

we should expect and demand more accountability from the people that are in charge of the people's money.

With hard economic times affecting the unemployed, we cannot tolerate wasteful spending by government bureaucracies. With 8.5 percent unemployment nationwide, 11 percent in the Hispanic community, 14 percent in the African American community, 14 percent for returning military from Iraq and Afghanistan, and 50 percent unemployment for recent college graduates, we should demand that when government helps those we as a society say it should help, government does so properly and efficiently and in a dignified way. Otherwise, more dead people will continue to receive taxpayer money that should go to people that are at least alive.

And that's just the way it is.

#### AFFORDABLE CARE ACT REPEAL EFFORTS

The SPEAKER pro tempore. The Chair recognizes the gentleman from Tennessee (Mr. COHEN) for 5 minutes.

Mr. COHEN. Mr. Speaker, the passage and implementation of the Affordable Care Act is the culmination of an American political journey that started a century ago with Teddy Roosevelt in 1912 with the Bull Moose Party—also a Republican—and picked up years later by Harry Truman and other Presidents, including Richard Nixon, another Republican. The most recent groundwork for reform was laid in part by the former Republican Presidential candidate, Robert Dole, as an alternative to Hillary Clinton's plan, and by the present Republican Presidential nominee, Mitt Romney. I commend them for championing the concept of the individual mandate back when it wasn't quite as unpopular on their side of the aisle.

The history of reforming our Nation's health care system is a strong one that has historically been championed by lawmakers on both sides of the political spectrum, until this Congress. My colleagues on the other side of the aisle have wasted hours upon hours debating and voting upon the various versions of the legislation that would repeal the Affordable Care Act.

My colleagues know that these initiatives are fruitless. They know that voting over and over and over again—more than 30 times total—on measures to repeal the Affordable Care Act is a waste of time, but they keep calling for these votes. Do you want to know why? Because they want to distract the American public from the fact that they are so committed to unseating our President, Barack Obama, that they haven't passed any effective job-creating legislation since they took over the majority in this House in 2010.

The Supreme Court of the United States upheld the constitutionality of the Affordable Care Act, and it's time to face the facts. Earlier today, a gentleman from Virginia said, Oh, it was

just 5–4. Bush v. Gore was 5–4. We accepted that the person who got the least votes and lost Florida was President of the United States for 8 years, but the consequences we still have to face.

The Affordable Care Act is the law of the land. As a result, millions of Americans who were previously uninsured or underinsured have access to affordable, high-quality health care. In fact, the number of Americans uninsured is equal to the population of 25 of the 50 States.

Thanks to the Affordable Care Act, millions of Americans and small businesses have already benefited from lower health care costs, increased access to preventive care, and stronger patient protections.

Thanks to the Affordable Care Act, 12.8 million families will receive rebates that total over \$1 billion from insurers next month, in August, because the law requires companies to provide value for their premium dollar. Never before has that happened.

Community health centers in my district have received over \$10 million to deliver health care services to underserved and impoverished Memphians, and 170,000 households in my district will get a premium credit so they can afford quality health insurance coverage.

Women no longer are considered a preexisting condition, and insurance companies can't charge them more, which they did, by 40 percent.

Medicare beneficiaries now have access to preventive care and services without any copay.

And 64,000 people in my district will go from uninsured to insured.

32.5 million seniors nationwide received one or more preventive care treatments in 2011.

The doughnut hole is being closed; 50 percent discounts on covered brand-name generics.

Annual and lifetime caps on health care coverage are now illegal, meaning insurance companies can't kick you off the plan just because you get cancer or are in an accident or have a heart attack.

Our children are now protected because insurers are prevented from denying coverage to children under 19 for preexisting conditions. This means up to 17 million children with preexisting conditions are now protected from discrimination.

Young adults can remain on their parents' insurance until they're 26, providing some protection in this uncertain job market.

□ 1050

It's now affordable for small businesses to provide insurance to employees. The tax credits cover up to 35 percent of the cost of coverage and will go up to 50 percent in 2014. In fact, in 2011, 360,000 small employers used the Small Business Health Care Tax Credit to help them afford health insurance for 2 million workers.

One of the most misleading arguments by my colleagues concerns that penalty that will be assessed on those financially-able Americans who choose not to purchase insurance, thereby not taking responsibility for their health care. Responsibility. That's one of the keynotes of the Republican side.

But if an uninsured person in my district gets into a car accident or comes down with an aggressive illness, they're taken to a public hospital in Memphis called The MED. The MED treats everybody because they have to, and when The MED takes cares of those people, the property owners, the responsible people, pay for it through higher property taxes, or you pay for it with your insurance, if you have it, because it's uncompensated care if you go to a non-public hospital.

The time and effort put in by nurses and doctors and assistants at The MED aren't free. The medical devices and supplies that The MED used to treat those uninsured people aren't free. Every single resident of Shelby County pays for those services when a person seeks emergency services there, and the taxes go up.

People who choose not to buy insurance for themselves and their families, even with the Federal Government providing incentives and credits, are irresponsible free riders, and it's the free riders that the other side's trying to talk about, not the conscientious and responsible people who take control of their own lives and their own destinies.

Not taking responsibility for the health of yourself and your family is reckless. The free riders have been a burden on our national health care system for far too long, and it's time they take responsibility for their actions and their health. This penalty, which will be equal to no more than the estimated cost of an insurance premium, is the way we do it.

It's long past time we implement the health reform initiated by Teddy Roosevelt and championed by people of both parties. It's time Americans realize and take advantage of their right to quality healthcare. And it's long past time my colleagues stop playing partisan politics and start working on behalf of the American people, not giant corporations, once again.

#### STARTUP ACT 2.0

The SPEAKER pro tempore. The Chair recognizes the gentleman from Illinois (Mr. DOLD) for 5 minutes.

Mr. DOLD. Mr. Speaker, this week I welcomed 26 new citizens to this country. It was an inspirational event, and I'm so proud of all they have been able to accomplish. These individuals have worked hard to become citizens, and they are poised to go on and fulfill the American Dream. There is no doubt that times are tough, and yet these individuals have persevered despite all of the obstacles.

As families all over the Nation are struggling with the lagging economy,

we must remain focused on job creation and economic growth. As part of my Main Street jobs agenda, I'm focused on bringing opportunities such as STEM education for our students and for those looking for work. As part of this effort, I've cosponsored the bipartisan, bicameral Startup Act 2.0.

The United States is the higher education destination for the world. This is a testament to the strength of these institutions and the value of the degrees. But too often, foreign students come here to learn, and then have little choice but to return to their home countries after they are through.

Students with advanced degrees in science, technology, engineering, and mathematics are forced to go home with that knowledge, with the ideas and aspirations, aspirations to change the world and bring new technologies. Many of them want to stay here to make something of themselves here in our country because it is still the best place for ideas to become realities. And what we do is we force them to go back to their own country, to compete against us here in the United States.

These ideas become solutions which, in turn, become job-creating companies. According to a study by the National Foundation for American Policy, immigrants founded or cofounded almost half of the top 50 venture-backed companies in the United States.

Since our Nation's founding, Mr. Speaker, immigrants have flourished, along with our economy. America becomes a richer and more dynamic society by encouraging the best and the brightest from all over the world to set up shop here on our soil. That is why I'm honored to cosponsor the bipartisan, bicameral Startup Act 2.0 that will help get Americans back to work, and I encourage my colleagues to do the same.

America becomes a richer and more dynamic society by encouraging the best and the brightest from all over the world to come here to our country.

The people I welcomed as new citizens this week do not have time for gridlock in Washington, Mr. Speaker. The American public doesn't have time for gridlock in Washington. We must move forward and find common ground to help the millions of Americans who are working toward their American Dream, to help them get back to work.

#### READ THE BILLS AND COMPARE THE TWO

The SPEAKER pro tempore. The Chair recognizes the gentleman from Texas (Mr. AL GREEN) for 5 minutes.

Mr. AL GREEN of Texas. Mr. Speaker, this message is only for persons who may get sick. If you will never get sick, this message is not for you, N-O-T, not for you. Only for those who will get sick.

Mr. Speaker, I hold in my left hand a copy of the Affordable Care Act. I hold in my right hand the replacement bill that my colleagues across the aisle have been talking about.

This bill has passed the Congress of the United States of America. It is more than 2,000 pages. It was condemned for being too long, which may explain the size of this bill. This bill has within it preventive care. This bill has within it a cap on administrative costs. You must spend 80 to 85 percent of the money that insurance companies collect on health care. This bill protects persons who are under 26 years of age, as they can stay on their parents' insurance. This bill covers persons with preexisting conditions.

I had to read this bill. My constituents insisted that I read this bill before voting on it.

And my constituents want me to read this bill. This is the replacement bill, and they want me to be sure that I understand the replacement bill before I vote to repeal.

So what I'd like to do now, for all within the sound of my voice and who are viewing this, I want to read the replacement bill. I shall read the replacement bill. Let me just read half of it first. I shall now read one-half of the replacement bill. Now, I shall read the other half of the replacement bill.

Now, some of you will say, AL, you read too fast; I didn't pick up all of that. So, for those who listen slowly, or those who may have missed it, I shall now read the replacement bill in its entirety. That's the replacement bill.

Here is the bill that we can read. I'm going to ask that I be allowed to place the replacement bill in the RECORD.

Mr. Speaker, I ask that persons consider the empirical evidence as well as the invisible evidence. When you weigh the empirical evidence against the invisible evidence, you decide whether we should vote to repeal.

Now, there may be some who contend, well, AL, really, I'd just like to go back to the way things were. Let's quickly go back to the way things were. Gladys Knight had a song titled, "The Way We Were."

Here is the way we were in 2009. In 2009, when we were considering replacement, we were spending \$2.5 trillion a year on health care. That's a big number. Hard to get your mind around it. That's \$79,000 a second. It was, at that time, 17.6 percent of the GDP.

We were spending \$100 billion a year on persons who were uninsured. It was projected that by 2018 we'd spend \$4.4 trillion, which would have been 20.3 percent of GDP, which is \$139,000 a second.

In my State of Texas we had 6 million people who were uninsured. In Harris County, where I have my congressional district, we had 1.1 million people who were uninsured. Twenty percent of the State's children were uninsured. Fifty million Americans were uninsured. 45,000 persons per year were dying because of a lack of insurance. That's one person every 12 minutes.

And if you don't like that, call Harvard. I got the statistics from Harvard.

The system was not sustainable. This is why we embarked upon producing this bill.

So I beg that those who insisted that I read this bill before voting, please understand that before you vote, you ought to read this bill and compare the two.

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#### COMMUTER SAVINGS ACT

The SPEAKER pro tempore. The Chair recognizes the gentlewoman from New York (Ms. HAYWORTH) for 5 minutes.

Ms. HAYWORTH. As a frequent rider and former commuter on New York's mass transit system, I know how important public transportation is.

Alone, the New York Metropolitan Transportation Authority, or MTA, transports more than 8.5 million commuters across metropolitan New York every day. In the district I'm privileged to serve—New York's 19th Congressional District—which includes Westchester, Orange, Rockland, Dutchess, and Putnam Counties, the MTA's 31 Metro-North Railroad stations serve 11,000 passengers every weekday.

Our Hudson Valley's mass transit commuters lost part of their recent tax credits for employer-provided mass transit benefits as of January 1 of this year. Commuters utilizing the mass transit portion have seen their credits drop from \$230 per month to \$125 per month, which means that their commuting costs have increased. In contrast, commuters utilizing the driving and parking benefits have seen an automatic increase from \$230 per month to \$240 per month, which is why I introduced the Commuter Savings Act on June 29.

This legislation would extend parity between the mass transit and parking portions of the transportation tax credit, which would increase mass transit benefits from \$125 per month to \$240 per month. Mass transit minimizes traffic congestion, reduces fuel consumption, and limits the wear and tear on our roads and bridges. It's really a great win for all of us even if we don't use mass transit. The Commuter Savings Act will directly help more than 70,000 of our Hudson Valley neighbors, and the bill is retroactive to January 1 of this year, which will provide mass transit commuters with a full 2 years of certainty in their mass transit benefits.

For the tens of thousands of Hudson Valley residents and millions of Americans across the country who rely on safe and affordable public transportation and for all of us who enjoy the benefits of those fellow Americans using mass transit, I urge my colleagues to join me and my fellow primary cosponsors, Representatives PETER KING and BOB DOLD, in giving our mass transit commuters a break in these tough economic times.

JULIE DOYLE

The SPEAKER pro tempore. The Chair recognizes the gentleman from Minnesota (Mr. ELLISON) for 5 minutes.