

The apparent reduction in the Medicaid, Medi-Cal for California, support from the Federal Government that will occur over the next 2½ to 3 years will eliminate one of the principal ways in which those clinics have been able to continue to operate and, that is, the expansion of the Medicaid population in California.

It appears that the legislation that is proposed will shrink the Medicaid program across the Nation and severely curtail in California the support available for people who are currently on Medi-Cal. That will be devastating to these clinics in these rural areas.

We have had discussions about this. They say: Watch carefully. If this is what happens, we are going to be out of business. We are going to shut down our doors.

Mr. Speaker, I yield to the gentleman from Virginia.

Mr. SCOTT of Virginia. Mr. Speaker, the clinics will shut down. Insurance companies will stop writing insurance if people can wait until they get sick before they buy insurance. The insurance companies reacted to that system in Washington State by selling nobody any insurance. So we know what is going to happen.

The CBO, when they score this, will point that out, and we will know exactly what the problems are.

Mr. GARAMENDI. Mr. Speaker, I thank the gentleman from Virginia (Mr. SCOTT) for joining us this evening. This is a fundamental part of American life, that is, our health care. It is about 18 percent of the total GDP, gross domestic product. It is extremely important in terms of the total well-being of our society and our economy.

Changes to the Affordable Care Act that are being proposed will have a dramatic effect. And what we do know about it is that there will be a massive shift of wealth from working men, women, and families to the super-wealthy. We know that from the tax proposals that have been made in the analysis of the tax.

We also know that there is a very, very high probability that perhaps 11 million people will lose their insurance coverage, either in the private insurance market through the exchanges or through the Medicaid programs across the Nation. And the effect on the providers, the hospitals, the clinics will be profound.

So when we have something as important as this, it is just wrong. It is wrong for the majority in this House to put this legislation before the committees without a full hearing on what the effect will be. But it appears that tomorrow, Wednesday, we will have the first markup in this process.

What I want—and I think the gentleman from Virginia (Mr. SCOTT) does, too—is for the American public to hear the debate, to understand the implications where we are today with the Affordable Care Act and what it has brought to us in terms of quality and accessibility to health care and what it would mean with the proposed changes.

Mr. Speaker, I yield to the gentleman from Virginia (Mr. SCOTT).

Mr. SCOTT of Virginia. Mr. Speaker, I thank the gentleman from California for organizing the Special Order so that we could actually discuss some of the problems with going forward without a CBO score, without knowing what we are doing. Certainly, it is not an improvement in the Affordable Care Act.

Mr. GARAMENDI. Mr. Speaker, I thank the gentleman from Virginia (Mr. SCOTT) for expressing Virginia's view. From California, it is, whoa, wait a minute, let's be careful.

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

#### TOPICS OF THE DAY

The SPEAKER pro tempore. Under the Speaker's announced policy of January 3, 2017, the gentleman from Iowa (Mr. KING) is recognized for 60 minutes as the designee of the majority leader.

Mr. KING of Iowa. Mr. Speaker, I appreciate the privilege to address you here on the floor of the House of Representatives, and I have a number of topics I would like to bring up this evening.

First, I would comment that I heard the words "Affordable Care Act" multiple times in the previous hour, and it just caught me each time I heard that. Abraham Lincoln would have had a difficult time saying such a thing being Honest Abe, and George Washington probably couldn't have said it at all.

As we know this, it is not affordable care and that is the reason that we have to address it. We knew this was going to happen. Of all the horrible stories we have heard about ObamaCare—this thing they call the Affordable Care Act—many of them were predicted here on the floor of the House of Representatives, Mr. Speaker. I predicted quite a lot of them myself, as did many of the Members who fought against that piece of legislation that was jammed down on us by hook, by crook, by legislative shenanigans.

We could see what was going to happen with this. It was slammed together by trying to circumvent the majorities, by pushing some things through on reconciliation. And we ended up with a piece of legislation that was the biggest bite they could get to create socialized medicine.

The worst part of ObamaCare, Mr. Speaker, was this: That it is an unconstitutional taking of God-given, American liberty. We are—and at least used to be and believe we are to be again—the freest people on the planet; and that our rights come from God; and that government can't take them away.

Many times here on the floor, I have said, Mr. Speaker, that the Federal Government hasn't figured out how to nationalize or take over our soul. That is our business, and we manage that. Our souls are the most sovereign thing that we have and are.

The second most sovereign thing we have and are is our skin and everything inside it. It is our health. It is the management of our health. And if Americans are not capable of managing their own health and making their own health decisions and pressing the marketplace to produce the health insurance policies that they desire, if Americans can't make those decisions, then it would just stand to reason, if that is true—and that is what Democrats seem to think—then there aren't any people on the planet who can manage their own health.

What I am pretty sure of is that if we don't think that regular, red-blooded Americans—especially those who are out there punching the time clock, running their business, starting a business, or working on commission, whatever they might be doing, the salt-of-the-Earth Americans—if they can't manage it, I am really sure that a bunch of leftists who are elected to office out of the inner cities of America aren't going to be able to do it.

□ 2030

And we have seen the success of that, the leftist agenda of ObamaCare, imposed upon America, commanding that we buy policies that are approved by the Federal Government. They would have liked to have established the Federal Government as being the single-payer plan and abolished all insurance whatsoever and simply taken care of everybody's healthcare needs so that one size fits all, and we could drift down into the mediocrity that most the rest of the world has exhibited for a long time.

This all started back in Germany in the latter part of the 19th century, when Otto von Bismarck decided that if he was going to get reelected, he had to make the Germans dependent upon him. And so he devised this plan called socialized medicine and he, more or less, trained the Germans to expect the federal government to make those decisions for them, pick up the costs for them; and, in doing so, that sense of dependency got Bismarck reelected in Germany.

Well, it is not that old a country in Germany, but this idea of Marxism comes right out of there. By the way, there is a bench in Berlin that honors Karl Marx, and a number of other statutes and monuments as well. That is where this came from, and we watched as other countries adopted it.

I once picked up—Mr. Speaker, I had a World War II veteran who came over to an event that I was doing in Hospers, Iowa, and he had gone up to his attic and he brought down these Collier's magazines. They were original Collier's magazines that started right at the end of the Second World War and went on through those years, for 2 or 3 or 4 years, and they were yellow and, of course, they were dated, and he presented them all to me.

He said: I want you to have these. I want you to read down through these

magazines and see what it was like in those days shortly at the end of World War II and in the Reconstruction era afterwards.

So I actually accepted all of those magazines, copied them, and gave him back the originals. I didn't feel right having them in my possession. But I read through them; and there were pictures there of doctors and nurses and healthcare providers in Great Britain that were haggard and tired and worn, and stories about how, because of the socialized medicine they passed in the United Kingdom, they had to see so many patients a day in order to make a living, and they couldn't pay attention to the patients so much as they had to pay attention to their schedule and turn them through quickly through the turnstiles in the healthcare system in Great Britain because health care was rationed in that way.

I have a friend who is a radio talk show host—and, actually, it is WHO Radio, one of Ronald Reagan's original radio programs where Ronald Reagan got his start—who comes originally from Great Britain; proud American. But both of his parents are gone, and both of his parents deaths can be attributed to the failed national healthcare system, socialized medicine that the United Kingdom has. He had told me several years ago: Once socialized medicine is established, you will not be able to undo it.

So, Mr. Speaker, I bring this up this way because this is our last best chance to turn this country in the right direction. It is our last best chance to throw off this mandate of socialized medicine that was established by hook, crook, and legislative shenanigan by the Democrats, and passed through in the final component in this Congress March 23, 2010. That event that took place, as I recall, I believe it was dated March 23, but it actually rolled over past midnight, but the RECORD showed March 23.

I went home that night worn out from days of fighting ObamaCare and doing all that I could do to put an end to it, to kill it off before it did what it has already done to the American people. And I laid down, thinking I would sleep the sleep of the dead, but I woke up in about an hour and a half and I got up and I wrote the repeal of ObamaCare, and it turned out to be the first repeal draft that emerged after ObamaCare had passed.

I certainly wrote it well before Barack Obama had signed the bill, although they hustled it out to him, I think, the next day, and that is when he signed it.

The repeal bill that I have introduced here—and it has passed the floor of this House a number of times; I have lost track of how many times, Mr. Speaker—it is only 40 words. And the last words in that bill are: "As if such act had never been enacted."

That is, Mr. Speaker, what we need to do. We need to send the full, 100 per-

cent, rip-it-out-by-the-roots-as-if-it-had-never-been-enacted repeal out of the House and over to the Senate and set it on MITCH MCCONNELL's desk and let MITCH MCCONNELL figure out—Majority Leader MCCONNELL, Senator MCCONNELL figure out then how to get the votes put together in the United States Senate for a full, 100 percent repeal of ObamaCare.

The House will pass such a bill. It won't be hard to put those votes together. I wouldn't be surprised if there was a Democrat or two that was worried about their seat that would join us in such an endeavor.

Then, once that bill is over through the Rotunda and over on the desk of Senator MCCONNELL, then we should start down through with the individual repairs to the healthcare system that we need to do, that we all know we need to do and that we have talked about for a long time.

Some of these have been out here debated for 10 years in this Congress, Mr. Speaker, and, instead, we have got a different configuration that has been served up to us. But I submit that it is not too late to do it right. Send the full repeal over. That repeal can have an enactment clause of, say, a year from now. That is enough time for people to make their adjustments for their own health insurance and get it taken care of, especially under the provisions that I propose.

I would point out that my ObamaCare—and, yes, we Members of Congress are obligated to own our own ObamaCare policies and pay a substantial portion of the premium. By the way, mine went up when ObamaCare was imposed upon me by not quite \$4,300 a year additional. That was my privilege to own an ObamaCare policy, but we are compelled to own that policy.

For me, I got the letter, dated last September 28, that said, as of December 31, at midnight, my ObamaCare policy was canceled. And it turned out that I would have been without insurance from New Years, from the stroke of midnight, auld lang syne, until whatever time it would take me to get that put together. So we went to work, and there was only one policy that actually qualified under ObamaCare, only one.

Of all the counties in America, roughly a third of the counties there is only one choice available to the American people; compelled by law to buy a policy or be penalized by the Federal Government. And your options are not that you get to keep the policy that you like or that you get to keep the doctor that you like. You don't even get to choose from a menu of what kind of health insurance policy you want.

Instead, for a third of the counties in America, you only have one choice, and that is buy the policy that is the only option that is available to you. So there is no shopping for prices. There is no looking at the kind of options you

might want covered by your health insurance policy.

There is no freedom to go out there in the marketplace, and there is no marketplace that actually exists because the consumers are not making the demands for the kind of policies that they would like. Instead, it is the Federal Government dictating by mandate what the policy shall cover. And when that happens, the premiums go up—which anybody could figure out—and the coverage goes down.

Now we have people that—I would just look back to shortly before the election. The Thursday before the election we had an event south of Des Moines on a farm, and there, soon-to-be Vice President-elect MIKE PENCE arrived, as did Senator TED CRUZ, back to Iowa. I'm grateful to both of those gentlemen and friends.

As I gave my speech, I pointed out that I have seen people's health insurance premiums go from \$8,000 a year to \$10,000 a year. And then as I saw people in the crowd started waving their arm, and I say \$12,000 a year, \$14,000 a year, we had an auction going on, Mr. Speaker, and it came up to \$20,000 a year. Looked to me like these were "Ma and Pa" family farm operations that were facing \$20,000 in health insurance premiums, where not that long ago they would have been looking at 6 or 7 or \$8,000 in health insurance premiums.

That has swept across this country-side. I talked to a gentleman here on the floor tonight whose health insurance premiums were \$24,000. That is just not sustainable. You have to finally decide: I am going to take a risk and go without health insurance with those kind of costs.

That is driven by ObamaCare. It is driven by the mandates in ObamaCare. It is driven by the guaranteed issue, no consideration for preexisting conditions, and it is driven by a mandate such as you stay on your parents' health insurance until you are 26.

It goes on and on and on. OB care, maternity coverage, contraceptive coverage, you can name it, and also, no additional cost for your medical check-ups. All of these things cost money, and they are built into the premium, and every time you add another bell or whistle or accessory to your health insurance policy, the premium goes up and up and up.

When the insurers find out that they are losing money, they start to drop out of the marketplace. They drop out of the marketplace, and when they do, there is less competition.

When there is less competition, prices go up, Mr. Speaker. This is what we have seen happen over the years since the implementation of ObamaCare. It is a calamity. It will sink ObamaCare. If we don't touch it, it will sink and it will be gone. It will implode upon itself. It cannot be sustained. We know that on this side of the aisle from about here on over. They know it intuitively over on this side of the aisle from about there on over. But

the difficulty is that politically they have embraced ObamaCare and they have decided they are going to hold onto it and protect it.

Why?

I think part of it is they want to hold on and protect the legacy of President Obama, who, if all had gone well, would have ridden off into the sunset. He doesn't seem to be doing that, Mr. Speaker.

But now we are at this place where we have the votes in the House to do a full, 100 percent repeal of ObamaCare, and that is what we should do.

Tomorrow, I understand that the gentleman from Ohio, and perhaps others, will introduce legislation that will be described as a full repeal of ObamaCare. I wish it were so, but it is designed to fit within the reconciliation standards. It is a legislation that once made it to President Obama's desk and received a veto. This time, presumably, it could go to President Trump's desk and receive a signature. That is good. I favor that as an improvement in the right direction. But the full right thing we need to do is the 100 percent repeal.

We shouldn't be sustaining any kind of mandate whatsoever. Let the States determine what the mandates might be, but don't let them lock people into their States and refuse to let them buy health insurance from outside of those State lines. And it looks to me that the bill, as introduced by leadership, doesn't really allow for the facilitation of buying insurance across State lines.

So here is what I suggest we do, Mr. Speaker. Send the full, 100 percent repeal over to the Senate. Pick up the bill that was a repeal just about a year ago, send it over to the Senate, too. Then, what we have is MITCH MCCONNELL can choose from the menu on what he can get done, but the pressure for the full repeal will build if the House sends it to the Senate, and the odds of the full repeal get greater and greater.

Then the House, doing its job—and we are not obligated to negotiate a deal out of the House and the Senate and the White House. It is the judgment of the House that needs to be reflected here in this Chamber.

This most deliberative body that we have, the voice for the American people, we should never be trapped into thinking that we can't pass anything out of the House if we don't first have a handshake with the President and the majority in the Senate. That has handcuffed us for the last 8 or more years.

The strategic thinking has been that we don't even try to move anything out of the House unless we know they can take it up in the Senate and unless we know that we can get a signature from the President, because anything else is a waste of time.

Well, it is not necessarily a waste of time, Mr. Speaker, not necessary at all. In fact, we need to send out of here our highest aspirations. So I say this:

send the full repeal over to the Senate, and then pick up the repairs, the replacements, and the reform, those things that we know we need to do, and they can stand alone with or without the full repeal of ObamaCare.

For example, we need to send PAUL GOSAR's bill that repeals components of the McCarran-Ferguson Act that allows for insurance to be bought and sold across State lines. PAUL GOSAR has done a lot of work on that bill, and his predecessor out of Arizona, John Shadegg, pushed that bill for about 16 years here in the House of Representatives. In his last week or so here in the House, he said: I have one regret, and that regret is I should have pushed harder for the repeal of McCarran-Ferguson so that we could be selling and buying insurance across State lines.

□ 2045

He should have pushed harder. I recall John Shadegg pushing very hard on that, and he just couldn't get it there. We all couldn't get it there. Now PAUL GOSAR has that bill out of the Judiciary Committee. We passed it out a week and a half ago, and it is hanging on the calendar now, and it should come to this floor. The votes would be here to pass PAUL GOSAR's repeal of McCarran-Ferguson, and we should send that over to the Senate. Passing that piece of legislation would enable insurance to be sold across State lines, and that would set the competition up between the 50 States.

I recall the debate here on the floor of the House in 2009 and 2010 when the data came out that a typical young man in New Jersey at the time, a healthy 23-year-old, would pay an average of about \$6,000 for his health insurance premium for the year—\$500 a month, \$6,000. A similarly situated healthy young man in Kentucky would be paying \$1,000 a year.

Now, what is the difference between those two States?

The cost of providing that care and the far fewer mandates in the State of Kentucky and a lot of mandates in the State of New Jersey.

So why wouldn't we let a young man in New Jersey buy a health insurance policy in Kentucky? What are the odds that he is going to be insured if he can get a policy for \$1,000 as opposed to \$6,000?

We know that far more Americans would be insured if they had the options and didn't have to buy all the bells and whistles. He probably doesn't need maternity. He probably doesn't need contraceptive. Maybe he is not too concerned about the preexisting condition component of this. If he is 23 years old and on his own, he is not worried about a 26-year slacker mandate. So that is the comparison of what could happen if we passed GOSAR's bill and repealed McCarran-Ferguson and allowed people to purchase insurance across State lines. That should be number one.

Number two would be full deductibility of everyone's health insurance

premiums. Today there is something like 160 million Americans that get their health insurance from their employer. When the employer sets up a group plan as a rule and they negotiate those premiums, whatever that premium might be, let's just say it is \$10,000 a year per employee, they lay that \$10,000 on the barrel head, pay that insurance premium, and that goes into the books as a business expense, and it shows up on the schedule C as a health insurance premium.

But if you are a sole proprietor, if you are a partnership, if you are a man-and-pa operation and you have one part-time employee, that makes you an employer. If you are an employer, you can deduct the premiums to your employees, but you can't deduct your own premium.

There are 20.9 million Americans similarly situated in that scenario, Mr. Speaker, where that 20.9 million Americans are compelled under ObamaCare to pay for health insurance premiums and meeting those standards, and maybe they have only got one choice like one-third of America's counties; maybe they only have two choices like another third of America's counties; or maybe they have more than two choices like the other third. But at least 1,022 counties in America have only choice: buy the insurance policy—that is your only choice—or be in violation of the law and be fined and be punished, but do it with after-tax dollars instead of before-tax dollars. That is the burden that they are carrying right now.

Mr. Speaker, 20.9 million Americans are disenfranchised in that way. Yet they would be employers and they would be in the effort of trying to provide health insurance for themselves, trying to start up a business perhaps with maybe one part-time employee, with now this big disadvantage that they don't get to deduct their health insurance premiums.

Maybe they are that couple that is \$20,000 or even \$24,000 for a premium after-tax dollars, and by the time the Federal Government steps in and taxes the first, say, 36 percent, and the State steps in and taxes another 9 percent, now we are at 45. You can add a few more various and sundry taxes in there, but a round number is half. So your \$20,000 premium takes \$40,000 of earnings in order to break even with that premium. But the employer gets to write off the \$20,000 as a business expense, so they have that advantage, and you are seeking to compete with an established larger employer. This is wrong. So the second bill we should pass out of this House is the full deductibility of everybody's health insurance premiums.

The McCarran-Ferguson repeal under PAUL GOSAR, then the full deductibility of everybody's health insurance premiums—oh, that is the King bill, by the way, Mr. Speaker, and I am hopeful that that can be passed through and become law. It is a superior approach to providing refundable tax credits.

We need to learn some things. For example, when we hear tax credits, it really means in this discussion refundable tax credits.

What is a refundable tax credit?

That is when the Federal Government sends you money whether you have a tax liability or not. So that would be that if—and the range in this proposal that emerged yesterday is between \$2,000, \$4,000, up to \$14,000 in refundable tax credits to help people pay for their insurance premiums.

Well, that makes me feel good, the idea of trying to help people that can't afford it, but in the process of doing that, we are also helping a lot of people that can afford it. Nonetheless, when you are paying people's health insurance premium, that becomes an entitlement. If everybody is entitled to having a health insurance policy, and if you don't have the money to do so—and I think they use the standard of \$75,000 or less—then the Federal Government will subsidize your policy and conceivably buy your policy. Now we have another new entitlement that grows the Federal Government, raises taxes, and spends hundreds of billions of dollars because we don't want to say no to people. They had a policy handed to them by ObamaCare, which the taxpayers cannot afford.

We have \$20 trillion in national debt right now, Mr. Speaker, and we have a debt ceiling crisis coming at us within just a matter of days or, at a maximum, weeks. This Federal Government needs to get a handle on its spending and it needs to get back to balance. We will never get there if we keep growing entitlements here on the floor of the House of Representatives.

So that is two items that need to be brought through. The first is the full repeal. Item number one, the repeal of the McCarran-Ferguson Act, sell insurance across State lines. Item number two, pass the King bill for full deductibility of everybody's health insurance premiums so that everybody paying for health insurance is on the same standard as employers are.

Then the third thing is the medical malpractice reform, and that is the tort reform legislation that passed out of the Judiciary Committee on the same day with PAUL GOSAR's bill, Mr. Speaker. That legislation puts a cap on medical malpractice settlements of \$250,000 in noneconomic damages—a lot of us would call that pain and suffering—and pay for pain and suffering. That is a component of it, but it is not the whole picture. So we adopt language that is actually borrowed from California which passed this medical malpractice reform 40 years ago and capped it at \$250,000.

By the way, that is still the law in California today. The individual that signed it into law, his name is—at that time he was the Governor of California, Mr. Speaker. Maybe people don't remember who the Governor of California was 40 years ago: Jerry Brown. The Governor of California today: Jerry Brown.

Is there an effort to repeal the tort reform legislation that has been part of California's law for 40 years? No.

In fact, Texas has borrowed from those ideas and implemented that into law, and they are finding that they have got doctors and medical practitioners moving to Texas now because they are not subjected to the outrageous medical malpractice claims that they have been in multiple States across the country.

So this tort reform legislation that just passed out of the Judiciary Committee a week and a half or so ago is another prime piece of legislation that should come to the floor for debate and vote, and I am confident it would pass the House and send it over to the Senate, and then give MITCH MCCONNELL some tools to work with.

That is not the end of it, Mr. Speaker. I know that under the legislation that has been proposed by leadership and just rolled out yesterday, they expand health savings accounts. I think they nearly doubled them, as I understand, \$6,000-some for an individual, maybe \$12,000-some for a couple. That is close, but I know that it is not precise, Mr. Speaker.

I agree that we need to expand health savings accounts. I think we need to expand them more. My legislation expands them to \$10,000 for the individual; \$20,000 for the couple. But health savings accounts need to be expanded, and they need to be expanded so that people can use them and manage them. They can put money in tax free, take money out to pay their premiums, take money out to pay their healthcare costs, and grow the health savings account so that when it grows to a point where it becomes \$50,000, \$100,000, \$400,000, \$500,000, double that by the time of retirement or more. With that kind of money sitting in a health savings account, then there will be people that will negotiate a health insurance policy, but as a catastrophic policy. They will conclude that they want a policy that has got a high deductible, a fairly high copayment, and that they will take care of their own incidental healthcare costs out of pocket and try to grow their health savings account.

In the process of doing that, if you have got the capital in your HSA, then you can negotiate the premium or your monthly health insurance premium down by negotiating for a catastrophic plan, taking care of the incidental costs yourself out of your health savings account. To some degree, you become your own insured for the lower dollar items while you still have catastrophic insurance for the big things.

We have done the numbers on this. Even when it was down to the cap in 2003 that rolled out of here that was capped, the HSAs were capped at \$5,150 for a couple. We did the math on that. If a couple started out at, say, age 20, worked for 45 years, round numbers, worked out to be age 65, Medicare eligibility, then they would conceivably be

sitting there with \$950,000 in their health savings account. I have well over doubled this. In fact, take it up to \$10,000, \$20,000 for a couple where 5,150 was the opening bid in 2003. So we are not quite four times that amount, yet healthcare costs have gone up. So I am not proposing that we end up with \$4 million in the account, but maybe some number that is 2.5 or so million.

Arriving at Medicare eligibility with six—well, seven figures times some number in their health savings account leaves these couples in a position where they could go out on the open market and purchase a paid-up Medicare replacement policy for life, pay for that up front, and then the Federal Government wants to tax anything that comes out of the health savings account as ordinary income. But my answer to that is no, don't do that. If they will take themselves off the entitlement roll by buying a Medicare replacement policy, then let them keep the change tax-free.

Now this becomes a life management account. Not only is it a health savings account, it is a pension plan, and it is incentive to manage your health insurance premiums and your healthcare costs to get your checkups, to get your tests, to watch your weight, get your exercise, and manage your life because you are going to have a nest egg at the end of your working life that you want to be able to spend doing enjoyable things. If your health is a bad experience, then you have got the money there to cover it to make sure that you are taken care of.

This is where we need to get people in this country. We are just awfully short of people willing to think outside the box and to think about what we should do here in America. We are not just some regular, ordinary, humdrum, run-of-the-mill country, Mr. Speaker. We are the United States of America. We are the unchallenged greatest nation in the world. We didn't become this way because we are dependent upon government. We became this way because we have a robust appetite for freedom. People have gone out and blazed their own trails. In a lot of cases, settling this country, they literally did that, blazed a trail through the timber and went out and settled the West.

When our original Founding Fathers arrived here on our shores, they arrived in a land that had, as far as they knew, unlimited natural resources. They had unlimited freedom because they were a long ways away from King George. They came for their religious freedom as well. They were farmers, they were shopkeepers, they were individual entrepreneurs with a dream, and they forged the American Dream. They did it on religious faith, on free enterprise capitalism, and on God-given liberty. That created this robust country in this giant petri dish that was the only huge experiment that the world has ever seen: a nation that is formed on ideas and ideals.

Here we are, the descendants, the recipients, the beneficiaries of their risk and of their dream, beneficiaries of their ideals. All we have to do is preserve them. Our Founding Fathers had to hammer them out.

□ 2100

They had to conceive of these ideas about God-given rights, and then they had to articulate it. They had to write these ideas over and over again in many different configurations so that the populace began to understand what it really meant when you have rights that come from God. Then they had to sell this to the colonists. And then they had to defy King George and fight for that freedom.

All of that took place with the desks that were there and those who gave their lives for our freedom and our liberty. And what is our job, Mr. Speaker? Hang on to it, maintain it. Now, in this case, with ObamaCare, we have got to restore it. That is what we are faced with.

In my view, it is not that hard, if we just come together here and do that which we know is right, send the full repeal of ObamaCare across the rotunda to the Senate, pass PAUL GOSAR's bill selling insurance across State lines, the repeal of McCarran-Ferguson, make our health insurance premiums fully deductible, and expand our health savings accounts. Do those things and pass the tort reform legislation which will diminish the mal-practice premiums that our doctors and practitioners are paying. If we do that much and eliminate the mandates that tie us down in such a way that we don't have the latitude to work any longer, we don't need a mandate that requires every insurance policy to keep your kids on until age 26. There are a lot of other ways to manage that. If you as a family want to buy such a policy, the insurance companies will provide it. You don't need to have the law.

The preexisting condition component of this, yes, we have compassion for people who are uninsurable. In fact, 37 of the States, by my recollection, had policies before ObamaCare, Iowa included—and I helped manage that as former chairman of the Iowa Senate State Government Committee—37 States, by my recollection, had established high-risk pools.

These high-risk pools used tax dollars to buy the premium down so that those who had preexisting conditions and could not be insured could have their health insurance premiums subsidized by the taxpayers.

Now, some States are more generous than others. That is how it will be. But it is a far better solution than the Federal Government being involved in pre-existing conditions just because they think that is the right political answer, Mr. Speaker.

We will see how this unfolds as the days and few short weeks come forward here. I am hopeful that we will be able to get together in conference and the

Republicans can hammer out a solution that can be signed off on by, hopefully, all of us.

I am hopeful there will be some Democrats that understand you don't want to go back home again and tell your constituents that you fought to defend ObamaCare, this thing that my colleagues, scores of times—in fact, thousands of times here on the floor—called the Affordable Care Act. We know, Mr. Speaker, it is not affordable and that the premiums are way out of sight; the coverage can't be used, in many cases, because the deductibles are too high for most people; and that the insurance companies are bailing out one after another. And perhaps a year from now, if we don't do something, there will be great chunks of the American people who will have no options whatsoever.

So I suggest we do this the prudent way: do the full repeal and send single components of the reform rifle shot out of the House over to the Senate. Let the Senate take them up. Or, if they think it is prudent, package them up and send them back to us as a package. If the House has once passed it, and it comes back to us in a package, I think we will pass it again, Mr. Speaker.

So these are intense times, and America's destiny is being determined. It is being determined because we have elected Donald Trump as President of the United States.

I think about what it would have been like if I had woken up on the morning of November 9 and we had someone other than Donald Trump elected to be President, and how the optimism that just poured forth since that day has been terrific.

You can recognize, right after the election, that people had a spring in their step, and they are more optimistic and more outgoing. If you would walk into the grocery store, people would come over and start a conversation. If you walked into a restaurant, they would do the same thing.

They were just more outgoing and more friendly and they wanted to engage with each other. They still want to engage with each other. The stock market has soared up over 21,000, and there has been over \$3 trillion in wealth created just in the stock market alone, Mr. Speaker.

So this high level of optimism that we have brings with it a high level of responsibility. It is not only to the ObamaCare change, but the pledge that was made by Donald Trump many times throughout the campaign was a full, 100 percent repeal of ObamaCare. I always say 100 percent repeal will rip it out by the roots as if it had never been enacted. The language is a little different, but the meaning is identical. The meaning is identical, Mr. Speaker: a full repeal of ObamaCare.

President Trump has said many times we need to be able to sell and buy insurance across State lines. That is another Trump promise. Of course, he has got people he is working with.

TOM PRICE is head of HHS. He is a good man whom I first met here on the floor of the House of Representatives when he came in as a freshman a number of years ago. I watched as he paid attention to the healthcare issues then. And the constitutional issues, I might add. My first encounter with TOM PRICE was on constitutional issues, and it was a positive one.

So we are at this place with a new President that has, halfway into his first 100 days, a number of campaign promises that he has yet to live up to, but a great many that he has lived up to. It looks to me like Donald Trump has at least somebody in an office somewhere in the White House that has a list of all the campaign promises, and they are checking those off one by one as he accomplishes the promises that he has made as a candidate.

That is a laudable thing, Mr. Speaker. Yet, he is being bogged down by a series of stories that have, to some degree—I don't want to quite say handcuffed his administration—but it has made it difficult to operate in a flexible and a fluid way.

This has to do with, I think, it is leakers within; people who should be loyal to the United States and, hopefully, loyal to the President of the United States, who have been leaking information out.

When The New York Times is publishing that they have got inside information that has been leaked to them from the intelligence community, nobody seems to be troubled that The New York Times is going to people in the intelligence community or receiving messages from them and taking information that is about classified activities of our Federal Government and printing the stories about that classified information in their paper.

It is not only The New York Times. I see Heat Street here, The Guardian, The Washington Post. That all comes to mind. McClatchy.

Here is a series of things that have taken place that bring into question the integrity of some people that work within government and some of them that work within our intelligence community. Here are just a string of events, Mr. Speaker, that bring us to a conclusion about what is going on in our Federal Government.

It was in the summer that Heat Street reported that the FBI applied—in June it is reported—applied for a FISA warrant wiretap to survey people in the Trump campaign who had ties to Russia. Roughly late June, this report came out. FISA is the Foreign Intelligence Surveillance Act. Special warrants have to be achieved in a FISA court. These warrant requests are classified. The activity around them are classified. So, if it is classified, how is it that Heat Street reported that the FBI applied for FISA warrants to wiretap people in the Trump campaign last June?

Well, that is because classified leakage went into the ears of the Heat

Street reporters, or I suppose we could say they made it up. And if it were the only story out there, that might be the most likely, but we have a number of other stories.

The *Guardian* reported that a FISA warrant request was made to monitor four Trump campaign staffers for conflicts or for communications with Russia and Russians. That story in *The Guardian* matches up with the story in *Heat Street* roughly last June that there was a FISA warrant request to monitor four of Trump's campaign staffers for their communications with Russia.

So there is story number one and two. *Heat Street* writes one; *The Guardian* writes another. Both of them are writing about what, if we had the real information in front of us, would be classified: the application for FISA and the results of that.

The report comes back and says those applications were denied. They were not based upon a reasonable suspicion that there was, I will say, collusion with Russians.

So here is item number three. *McClatchy* reported that the FBI and five other agencies were investigating Russian influence on the U.S. Presidential election. So we have two stories—one from *Heat Street*, one from *The Guardian*—that says that there was an application for a FISA warrant. That FISA warrant was presumably turned down, by reports, but then there is a report that there is the FBI and five other agencies that are investigating the Russian influence on the U.S. Presidential election. That is a *McClatchy* report.

Now, this is starting to add up. I am starting to see here is a sign there is something going on and there is a leakage of classified information—a sign something is going on and leakage of classified information. Then, the report of the investigation of the FBI and five other agencies.

Now, here is the next story. The *New York Times* reports that the FBI is investigating Russian Government communications with Trump campaign, but there is no evidence of those communications resulting in any kind of collusion, at least. That is a *New York Times* report.

So these stories have been dropped in: *Heat Street*, *McClatchy*, *The New York Times*.

Here is another *New York Times* report. The Obama administration allowed the NSA to share globally intercepted personal communications with 16 other Federal agencies without a warrant. That, I believe, refers to a January directive that came from Barack Obama that opened up the ability to communicate between the intelligence agencies so that they could share classified information among them, rather than compartmentalize and share that information on a need-to-know basis. That is item number five.

Item number six, the Obama administration officials tried to spread infor-

mation to media showing Russian involvement to help Trump and his election. That is a story that was pushed out and perpetuated. It was pushed out by, of course, the Hillary campaign and others.

So the weight of this cumulative effect of these stories is adding up.

I would add, also, that on October 31 of last year, just a little over a week before the election, Hillary Clinton sent out a tweet that said—I am trying to remember the words that she used—it was communication specialists or intelligence officials. It was a reference to experts in communications and computers and that they had identified that there were investigations going on and there were communications between the Russians and the Trump campaign.

It looked to me like that was an effort on the part of the Clinton campaign to spread these rumors that had been planted all the way along throughout the summer by *Heat Street*'s report that there was a FISA wiretap warrant that was turned down, and by *The Guardian*'s report of presumably the same event of a FISA warrant turned down because they didn't show that there was any activity there that was worthy of a warrant; the *McClatchy* report that said the FBI and other agencies are investigating Russian influence. Then you have got the two *Times*' reports.

Here is the third *New York Times* report. They reported that General Flynn talked to Russian officials about how Trump would handle Russian sanctions. This is presumably from a wiretap of the Russian Ambassador to the United States, Mr. Speaker.

Now, if that surveillance is taking place of a Russian official, a Russian Ambassador in the United States, if those activities are typical surveillance activities that would go on in most any country that had the capability, then that information is still classified. And if the conversation took place between General Flynn and the Russian Ambassador—and we all, I think, believe that it did—that conversation and the contents of it would be classified.

So how did this leakage come out to *The New York Times* about the phone call or calls that General Flynn may have had with the Russian Ambassador?

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The leakage of that information would be a Federal felony because it is classified information, facing 10 years in a Federal penitentiary as a penalty. Yet America is hyperventilating about a tweet that Donald Trump sent out that said that Trump and Trump Tower had been hacked or wiretapped by the Obama administration. I know he said President Obama. He put the responsibility on President Obama. It is pretty easy to conclude he may have also just meant the Obama administration.

Do we think that this wiretapping is taking place?

I think so. I think the evidence, at least, of the telephone conversation between General Flynn and the Russian Ambassador is pretty strong. Since it has not been denied by General Flynn or by Vice President PENCE, I am going to assert here in this CONGRESSIONAL RECORD that that took place, that it was surveilled, and that the information in the exchange, which they claim there is a transcript of the conversation, was leaked out to the press. The press didn't release the specific language that had been used but wrote the general narrative about it in much the same way that a Member of Congress might if they walked into a classified briefing, listen to the briefing, and come back and talk about their general understanding of what they saw in there rather than the specific language that was used and uttered.

I submit, Mr. Speaker, that we have at least one Federal felony that has taken place, that it likely is because of leak or leaks that came from the intelligence community. It is pretty clear that President Obama granted the authority—I don't know if I can quite say ordered—granted the authority that all of our intelligence community, all 17 of them, could exchange classified information freely, and that vastly multiplied the number of people who had access to this information and dramatically increased the odds that there would be leakage about these communications that appear to be surveillance of—perhaps it looks like the Trump team, at least people who were on the Trump team, the Trump campaign perhaps, and that there was an effort that goes back as far as last June.

This team of the FBI and the five other intelligence organizations, agencies that are there, did they form that team in June?

It looks likely.

Did they get any real information due to lack of a FISA warrant from that point on?

We don't know, but we have got a pretty good idea that there was a FISA warrant that was approved in October and that information came out of that and maybe other sources that was leaked for the purpose of hurting this Presidency and hurting the effectiveness of then-President-elect Trump and now President Trump.

I submit that President Trump should purge from the executive branch all of the political appointees for whom there is any question about their loyalty. Any of those whose loyalty is beholden to Barack Obama, any of those who can't embrace a conservative government that is bringing us back to constitutional principles, they should all be gone. And those civil servants whose jobs are protected, there have been a good number of Obama people who have burrowed themselves into civil service jobs in order to handcuff President Trump. I say for them, when you can identify them, get a room somewhere, put them in it, pay them

their wages. They will get tired of their job over time, but the damage they will do if you let them have a desk will be far greater than what we get out of them for the paycheck we are giving them. I say purge as many as possible, Mr. President. Put those people in place who are loyal to you, who want to carry out your agenda.

Here is another news report. The Washington Post reports that U.S. investigators examined Jeff Sessions' contacts with Russian officials while he was a campaign adviser to Trump. This report from The Washington Post says that U.S. investigators examined Jeff Sessions' contacts with Russia. So he was under surveillance. He was at least under investigation, it sounds like, if this story is right. Here we have a seated United States Senator, a stellar individual.

If I were going to try to compare the character that I know Jeff Sessions is, and I look around this town, I ask: Who matches the character of Jeff Sessions?

Not many. I would say Vice President PENCE, and then the list gets pretty short after that. Jeff Sessions has a very high degree of character, and he is imminently a constitutionalist, an adherent to the rule of law, a dedicated patriot, and one who makes his decisions within the bounds of the Constitution, of the law, of the rules that exist. He is a great respecter of the order of a civilized society and a terrific Attorney General.

There was no better choice that could have been reached by Donald Trump than Jeff Sessions. But here he is, subject to this kind of—at least a report that there is an investigation, Mr. Speaker. I think if I wanted to know about Jeff Sessions' activities, if I thought that it was my business, I would just ask him. When he answered the question from Senator FRANKEN, the question was in the context of did you have any discussions with Russians with regard to any campaign activities that you might have cooperated or colluded with?

If AL FRANKEN had asked that question precisely, then the answer would have been precise as well.

I can understand why Jeff Sessions' answer came back no, that he hadn't dealt with the Russians. I do a lot of meetings, and if I am asked a question about the context of a subject matter, I will answer within the context of that subject matter. I think that is what Jeff Sessions did. Most of the Senators—I will say all of the Senators sitting there on that committee who heard those questions asked and saw the answers of Jeff Sessions, and then they and their staff and the public, weeks went by, not a peep about anybody being concerned about the answer that Jeff Sessions gave.

Why?

Because all of those Senators sitting on that committee listening to his testimony and the other Senators who were watching that testimony either from in the room or around the Hill on

C-SPAN, and their staff who were monitoring those hearings all understood that you have people from multiple countries come into your office on an irregular basis, and in a matter of months one might meet with the Greeks, the Russians, the French, the Germans, pick your country in South America or Asia. There is a constant flow of people coming through my office, and I know there is a constant flow of people from other countries coming through the offices of probably every United States Senator.

So when Jeff Sessions said that he hadn't met with the Russians within the context of discussing the campaign, which was the heart of the question asked by Senator FRANKEN, no Senator was concerned about his answer that he hadn't met with the Russians because they understood the context within which he was answering that question. Had that not been the case, some Senator, like CHUCK SCHUMER, would have woken up the first day instead of after they were able to gin it up and turn it into a media story, Mr. Speaker.

We have a country to save. We have an ObamaCare to repeal. We have a healthcare policy in this country that needs to be rebuilt logically by preserving our doctor-patient relationship, encouraging competition between insurance companies, letting people be in charge of the policy they want to buy, providing full deductibility, fixing the lawsuit abuse, being able to sell insurance across State lines and expand health savings accounts. All that needs to happen. I am hopeful that it can happen within the next couple of months, Mr. Speaker.

While that is going on, we need to look over at the White House and encourage this President: Purge those people from your midst who owe their loyalty to Barack Obama. They are undermining your Presidency. You have to fight the moles from within, the media from without, the George Soros-organized protesters who are on the streets of America every weekend with a different cause. They will continue this until the public gets tired of it.

Mr. Speaker, the President needs to understand that he has a lot of enemies in this country and a great big job. His ability to take on the mainstream media has been demonstrated. Now it is a little bigger hurdle that needs to happen, too. The intelligence community from within, there are a lot of good, dedicated patriots there. They need to purge those people from their midst as well who are not loyal to the United States of America and those who are working against the foreign policy agenda of this President.

We need to rebuild America. We need to make America great again. We need to restore our economy. We need to get our tax cuts done. We need to get some more regulatory reform. Let's have this robust, growing economy kicked off and see that 3, 3½, 4 percent growth that this country can do with the free-

dom that has been delivered to it, much of it by the pen of our new President, Donald Trump.

I am optimistic about our future, although we have our challenges in front of us, Mr. Speaker, and I urge that my colleagues step up to this task, keep it constitutional, keep it free market. Remember the individual freedom, the God-given liberty, and the legacy that we are leaving for succeeding generations. Let's get this job done and make America great again.

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

#### CONCERN OF THE DAY

The SPEAKER pro tempore (Mr. BACON). Under the Speaker's announced policy of January 3, 2017, the Chair recognizes the gentlewoman from Texas (Ms. JACKSON LEE) for 17 minutes.

Ms. JACKSON LEE. Mr. Speaker, thank you for your courtesies.

Mr. Speaker, there are a number of topics that I choose to debate this evening, but before I do that, I would like to first raise a very important concern. I will soon draft a letter that my colleagues will join in signing to the President of the United States on the extensive crisis of starvation in Somalia and South Sudan.

Just recently, we met with leadership—with my colleague KAREN BASS and a number of other colleagues—of South Sudan speaking about the extensive starvation in sub-Saharan Africa.

I am looking forward to a response from this White House upon receipt of the letter that they will engage with the world community on providing immediate food aid and other resources to the people of sub-Saharan Africa, particularly Somalia and South Sudan.

It is something that I am well aware of because my colleague, the late Mickey Leland, Congressman from the 18th Congressional District in 1989, and years before that as the co-chair of the Select Committee on Hunger, was very concerned about starvation in that very same area because of the drought and terrible climatic conditions, huge loss of life. Congressman Leland was constantly responding with his own personal sacrifice of taking food over to that area as well as seeking to encourage others in the world family, United Nations to do so. In 1989, he, in actuality, lost his life in a plane crash in Ethiopia delivering resources to those individuals caught in a terrible condition, a valley, a desert-like atmosphere attempting to save their lives or to bring grain in. I know full well that his spirit reigns as he might have been engaged in this if he were alive in 2017 to see this terrible disaster occurring right in front of us.

We need the United States to be very active in the world community. The U.N. Secretary-General has now pronounced this to be a horrific disaster needing the attention of world leaders and the world community. I want to