

As Puerto Rico's representative in Congress, it pains me to read media accounts of the island's troubles, especially because I know that my constituents are just as capable and industrious as their fellow citizens in any other jurisdiction. Puerto Rico has enormous potential, but the reality is that this potential is not being fulfilled.

Although the island's problems have certainly grown worse in recent months, it is critical for policymakers and the American public to understand that these problems are not of recent vintage. To the contrary, for at least four decades, Puerto Rico's economic performance—and by extension, quality of life on the island—has been far worse than any State, according to every indicator, including unemployment, average household income, and the ratio of government debt to economic production.

In other words, Puerto Rico's difficulties have endured in more or less the same form, regardless of who holds power in Washington and San Juan and irrespective of the public policies they formulate.

To be sure, fiscal mismanagement at the local level and insufficient attention at the Federal level have both been factors contributing to Puerto Rico's problems, but the record clearly establishes that they are not the main factor.

What, then, is the principle source of Puerto Rico's longstanding woes?

In a recent editorial, *The Washington Post* correctly identified the culprit, noting that the territory's economic problems are "structural—traceable, ultimately, to its muddled political status." Curiously, *The Post* then asserted that "there will be time enough to debate" the status issue later and that Puerto Rico, for the time being, should concentrate on fixing its finances.

As I observed in a letter to *The Post's* editor, this is like a doctor recommending medicine to alleviate a patient's symptoms but doing nothing to treat the underlying disease.

As long as Puerto Rico remains a territory, deprived of equal treatment under critical Federal spending and tax credit programs, forced to borrow heavily to make up the difference, and lacking the ability to vote for the President and Members of Congress who make our national laws, the island will be in a position merely to manage, rather than surmount, its economic problems. This is the only reasonable conclusion to draw from decades of empirical evidence.

A majority of my constituents understand this, which is why they voted to reject territory status in a referendum held 1 year ago. The Obama administration recognizes this as well, which is why it proposed the first federally sponsored status vote in Puerto Rico's history to resolve the issue once and for all.

And, finally, Members of Congress from both parties comprehend this,

which is why 125 of them have cosponsored legislation I introduced that provides for an up-or-down vote in Puerto Rico on the territory's admission as a state and outlines the steps the Federal Government will take if a majority of voters favor admission.

There are many reasons to oppose Puerto Rico's territory status, which is unequal, undemocratic, and un-American. One of the most important reasons why Puerto Rico must discard this status in favor of either statehood or nationhood is because the current status has failed—and will continue to fail—to provide the island's 3.6 million American citizens with the economic opportunities and the quality of life they deserve.

Those who refuse to acknowledge this fundamental truth for ideological reasons are doing a great disservice to the people of Puerto Rico. They are on the wrong side of history.

OBAMACARE IMPACT ON HOSPITALS

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

Mr. THOMPSON of Pennsylvania. Mr. Speaker, there has been much documented and published about the problems resulting from the Affordable Health Care Act. Millions of Americans are waking up to the cancellation of health insurance policies that they have depended on to meet their families' needs at an affordable price. There are skyrocketing premiums and deductible increases under the pressures of paying for coverage mandates they do not want, cannot afford, or may even have a moral objection to.

One area that has received little attention so far in this debate is what the impact will be on our hospitals, where much of the needed health care is provided by caring and competent professionals.

As a health care professional who served in rural hospitals for nearly 30 years as a therapist and a manager, I am confident that the future of rural and underserved urban hospitals is not good under the pressures and the mandates of ObamaCare.

While some point to tens of millions of Americans who were uninsured and now having some type of coverage—a plus for the bottom lines of hospitals—I would encourage a closer and more thoughtful look.

First, the CBO has estimated that, even after full implementation, there will still be tens of millions of Americans uninsured. Based on current reports from across America, this may include a lot of middle class Americans who find themselves, for the first time, unable to afford what ObamaCare dictated.

For hospitals, that ensures the continuation of bad debt and charity care that hampers their balance sheets. For lower-income individuals now insured

under expanded medical assistance, it is true that hospitals will be paid, but they are going to be paid 40 to 60 cents for every dollar of care that they provide—not exactly a sustainable margin. More accurately, it is a pathway to bankruptcy for hospitals when coupled with the new-found population of uninsured.

Mix this with the cost of compliance that will be rolling out from the Obama administration of the approximately 130 new regulatory agencies founded under the ObamaCare legislation.

Today, the cost of compliance with government mandates, including Medicare billing and HIPAA, account for a significant part of any hospital's overhead expenses. Multiply this by 100 under the yet-to-be-administered mandates and the costs of care will have to dramatically increase just to keep the doors open and the lights on for every hospital.

The human resources cost of providing health care coverage for hospitals, whose number one asset is a qualified and trained employee, will increase as the ObamaCare employer mandate is finally implemented just a year from now.

Finally, consider the fees and taxes imposed on hospitals in 2014, just weeks away.

Earlier this week a hospital CEO from my district reported:

We're going to have to pay close to \$200,000 next year, as will every hospital.

Hospitals will see various new fees, including a \$5,000 levy so the government can do research on the effectiveness of hospitals working within the plan. Additionally, hospitals will pay a \$19,500 health insurer's fee and a \$160,000 transitional reinsurance fee that will go into a pot to protect insurance companies against the risk of winding up with numerous high-risk customers.

These are added costs for the hospitals that Americans rely on for access to health care. I have to wonder what now is so affordable about the Affordable Care Act. Bankrupt hospitals serve no one.

Americans deserve better.

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THE AFFORDABLE CARE ACT AND PREVENTIVE HEALTH

The SPEAKER pro tempore. The Chair recognizes the gentlewoman from Connecticut (Ms. DELAURO) for 5 minutes.

Ms. DELAURO. Mr. Speaker, 27 years ago, I was diagnosed with ovarian cancer. I was lucky. I had excellent doctors who detected the cancer by chance in stage 1. I underwent radiation treatment for 2½ months. Because of the grace of God and biomedical research, I stand here today, and I am fortunate to say that I have been cancer free ever since.

I can tell you for a fact that access to preventive health care saved my life. If

my ovarian cancer had not been diagnosed and caught in stage 1, I might not be here today, but many women are not so lucky as over 15,000 die every year from ovarian cancer. While I survived by that off chance of luck in that diagnosis, no one should have to survive by luck, which is why my Democratic colleagues and I worked hard.

We worked very hard to make sure that prevention and wellness are such a critical part of the Affordable Care Act. Before we passed this transformative piece of legislation, one in five women over age 50 had not had a mammogram in the past 2 years, mostly because she could not afford one. Now mammograms are covered—they are covered for all Americans—with no out-of-pocket costs. So are annual checkups, colonoscopies, diabetes, and other cancer screenings—at no cost. Let me repeat that. They are the beneficiaries of lifesaving treatments.

Preventive care not only helps to keep Americans healthier; it also helps to drive down the cost of health care so that people can get access to the services that they need. Chronic and often preventable diseases, such as heart disease and diabetes, cause seven out of 10 deaths in the United States of America, and they account for 75 percent of our health spending. Preventive care can help Americans avoid these ailments or to catch them before it is too late.

That is what the Affordable Care Act does. That is what the people of this country need to know. There are countless stories, after stories, after stories of people's lives being saved because they have the opportunity to get a treatment or something that says you may be at risk for a particular disease, and you can get that identification not by luck but as a routine checkup. No one in the United States of America should survive by luck. Now we have an opportunity through the Affordable Care Act, which is the law of the land today, to make sure that everyone—man and woman—can get those services.

If you expand access to preventive health, it drives the costs down, but most importantly, it saves lives. Isn't that worth doing, to be able to save someone's life? That is what the Affordable Care Act is all about. It is just one of the many ways that it is good for men, for women, for families in this Nation, and it is good for America to move in this direction.

NONEXISTENT REPUBLICAN BUDGET

The SPEAKER pro tempore. The Chair recognizes the gentlewoman from Ohio (Ms. KAPTUR) for 5 minutes.

Ms. KAPTUR. So, here is a "Jeopardy" question for you, Mr. Speaker:

How many days is the Republican majority now overdue in getting its work done to produce a budget for the Nation for 2014?

Our Nation needs a budget to operate the Government of the United States

for the upcoming year, and by law, April 15 was the deadline by which the budget was to have been completed, but that hasn't happened. Now it is December 4, so that means that their bill is 234 days overdue. In fact, technically, the Federal fiscal year began on October 1. The majority's bill is actually 7 months and 20 days overdue. A parking ticket that old might land you in jail. Not making your car payments for 7 months might likely result in your car's being repossessed, right? The Budget Committee is supposed to finish its one bill by April 15, but it just can't seem to find a way to do it.

Then, if it were to have done that, the Appropriations Committee, which depends on the Budget Committee for a total budget number, could get its work done to produce not just the one but the 12 bills it is mandated to move through to passage to run the Federal departments of the Government of the United States of America—everything from the Forest Service, to the veterans' clinics, to the Social Security Administration, department after department.

The American people are waiting for this House, led by the Republican majority, to get the job done of producing the 2014 budget. America doesn't need any more beauty pictures of committee chairs prancing and posturing in front of cameras. They need to go into the committee rooms and get the work done. The majority is 234 days overdue. Tomorrow, it will be 235 days overdue.

My goodness. There are only 26 days left in this calendar year. Even Santa Claus must be shaking his head in disbelief. Talk about running the ship of state aground. Let the majority produce the budget bill. It is way over time.

Don't hold up our Republic anymore. You are 234 days overdue, and we are all counting.

OUR BROKEN IMMIGRATION SYSTEM

The SPEAKER pro tempore. The Chair recognizes the gentlewoman from Wisconsin (Ms. MOORE) for 5 minutes.

Ms. MOORE. Mr. Speaker, I rise today to implore you and the House majority to reach across the aisle to find common ground, to reach out their hands to fix our broken immigration system.

Last summer, Republicans and Democrats in the Senate came together and passed comprehensive immigration reform with a strong bipartisan vote, a vote of 68–32. That is like a super-duper majority. In fact, one poll last month showed that 63 percent of Americans—two-thirds of Americans—support a path to citizenship for undocumented immigrants. Business leaders, chambers of commerce, labor unions, faith groups, immigrant families, law enforcement officials, and Americans of every race, creed, color, and ethnicity all across our country applauded our Senators for reaching

across the aisle. For many, it really gave hope and a belief in our government that we are still capable of putting aside political posturing and of building consensus around the difficult issues that face our country.

But today, as I speak, Americans are asking: What happened? They are confused as to why the House of Representatives can't do the same thing that the Senate did and pass immigration reform. They are even more confused as to why the House can't even dignify the issue with a simple up-or-down vote.

Those people have not gone away, Mr. Speaker. Oh, no. In fact, today, the call to action is still as loud and clear as it has ever been.

Just yesterday, I visited the Fast for Families movement on The National Mall, where faith leaders had actually been fasting for 22 days—22 days with no food. Some were hospitalized to safely break the fast per the doctor's orders, but others pressed on. Replacement fasters stepped up, including our own Representative KENNEDY, who, in the legacy of his grandfather, Bobby, acknowledged the need to embrace the immigrant issue.

So I ask my colleagues in the majority, my colleagues on the other side of the aisle: What are we waiting for? Our job creators want reform. Our workforce wants it, and our spiritual leaders say it is the right thing to do. Overwhelmingly, so do the American people.

The facts are so clear that reform will tremendously benefit all of our country. In fact, the Congressional Budget Office has followed the money, and it estimates that immigration reform will increase the gross domestic product by \$700 billion in 2023 and by \$1.4 trillion in 2033; but here we are today, facing government shutdowns and sequester levels that eviscerate services that so many vulnerable Americans rely on.

This is where we are stuck. It has been 5 months since the Senate passed its bill; yet we have only 6 days scheduled until the end of the year, and we haven't had one serious vote on immigration reform. Americans have put their differences aside for the common good of our country, and they expect us to do the same thing in this, our beloved democracy.

Once again, I want to reiterate that I stand here, ready to work with my colleagues on the other side of the aisle in order to move our country forward. I applaud my brave colleagues on the other side who have already taken a stand and have put politics aside, and I encourage more of my colleagues to answer that calling and meet us halfway.

The American people are fed up with the status quo and gridlock here in Washington. Let's come together and strengthen our businesses, our economy, our workforce, and our families.