee colleague in the name of comity and civil discourse to respond.

Mr. WOODALL. I thank the chairman.

Madam Speaker, I would just say to my friend that I absolutely voted no on every single one of those Rules Committee amendments in the name of repealing the bill yesterday, and now today I have returned to speak in favor of this resolution so that you can work with the committee leadership to bring each and every one of those provisions to this floor for a vote again for the very first time. For the very first time. I'm glad to support you in having that opportunity and I'm pleased to be here in support of this resolution today.

ANNOUNCEMENT BY THE SPEAKER PRO TEMPORE

The SPEAKER pro tempore. The Chair must ask Members to bear in mind the principle that proper courtesy in the process of yielding and reclaiming time in debate—and especially in asking another to yield—helps to foster the spirit of mutual comity that elevates our deliberations above mere argument.

The Chair recognizes the gentleman from Massachusetts.

Mr. MCGOVERN. May I inquire, Madam Speaker, how much time I have remaining.

The SPEAKER pro tempore. The gentleman from Massachusetts has 4 minutes remaining.

Mr. MCGOVERN. Madam Speaker, I yield 30 seconds to the gentleman from Virginia (Mr. MORAN).

Mr. MORAN. I thank my very, very good friend from Massachusetts.

Madam Speaker, what troubles me with this debate, and I would particularly address myself to my colleagues on the other side of the aisle, is that we took two votes yesterday. One was to provide coverage for ourselves; the next really to deny it to our constituents. That I find troubling, because we all have the right for guaranteed coverage regardless of preexisting conditions. We have a choice of easy-to-compare health insurance plans. We have coverage for early retirees. Women have equal premium coverage. We have access to affordable care; low-cost preventative service. All of these things for ourselves but then voted to deny it to our constituents. I find that troubling.

Mr. DREIER. Madam Speaker, I reserve the balance of my time.

Mr. MCGOVERN. I yield myself the balance of my time.

The SPEAKER pro tempore. The gentleman from Massachusetts is recognized for 3½ minutes.

Mr. MCGOVERN. Madam Speaker, what is before the House today is not a serious legislative effort. It's a series of sound bites that mean nothing. Committees don't have to do anything. Speaker BOEHNER is quoted in The Hill basically saying that he's not going to hold any of these committees accountable. They can do it if they want to; whatever. If they don't, so be it. What we are dealing with here today really is kind of a political ploy, not a serious legislative effort to replace anything.

My friends on the other side of the aisle have gotten up over and over and over again and said, we're really with

you on preexisting conditions, we're really with you on the doughnut hole, we're with you on allowing parents to keep their kids on their insurance until they're 26. But yet they're really not. Because if they were, they wouldn't have voted yesterday to repeal all those protections. And if they were really with us, then we would be talking about today coming to the House floor with a series of initiatives that would actually continue to protect those benefits for consumers. But they voted to repeal all of that.

□ 1020

I want to know, how could anybody in this House, how could anybody, in light of the protections that have been put in place, go back to an individual who is now able to get health insurance because we prohibited insurance companies from discriminating against them for a preexisting condition, how can you go to them and say, well, we're going to change our mind; we're not going to do that anymore?

How do you go to senior citizens who are struggling with that doughnut hole—and we've begun to close it—how do you go to them and say we're going to raise your taxes? How do you do that?

How do you go to a parent whose child can remain on their health insurance because we've extended it to allow them to stay on it until they're 26 and say, well, that doesn't matter anymore? It just doesn't make sense.

That's not what people voted for in the last election. They didn't vote for you to repeal all of those things. What they voted against was this distortion of a health care bill that you put out there, my friends on the other side of the aisle, that was very well funded by the most expensive advertising campaign funded by the insurance companies in the history of our country, this distortion out there. Everybody was against that distortion. That is not the reality.

As the months have gone by and as the reality has become clear to people, as they have seen the benefits and the protections, as people have been able to wrest control of their health care from the insurance industry, as consumers realize they have more and more rights, as there are more and more protections that are built into law to protect people of all ages, people say, well, we don't want you to change that; we want that to be saved.

I will just say one thing. When my friends say, well, we can just do a little bit of this and a little bit of that, you really can't, because it's kind of like a domino effect. Everything has an impact.

So this is a serious debate. And if there is some indignation on this side of the aisle, it is because we know that this is a big deal, and real people who have real challenges affording their health care and dealing with the complexities of the health care system and the inequities of the health care sys-

tem are now getting some relief, and they will be hurt by what you are doing.

So let's be honest here. What happened yesterday was my friends on the other side of the aisle went on record as saying, We're against everything.

Today, we're going to pass a resolution, I guess, that doesn't do anything, doesn't even require committees to do anything, but it's just for all these nice, feel-good sound bites. That's not a serious legislative effort. That's why people are cynical.

We can do better. I urge my colleagues to vote "no" on this.

Mr. DREIER. Madam Speaker, I yield myself the balance of my time.

Madam Speaker, there was a very powerful and resounding message that came last November 2, and that is the imperative for us to create jobs and get this economy growing.

The American people are hurting. In my State of California, we have a 12.5 percent unemployment rate. Part of the area I represent has a 15.5 percent unemployment rate in the Inland Empire in southern California. It is essential that we focus our attention on creating jobs, and I believe the step that we are taking today is going to be very, very important as we pursue that goal.

Now, why is that? When we look at what passed last year, was signed last March 23 by the President, it was a measure that imposes mandates on small businesses, jeopardizing their ability to hire new workers. It's a measure that imposes dictates on doctors, a regulatory structure which undermines their potential to hire new employees. It is a measure which, in many ways, jeopardizes our potential to grow the economy because it is a dramatic expansion of the entitlement programs which Democrats and Republicans alike say need to be addressed if we're going to create jobs and get our economy back on track.

One of the things that I think is important to note is that people have said that repeal of the health care bill in fact is going to cost \$230 billion based on those CBO numbers that came out. Well, only in Washington, D.C., can one cut a \$2.7 trillion expenditure and have it labeled as a cost.

Why is it a cost? It's a cost because the measure that was signed last March 23 imposes a three-quarter of \$1 trillion tax increase on working Americans. Now, what does that do to create jobs and get our economy growing? Obviously, it undermines our shared priority of creating jobs and getting our economy back on track.

We know that with the \$14 trillion national debt that we have and deficits down the road we need to do what we can to rein in that spending, tackling entitlements and dealing with issues like the one that we're facing today.

Now, having said that, we all know that Democrats and Republicans alike want to ensure that every single American has access to quality, affordable

health insurance so that they can have access to quality health care. And I underscore the word "quality," because if one looks at the important research and development that takes place in the United States of America, I believe that the measure that was signed last March 23 and that we voted in this House to repeal yesterday, that that measure undermines the very important pursuit of research and development to deal with many of the diseases that are out there.

So, Madam Speaker, I've got to say that we all say we want every American to have access to quality, affordable health care, and everyone has acknowledged that that bill that was signed last March 23 is in fact flawed. In his news conference right after the election, the President of the United States said that he believed that we need to address the so-called 1099 provisions that impose, again, an onerous mandate on small businesses, undermining their ability to create jobs—exactly what I was saying earlier.

I quoted the distinguished assistant minority leader, the former majority whip, Mr. CLYBURN, who on a program earlier this week said Republicans and Democrats need to work together to rectify some of the problems that exist with this measure.

And, as I said, it was 2 days ago that the President of the United States wrote his editorial in *The Wall Street Journal* in which he talked about the need to reduce the regulatory burden that is imposed on the private sector so we can get our economy going and create jobs. And he also said on that same day that he is willing and eager, Madam Speaker—willing and eager—to work with Republicans to rectify some of the programs that exist in this measure.

Now, I heard my friend Mr. MATHE-SON this morning, on National Public Radio, state that there was not a plan out there, and that's the reason that, having voted against the bill, he did not vote for repeal, because there's not a plan out there. I heard that at 7:35 this morning on WAMU. Mr. MATHESON made that statement. But the fact of the matter is, unlike the plan that was signed into law March 23 of last year that did not include the kind of bipartisan participation that we believe is essential, I've got to say that we are planning to proceed with this direction to the four committees that will allow virtually every Member of this House to be involved.

We have 12 items. And I'm happy to say that under this rule we have made in order Mr. MATHESON's amendment that we will be considering in just a few minutes that will add a 13th item to deal with the so-called "doc fix." So that, again, underscores our desire to work in a bipartisan way to address some of the concerns that are there.

Now, what is it that we say needs to be done? And, frankly, the President of the United States has indicated some of these he supports.

We need to make sure that people do have a chance to purchase insurance across State lines, which is now, under McCarran-Ferguson, denied.

We need to make sure that we put into place associated health plans—again, a provision that passed the Republican House but was killed by Democrats in the Senate when we last were in the majority.

We need to do everything that we can to allow for pooling to deal with pre-existing conditions.

We need to make sure that we expand medical savings accounts that provide incentives for people to put dollars aside to plan for their health care needs.

And one of the things that the President of the United States said in his State of the Union message 1 year ago right here in this Chamber, we need to deal with meaningful lawsuit abuse reform so that we can have attention focused on patients and doctors and not on trial lawyers.

So I would say to my friend from Utah, those are five items that are part of our plan that I believe can enjoy strong bipartisan support.

□ 1030

And so, Madam Speaker, I urge my colleagues to support H. Res. 9 so that we can proceed with a bipartisan consideration of this very important goal that we share of creating jobs, getting our economy back on track, and ensuring that every single American has access to quality, affordable health insurance.

Mr. VAN HOLLEN. Madam Speaker, I rise in opposition to this resolution. The House Republican majority has brought this resolution to the House floor claiming that they will take action to replace the health reform bill that they voted to repeal yesterday—yet again, with no specifics. But the Republican record on tackling the issues with our health care system is clear. Between the years 2000 and 2006, health insurance premiums doubled—went up 100 percent—and the profits of the major health insurance companies quadrupled. What did the Congress do during those years to stop those skyrocketing premiums? Nothing.

In contrast, the health reform bill signed by President Obama finally provides the chance to rein in those exorbitant premiums and will reduce the deficit by more than \$1 trillion in the next 20 years. It has already put in place important consumer protections, reduces prescription drug costs to seniors by closing the Medicare Part D donut hole, and provides tax credits for small business owners who provide insurance coverage. And Washington Republicans just want the American people to trust that they will come up with a plan—without a single detail, without a timeline, without any track record of addressing this crisis in our Nation.

There are certainly areas where we can improve this historic reform legislation. In fact, the House voted in the last Congress to repeal the 1099 provision on small businesses—House Republicans opposed that effort. But the American people don't want to go backwards by repealing these new rights, and doing so without a specific plan to replace it

is simply irresponsible. It's time to stop playing shell games and start working to move America forward.

Madam Speaker, I urge my colleagues vote nay on this resolution.

Mr. YOUNG of Florida. Madam Speaker, I rise in support of House Resolution 9, a measure that directs a number of House committees to begin the process of drafting and reporting to the House individual bills to improve our Nation's health care system.

As you know, the House voted yesterday to repeal the health care reform law that Congress approved last year and which has deeply divided our country. The one thing made clear from that debate is there are a number of areas where all sides agree that we should look first to begin reforming our Nation's health care system. These areas include:

Preserving the rights of patients and families to keep their health plan if they like it;

Ensuring that people with pre-existing medical conditions have access to affordable health care coverage;

Preventing insurance companies from dropping coverage for patients who are sick;

Allowing young adults to remain on the health insurance policies of their parents;

Reforming our nation's medical liability system to lower health care costs by reducing the burden of medical liability policies and eliminating wasteful health care spending;

Protecting doctor—patient relationships;

Lowering health care premiums through increased competition and choice and by making health care policies available across state lines;

Providing incentives to employers to provide health care coverage, rather than fines and penalties on those who do not.

The legislation we consider today directs our committees to look at these issues bill by bill so the House can debate each issue one by one, giving all the members of the House opportunity to provide their input.

Madam Speaker, one of the reasons the nation is so divided over the health care bill enacted last year is that the House did not have the opportunity for a full and open debate on this important issue. We voted to repeal last year's legislation to give us as a nation the opportunity to start over and to do it right this time.

We should start the process again by working to enact the areas above on which we agree and through the repeal effort to undo the problems we see with last year's effort. These problem areas include:

Reversing the more than \$500 billion in Medicare cuts that threaten the availability of health care for our Nation's seniors;

Eliminating the Federal mandates that individuals must purchase health insurance, and the penalties imposed upon those who do not;

Eliminating the Federal mandates on businesses that do not provide employees with health insurance, and the penalties imposed upon those who do not;

Eliminating the more than \$700 billion in fees and taxes which threaten to stifle our economy and the creation of new jobs at a time when our Nation and our State of Florida struggle to get people back to work.

Madam Speaker, in addition to these concerns is the overall concern about the short-term and long-term cost of the current health care law. Much has been made of predictions by the non-partisan Congressional Budget Of-

fice that repeal of this legislation would actually increase the Federal deficit. But CBO's former Director Douglas Holtz-Eakin wrote in *The New York Times* just two days prior to it being signed into law that "In reality, if you strip out all the gimmicks and budgetary games and rework the calculus, a wholly different picture emerges: The health care reform legislation would raise, not lower, Federal deficits by \$562 billion."

He goes on to say, "Even worse, some costs are left out entirely. To operate the new programs over the first 10 years, future Congresses would need to vote for \$114 billion in additional annual spending. But this so-called discretionary spending is excluded from the Congressional Budget Office's tabulation."

It is no wonder that this legislation is so costly because it creates 160 boards, bureaucracies and commissions and this 2,700 page legislation will require more than 10,000 pages of new Federal regulations to implement fully.

It is this cost to the American taxpayer, this cost to American businesses, and the uncertainty this legislation creates throughout so many sectors of our economy and the health care industry that we seek to correct through this two-pronged effort this week.

Madam Speaker, we all can agree that our Nation can do a better job at providing health care coverage and services to the American people. Many agree that we can also do a better job at bringing about these changes through a more open and deliberate legislative process.

In the end, our goal is to provide a more patient centered health care system in which we preserve the vitally important doctor-patient relationship rather than a government centered health care system in which the government injects itself into the system, mandates certain provisions, penalizes individuals and businesses, and threatens to get in the middle of doctor-patient decisions.

We as a nation can improve the quality and delivery of health care for the American people and that effort begins in earnest this week with the adoption of this resolution.

Mr. HECK. Madam Speaker, I rise in support of House Resolution 9, instructing the committees of jurisdiction to report legislation to replace the job-killing health care law with a more patient-centered set of reforms. This replacement resolution is the first step toward fixing the recent job-killing health care law's serious problems: more than \$500 billion in cuts to Medicare, and \$150 billion in cuts to Medicare Advantage; crippling taxes and mandates on small business that cost Americans jobs; and overreaching Federal policies that place bureaucrats between patients and their doctor. As a physician, I see firsthand the need to improve our country's health care system. What was signed into law last year did include some good ideas, such as: allowing dependent children to stay on their parents' insurance until the age of 26; eliminating lifetime caps on coverage; and covering individuals with pre-existing conditions. However, these policies were coupled with unsustainable spending that saddles Americans with debt, and compromises their access to quality health care. The American people deserve better, which is why we need to go back to the drawing board and develop solutions that provide stability and security for those with health

care, options for those without, and rein in spiraling costs for everyone. I urge my colleagues to vote yes on this Resolution, so that we can get Americans back to work and give them the health care system they deserve.

Mr. WAXMAN. Madam Speaker, I rise in strong opposition to this resolution.

The certain result of what the Republican leadership in the House is proposing to do will be to saddle millions of Americans with higher health insurance costs, less coverage, less competition, and higher costs on small businesses and employers across the country.

This resolution is both unnecessary and a grave error in public policy.

It is unnecessary because, by the resolution's very terms, the Affordable Care Act is responsive to each and every one of the objectives outlined in the resolution for responsible health legislation.

For example: We are instructed to write changes to existing law that will "foster economic growth and private sector job creation." In the wake of enactment of the Affordable Care Act, health is among the fastest growing employment sectors in the United States, with a third of the job growth in the entire country last year—over 340,000 jobs in health care and social assistance.

The Affordable Care Act is a jobs creation law and repeal is a jobs loss bill.

The resolution calls for changes in law that "lower health care premiums through increased competition and choice." This is exactly what consumers will get from the health exchanges in the Affordable Care Act—more competition and choice than they have today.

The resolution calls for laws that will "increase the number of insured Americans." The Affordable Care Act already does that—by some 32 million Americans.

Consumers can keep their health plans—just as called for in the resolution.

The law encourages reform of the medical liability system—just as called for in the resolution.

The resolution calls for those with pre-existing conditions to have access to affordable health coverage. The Affordable Care Act prohibits insurance coverage from being cut off for pre-existing conditions.

That is why the Affordable Care Act already meets all the public policy goals outlined in this resolution.

This resolution is also a grave error in public policy.

It is important to appreciate what has been excluded from the instructions to our committees for changes in the health laws.

As I stated have stated earlier in the debate on repeal of the Affordable Care Act, under the directions to us in this resolution, there will be:

No prohibition on discrimination against over 100 million Americans with pre-existing conditions;

No prohibition on insurance companies cancelling your coverage when you get sick;

No prohibition on lifetime caps and annual limits;

No required coverage for young adults on their parents' policies;

No assistance to seniors struggling to afford the cost of drugs in the donut hole;

No free annual check-ups and preventive care in Medicare;

No tax credits for families and small businesses to pay for health insurance.

All of these reforms are in the law today. None of these reforms will survive if this resolution passes and the committees of jurisdiction follow this terribly flawed blueprint.

I strongly oppose this resolution and urge its defeat.

Mr. SESSIONS. Madam Speaker, I rise today in support of H. Res. 9 and the promise of providing health care solutions that bring American's access to quality affordable health care of their choice. This resolution shows that my Republican colleagues and I are committed to the future of health care in this Nation. Allowing the appropriate committees to provide solutions for our Nation's health care problems is the first step to that commitment.

I look forward to exploring and expanding high risk pools to create universal access to those with pre-existing conditions; real and meaningful tort reform so doctors do not have to practice defensive medicine; the creation of small business health plans that generate larger insurance pools and drive down health care costs. We should be rewarding innovation and allowing States more flexibility to create efficient and successful ways in dealing with their uninsured populations; allowing for greater portability for individuals to purchase health care across State lines; encouraging the Nation as a whole to live healthier lives. Lastly, it is absolutely essential to give every American the same tax advantage that Unions and corporations enjoy in the purchase of health insurance.

There is no shortage of great ideas on how to reform our health care delivery system, and most of them steer clear of creating new entitlement programs that will bankrupt our country. In the wake of record debt and deficits now is the time to work together for common sense solutions that provide individuals the access to quality health care without threatening the doctor patient relationship. I am a proud cosponsor of the Resolution we are discussing on the floor today and I look forward to voting for it later today.

Mr. DREIER. I yield back the balance of my time.

The SPEAKER pro tempore. All time for debate has expired.

AMENDMENT OFFERED BY MR. MATHESON

Mr. MATHESON. Madam Speaker, I have an amendment at the desk.

The SPEAKER pro tempore. The Clerk will designate the amendment.

The text of the amendment is as follows:

Amendment printed in part B of House Report 112-2 offered by Mr. MATHESON:

In paragraph (11) of the resolved clause, strike "or,".

In paragraph (12) of the resolved clause, strike the period and insert "; or".

Add after paragraph (12) of the resolved clause the following:

(13) enact a permanent fix to the flawed Medicare sustainable growth rate formula used to determine physician payments under title XVIII of the Social Security Act to preserve health care for the nation's seniors and to provide a stable environment for physicians.

The SPEAKER pro tempore. Pursuant to House Resolution 26, the gentleman from Utah (Mr. MATHESON) and a Member opposed each will control 5 minutes.

The Chair recognizes the gentleman from Utah.

Mr. MATHESON. I yield myself such time as I may consume.

Madam Speaker, I rise today to offer an amendment to H. Res. 9.

Although I do not support a wholesale repeal of the legislation, I do believe that there are some bipartisan improvements that can be made to the existing law, and I think now is the time for all of us in Congress to roll up our sleeves and work together.

The goal of this amendment is pretty straightforward. It is set up to maintain adequate health care service, to stabilize the business practice of doctors, and to take into account the long-term economic health of this country.

We all agree that the doctor-patient relationship is a fundamental part of quality health care, but we have found that we have a flawed formula when it comes to setting reimbursement levels. And every year it threatens the ability of doctors to care for their patients, and it threatens the ability of patients to see their doctors.

Members of Congress on both sides of the aisle and stakeholders throughout the health care community, physicians, senior citizens—they all recognize that we have a flawed policy.

How many times in the past have we come together in a bipartisan way over the years in the House of Representatives to provide a temporary patch to this problem without fixing the underlying problem?

In 2010 alone, Congress took five different votes to delay a scheduled cut without stepping up and dealing with a permanent fix to the problem. By an overwhelming vote just a few weeks ago, Congress supported a 1-year delay to a looming 25-percent cut in physician payments.

My amendment is very straightforward and clear. It adds an additional instruction to the committees of jurisdiction over health care legislation to replace the flawed sustainable growth rate formula used to set Medicare payments for doctors. And it requires that Congress adopt a permanent fix to what has previously been an ongoing problem.

It's the right thing to do on behalf of doctors and patients. It's the right fiscal policy as we look for ways to make health care funding more sustainable and more predictable. And as we begin the year looking towards improvements in this extremely complex and yet highly personal and important issue of health care, I think that adopting this amendment would be a good step to move in that direction.

I ask all of my colleagues to support this amendment in a bipartisan way.

I reserve the balance of my time.

Mr. DREIER. Madam Speaker, I would like to claim the time in opposition to the Matheson amendment.

The SPEAKER pro tempore. The gentleman from California is recognized for 5 minutes.

Mr. DREIER. I claim time in opposition to the amendment to say that I support the amendment, Madam Speaker.

I believe that as you look at the list of 12 items that we have in H. Res. 9, they are not to be limited at all. And I think that by virtue of our making the Matheson amendment in order to deal with the so-called doc fix issue, we have made it very clear that we are already beginning at this juncture to work in a bipartisan way in our quest to create jobs, get our economy back on track, and ensure that every single American has access to quality affordable health care.

And so this is, again, the beginning of a very important process. And I'm very pleased that Mr. MATHESON has been able to play a role in fashioning H. Res. 9.

And Madam Speaker, I hope very much that with the President of the United States saying that he is willing and eager to work with Republicans to rectify the problems that exist with the passed health care bill and the fact that Mr. CLYBURN, the assistant minority leader, has said that he wants to work in a bipartisan way to deal with these issues, will lead to strong bipartisan support for Mr. MATHESON's amendment and for the underlying resolution.

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

Mr. MATHESON. I yield 1 minute to my colleague from New Jersey (Mr. PALLONE).

Mr. PALLONE. Madam Speaker, I rise in support of Mr. MATHESON's amendment.

I do want to point out, though, that the Democrats, when we were in the majority, many times tried to pass a permanent fix and did not receive support, I believe, from many Republicans—except I think in one case we did have Dr. BURGESS from Texas' support.

Back in November of 2009, we passed a permanent fix, a doctors' fix. But because we could not get any Republican support—any real Republican support—we had to continue to rely on short-term fixes. We did however, as you know, at the end of the last session pass a 1-year fix, which is in effect now.

But I do think that this is a very commendable response that Mr. MATHESON has, and I certainly intend to support it.

But the difficulty is that the many years when the Republicans were in the majority, they had the opportunity to pass a permanent fix and to deal with this issue, and they always kicked the can down the road and then did not cooperate with us on a bipartisan basis when we were in the majority to try to achieve a permanent fix.

I certainly intend to work with the Republicans to do that, but they are the reason we don't have it now.

Mr. DREIER. Madam Speaker, I was mistakenly under the impression that the gentleman from Utah had exhausted his 5 minutes, so I would like to reclaim the remaining time that I have.

The SPEAKER pro tempore. Without objection, the gentleman may reclaim the time.

There was no objection.

Mr. DREIER. Thank you, Madam Speaker.

I reserve the balance of my time.

Mr. MATHESON. I have no further speakers. I again want to thank you for the opportunity to have this amendment considered, and I urge support of all of my colleagues.

I reserve the balance of my time.

Mr. DREIER. Madam Speaker, as we know under the structure, I have claimed time in opposition to the amendment, but I will state once again that I am supportive of the Matheson amendment. I urge my colleagues, Democrats and Republicans alike, to come together and vote for adding what would be item number 13, which will be the beginning of wide-ranging reform to ensure that every single American has access to quality health insurance so that we can again get our economy back on track and focus on job creation and growth.

With that, I again urge support of the Matheson amendment.

I yield back the balance of my time.

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

The SPEAKER pro tempore. Pursuant to House Resolution 26, the previous question is ordered on the amendment and on the resolution.

The question is on the amendment offered by the gentleman from Utah (Mr. MATHESON).

The question was taken; and the Speaker pro tempore announced that the ayes appeared to have it.

Mr. DREIER. Madam Speaker, on that I demand the yeas and nays.

The yeas and nays were ordered.

The SPEAKER pro tempore. Pursuant to clause 9 of rule XX, the Chair will reduce to 5 minutes the minimum time for electronic voting on the question of adopting the resolution if that question arises without intervention of a motion to recommit.

The vote was taken by electronic device, and there were—yeas 428, nays 1, not voting 5, as follows:

[Roll No. 15]

YEAS—428

Ackerman	Bishop (NY)	Capps	Holt	Murphy (PA)
Adams	Bishop (UT)	Capuano	Honda	Myrick
Aderholt	Black	Cardoza	Hoyer	Nadler
Akin	Blackburn	Carnahan	Huelskamp	Napolitano
Alexander	Blumenauer	Carney	Huizenga (MI)	Neal
Altmire	Bonner	Carson (IN)	Hultgren	Neugebauer
Amash	Bono Mack	Carter	Hunter	Noem
Andrews	Boren	Cassidy	Hurt	Noem
Austria	Boswell	Castor (FL)	Inslee	Nunes
Baca	Boustany	Chabot	Israel	Nunnelee
Bachmann	Brady (PA)	Chaffetz	Issa	Olson
Bachus	Brady (TX)	Chandler	Jackson (IL)	Olver
Baldwin	Braley (IA)	Chu	Jackson Lee	Owens
Barletta	Brooks	Cicilline	(TX)	Pallazzo
Barrow	Brown (GA)	Clarke (MI)	Jenkins	Pallone
Bartlett	Brown (FL)	Clarke (NY)	Johnson (GA)	Pascarell
Barton (TX)	Buchanan	Clay	Johnson (IL)	Pastor (AZ)
Bass (CA)	Bucshon	Cleaver	Johnson (OH)	Paul
Bass (NH)	Buerkle	Clyburn	Johnson, E. B.	Paulsen
Becerra	Burgess	Coble	Johnson, Sam	Pearce
Benishkek	Burton (IN)	Coffman (CO)	Jones	Pelosi
Berg	Butterfield	Cohen	Jordan	Pence
Berkley	Calvert	Cole	Kaptur	Perlmutter
Berman	Camp	Conaway	Keating	Peters
Biggart	Campbell	Connolly (VA)	Kelly	Peterson
Bilbray	Canseco	Cooper	Kildee	Petri
Bilirakis	Cantor	Costello	Kind	Pingree (ME)
Bishop (GA)	Capito	Courtney	King (IA)	Pitts
			King (NY)	Platts
			Kingston	Poe (TX)
			Kinzinger (IL)	Polis
			Kissell	Pompeo
			Kline	Posey
			Kucinich	Price (GA)
			Labrador	Price (NC)
			Lamborn	Quayle
			Lance	Quigley
			Landry	Rahall
			Langevin	Rangel
			Lankford	Reed
			Larsen (WA)	Rehberg
			Larson (CT)	Reichert
			Latham	Renacci
			LaTourrette	Reyes
			Latta	Ribble
			Lee (CA)	Richardson
			Lee (NY)	Richmond
			Levin	Rigell
			Lewis (CA)	Rivera
			Lewis (GA)	Roby
			Lipinski	Roe (TN)
			LoBiondo	Rogers (AL)
			Loebsock	Rogers (KY)
			Lofgren, Zoe	Rogers (MI)
			Long	Rohrabacher
			Lowe	Rokita
			Lucas	Rooney
			Luetkemeyer	Ros-Lehtinen
			Lujan	Roskam
			Lummis	Ross (AR)
			Lungren, Daniel	Ross (FL)
			E.	Rothman (NJ)
			Lynch	Roybal-Allard
			Mack	Royce
			Maloney	Runyan
			Manzullo	Rush
			Marchant	Ryan (OH)
			Marino	Ryan (WI)
			Markey	Sánchez, Linda
			Matheson	T.
			Griffin (AR)	Sanchez, Loretta
			Griffith (VA)	Sarbanes
			Grijalva	Scalise
			Grimm	Schakowsky
			Guinta	Schiff
			Guthrie	Schilling
			Gutierrez	Schmitt
			Hall	Schock
			Hanabusa	Schrader
			Hanna	Schwartz
			Harman	Schweikert
			Harper	Scott (SC)
			Harris	Scott (VA)
			Hartzer	Scott, Austin
			Hastings (FL)	Scott, David
			Hastings (WA)	Sensenbrenner
			Hayworth	Serrano
			Heck	Sessions
			Heinrich	Sewell
			Heller	Sherman
			Hensarling	Shimkus
			Herger	Shuler
			Herrera Beutler	Shuster
			Higgins	Simpson
			Himes	Miller, Gary
			Hinchey	Miller, George
			Hinojosa	Moore
			Hirono	Moran
			Holden	Mulvaney
				Murphy (CT)
				Smith (TX)

Smith (WA) Towns
 Southerland Tsongas
 Speier Turner
 Stark Upton
 Stearns Van Hollen
 Stivers Velázquez
 Stutzman Visclosky
 Sullivan Walberg
 Sutton Walden
 Terry Walsh (IL)
 Thompson (CA) Walz (MN)
 Thompson (MS) Wasserman
 Thompson (PA) Schultz
 Thornberry Waters
 Tiberi Watt
 Tierney Waxman
 Tipton Webster
 Tonko Weiner

Welch Labrador
 West Lamborn
 Westmoreland Lance
 Whitfield Landry
 Wilson (FL) Lankford
 Wilson (SC) Latham
 Wittman LaTourette
 Wolf Latta
 Womack Lee (NY)
 Woodall Lewis (CA)
 Woolsey Lipinski
 Wu LoBiondo
 Yarmuth Long
 Yoder Lucas
 Young (FL) Luetkemeyer
 Young (IN) Lummis
 E. Lungren, Daniel

Noem Schilling
 Nugent Schmidt
 Nunes Schock
 Nunnelee Schweikert
 Olson Scott (SC)
 Palazzo Scott, Austin
 Paul Sensenbrenner
 Paulsen Sessions
 Pearce Shimkus
 Pence Shuler
 Peterson Shuster
 Petri Simpson
 Pitts Smith (NE)
 Platts Smith (NJ)
 Poe (TX) Smith (TX)
 Pompeo Southerland
 Posey Stearns
 Price (GA) Stivers
 Quayle Stutzman
 Reed Sullivan
 Rehberg Terry
 Reichert Thompson (PA)
 Renacci Thornberry
 Ribble Tiberi
 Rigell Tipton
 Rivera Turner
 Roby Upton
 Roe (TN) Walberg
 Rogers (AL) Walden
 Rogers (KY) Walsh (IL)
 Rogers (MI) Webster
 Rohrabacher West
 Rokita Westmoreland
 Rooney Whitfield
 Ros-Lehtinen Wilson (SC)
 Roskam Wittman
 Ross (AR) Wolf
 Ross (FL) Womack
 Royce Woodall
 Runyan Yoder
 Ryan (WI) Young (FL)
 Scalise Young (IN)

Watt Visclosky
 Waxman Walz (MN)
 Weiner Wasserman
 Welch Schultz
 Wilson (FL) Waters

Giffords Johnson (IL)

Watt Visclosky
 Waxman Walz (MN)
 Weiner Wasserman
 Welch Schultz
 Wilson (FL) Waters

Woolsey
 Wu
 Yarmuth

NOT VOTING—6

Payne Towns
 Ruppertsberger Young (AK)

□ 1108

So the resolution, as amended, was agreed to.

The result of the vote was announced as above recorded.

A motion to reconsider was laid on the table.

Stated for:

Mr. JOHNSON of Illinois. Mr. Speaker, unfortunately I was unable to vote on H. Res. 9 and wished to express my intentions had I been able to vote.

I had been in the middle of an Agriculture Committee Public Forum with Secretary Vilsack when the first votes were called. I went down on the floor with my notes, as I was the next in line to ask the Secretary questions, and while I was reviewing my notes and questions mistakenly missed the second vote in the series.

Had I been present to vote on rollcall No. 16, to pass H. Res. 9, instructing certain committees to report legislation replacing the job-killing health care law, I would have voted "yes."

Stated against:

Ms. BROWN of Florida. Mr. Speaker, on rollcall No. 16, I intended to vote "no."

□ 1110

LEGISLATIVE PROGRAM

(Mr. HOYER asked and was given permission to address the House for 1 minute.)

Mr. HOYER. Mr. Speaker, I yield to the majority leader, the gentleman from Virginia, for the purpose of inquiring about the schedule for the coming week.

Mr. CANTOR. I thank the gentleman from Maryland, the Democratic whip, for yielding.

Mr. Speaker, on Monday, the House will meet at noon for morning hour and 2 p.m. for legislative business with votes postponed until 6:30 p.m.

On Tuesday, the House will meet at 10 a.m. for morning-hour debate and noon for legislative business. The House will recess no later than 5 p.m. to allow a security sweep of the House Chamber prior to the President's State of the Union address. The House will meet again at approximately 8:35 p.m. in a joint session with the Senate for the purpose of receiving an address from the President of the United States.

On Wednesday, the House will meet at 10 a.m. for legislative business.

During the week, the House will consider at least one bill under suspension of the rules, which will be announced by close of business tomorrow. In addition, we will consider H. Res. 38, a resolution reducing non-security spending to fiscal year 2008 levels or less, and a bill of the public's choosing—via the

NAYS—1

Conyers

NOT VOTING—5

Costa Payne Young (AK)
 Giffords Ruppertsberger

□ 1100

So the amendment was agreed to. The result of the vote was announced as above recorded.

Stated for:

Mr. COSTA. Mr. Speaker, on rollcall No. 15, had I been present, I would have voted "aye."

The SPEAKER pro tempore (Mr. LATOURETTE). The question is on the resolution, as amended.

The question was taken; and the Speaker pro tempore announced that the ayes appeared to have it.

Mr. DREIER. Mr. Speaker, on that I demand the yeas and nays.

The yeas and nays were ordered. The SPEAKER pro tempore. This is a 5-minute vote.

The vote was taken by electronic device, and there were yeas 253, nays 175, not voting 6, as follows:

[Roll No. 16]

YEAS—253

Adams Chabot Gohmert
 Aderholt Chaffetz Goodlatte
 Akin Chandler Gosar
 Alexander Coble Gowdy
 Altmire Coffman (CO) Granger
 Amash Cole Graves (GA)
 Austria Conaway Graves (MO)
 Bachmann Cravaack Griffin (AR)
 Bachus Crawford Griffith (VA)
 Barletta Crenshaw Grimm
 Barrow Critz Guinta
 Bartlett Culberson Guthrie
 Barton (TX) Davis (KY) Hall
 Bass (NH) Denham Hanna
 Benishek Dent Harper
 Berg DesJarlais Harris
 Biggert Diaz-Balart Hartzler
 Bilbray Dold Hastings (WA)
 Bilirakis Dreier Hayworth
 Bishop (UT) Duffy Heck
 Black Duncan (SC) Heller
 Blackburn Duncan (TN) Hensarling
 Bonner Ellmers Herger
 Bono Mack Emerson Herrera Beutler
 Boren Farenthold Holden
 Boustany Fincher Huelskamp
 Brady (TX) Fitzpatrick Huizenga (MI)
 Brooks Flake Hultgren
 Broun (GA) Fleischmann Hunter
 Brown (FL) Fleming Hurt
 Buchanan Flores Issa
 Buechhon Forbes Jenkins
 Buerkle Fortenberry Johnson (OH)
 Burgess Fox Johnson, Sam
 Burton (IN) Franks (AZ) Jones
 Calvert Frelinghuysen Jordan
 Camp Gallegly Kelly
 Campbell Gardner King (IA)
 Canseco Garrett King (NY)
 Cantor Gerlach Kingston
 Capito Gibbs Kinzinger (IL)
 Carter Gibson Kissell
 Cassidy Gingrey (GA) Kline

Mack
 Manzullo
 Marchant
 Marino
 Matheson
 McCarthy (CA)
 McCaul
 McClintock
 McCotter
 McHenry
 McIntyre
 McKeon
 McKinley
 McMorris
 Rodgers
 Meehan
 Mica
 Miller (FL)
 Miller (MI)
 Miller, Gary
 Mulvaney
 Murphy (PA)
 Myrick
 Neugebauer

Reed
 Rehberg
 Reichert
 Renacci
 Ribble
 Rigell
 Rivera
 Roby
 Roe (TN)
 Rogers (AL)
 Rogers (KY)
 Rogers (MI)
 Rohrabacher
 Rokita
 Rooney
 Ros-Lehtinen
 Roskam
 Ross (AR)
 Ross (FL)
 Royce
 Runyan
 Ryan (WI)
 Scalise

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Ackerman
 Andrews
 Baca
 Baldwin
 Bass (CA)
 Becerra
 Berkley
 Berman
 Bishop (GA)
 Bishop (NY)
 Blumenauer
 Boswell
 Brady (PA)
 Braley (IA)
 Butterfield
 Capps
 Capuano
 Cardoza
 Carnahan
 Carney
 Carson (IN)
 Castor (FL)
 Chu
 Cicilline
 Clarke (MI)
 Clarke (NY)
 Clay
 Cleaver
 Clyburn
 Cohen
 Connolly (VA)
 Conyers
 Cooper
 Costa
 Costello
 Courtney
 Crowley
 Cuellar
 Cummings
 Davis (CA)
 Davis (IL)
 DeFazio
 DeGette
 DeLauro
 Deutch
 Dicks
 Dingell
 Doggett
 Donnelly (IN)
 Doyle
 Edwards
 Ellison
 Engel
 Eshoo
 Farr

Fattah
 Filner
 Frank (MA)
 Fudge
 Garamendi
 Gonzalez
 Green, Al
 Green, Gene
 Grijalva
 Gutierrez
 Hanabusa
 Harman
 Hastings (FL)
 Heinrich
 Higgins
 Himes
 Hinchey
 Hinojosa
 Hirono
 Holt
 Honda
 Hoyer
 Inslée
 Israel
 Jackson (IL)
 Jackson Lee
 (TX)
 Johnson (GA)
 Johnson, E. B.
 Kaptur
 Keating
 Kildee
 Kind
 Kucinich
 Langevin
 Larsen (WA)
 Larson (CT)
 Lee (CA)
 Levin
 Lewis (GA)
 Loeb sack
 Lofgren, Zoe
 Lowey
 Luján
 Lynch
 Maloney
 Markey
 Matsui
 McCarthy (NY)
 McColium
 McDermott
 McGovern
 McNeerney
 Meeks
 Michaud

Miller (NC)
 Miller, George
 Moore
 Moran
 Murphy (CT)
 Nadler
 Napolitano
 Neal
 Olver
 Owens
 Pallone
 Pascrell
 Pastor (AZ)
 Pelosi
 Perlmutter
 Peters
 Pingree (ME)
 Polis
 Price (NC)
 Quigley
 Rahall
 Rangel
 Reyes
 Richardson
 Richmond
 Rothman (NJ)
 Roybal-Allard
 Rush
 Ryan (OH)
 Sánchez, Linda
 T.
 Sanchez, Loretta
 Sarbanes
 Schakowsky
 Schiff
 Schrader
 Schwartz
 Scott (VA)
 Scott, David
 Serrano
 Sewell
 Sherman
 Sires
 Slaughter
 Smith (WA)
 Speier
 Stark
 Sutton
 Thompson (CA)
 Thompson (MS)
 Tierney
 Tonko
 Tsongas
 Van Hollen
 Velázquez