

Instead, we have to rely on the reconciliation process in order to bypass Democratic obstructionism in the Senate, and this only allows us to repeal parts of ObamaCare and enact only parts of a replacement. Finishing the job will require administrative actions and followup legislation in the Senate, both somewhat speculative enterprises. So we need to ask if this bill alone is enough to produce a better healthcare system for the vast majority of people.

Its biggest defects are its failure to restore to consumers the failure to shop across State lines and to fully free consumers from having to purchase coverage they don't need and don't want. I am afraid in States that have insurance commissioners who refuse to approve innovative replacement plans, consumers will be stuck in a market still governed by ObamaCare mandates. This will require followup measures.

Critics cite the Congressional Budget Office estimate that 24 million Americans will lose their coverage, but this conclusion is largely based on the premise that unless people are forced to buy health insurance they won't. In fact, people won't buy health insurance that is not a good value for them; and, clearly, they believe ObamaCare isn't.

We envision a vigorous buyer's market where plans across the country compete to offer consumers better services at lower costs, tailored to their own needs and wants. This is the AHCA's biggest achievement: replacing coercion with choice for every American.

It ends the individual mandate that forces Americans to buy products they don't want. It ends the employer mandate that has trapped many low-income workers in part-time jobs.

It begins to restore consumers' freedom of choice, the best guarantee of quality and value in any market.

It allows Americans to meet more of their healthcare needs with pretax dollars.

It relieves the premium base of the enormous cost of preexisting conditions by moving them to a block-granted, assigned risk pool.

In making this transition, though, it is important to leave no one in the lurch, and that is where we need to heed the CBO's warning. The fact that many low-income families could no longer afford basic health care is what produced ObamaCare in the first place.

Now, when fully implemented, our reforms will correct the government mandates that trapped people in restricted markets that forced health care out of reach. But until then, the CBO warns that a 64-year-old, for example, earning \$26,500 will see her out-of-pocket health costs balloon from \$1,700 to \$14,600 per year. This is neither morally defensible nor politically sustainable.

The Budget Committee adopted my motion, on a bipartisan vote, to ask the House to correct this inequity by adjusting the tax credits to assure that health plans are within the financial

reach of every family. I want to thank the leadership for responding to this motion by creating architecture in the bill to shift an additional \$75 billion for this purpose.

As our pro-growth economic reforms cause incomes to rise and our healthcare reforms bring healthcare costs down, families will be earning more and will be paying less of what they earn for their health care, and reliance on these tax credits will recede.

But we need a bridge from the present to the future, and we simply can't get there without addressing the bill's initial impact on older, low-income Americans.

It is also important that we assure stability in the Medicaid system as we transition to flexible, State-run programs that correct the inequities of ObamaCare that have pushed the elderly, blind, and disabled to the back of the Medicaid line. This bill does so.

I wish it did everything necessary to restore an optimal health insurance market, but it moves us toward that goal. And even as a stand-alone measure, I am confident that it will ultimately create a market in most States that will produce better services, greater choices, and lower costs for the vast majority of Americans.

THE AFFORDABLE CARE ACT HAS IMPROVED AMERICAN LIVES

The SPEAKER pro tempore. The Chair recognizes the gentleman from New York (Mr. JEFFRIES) for 5 minutes.

Mr. JEFFRIES. Mr. Speaker, this is a monumental week here on Capitol Hill as we will decide the fate of health care in America.

Despite the evidence that the Affordable Care Act has made a positive difference in the lives of everyday Americans, Republicans are set to destroy it. But the Affordable Care Act has improved the quality of life for tens of millions of people all across this country.

As a result of the Affordable Care Act, people born with preexisting conditions can no longer be denied health insurance.

As a result of the Affordable Care Act, young people can remain on their parents' health insurance all the way through to the age of 26.

As a result of the Affordable Care Act, women can no longer be discriminated against with respect to the issuance of insurance simply based on their gender.

As a result of the Affordable Care Act, seniors are paying less for life-saving prescription drug medication.

As a result of the Affordable Care Act, more than 1 million people throughout this country—including in rural America—are able to receive substance abuse treatment because of them being caught up in the opioid addiction epidemic.

The Affordable Care Act has made a positive difference in the lives of everyday Americans, yet this President says

it has been a disaster. This is the same President who, for 5 years, perpetrated the racist lie that Barack Obama was not born in the United States of America, who said that he received more votes than Hillary Clinton, who claimed that there were more people at the inauguration than in 2009. This is an individual who still maintains that his predecessor, Barack Obama, committed a felony and ordered a wiretap, despite testimony from the FBI Director to the contrary.

Let's be clear. What will be an unmitigated disaster is TrumpCare, which House Republicans are working to jam down the throats of the American people.

TrumpCare, the Republican healthcare plan, will result in 24 million Americans losing their health care.

TrumpCare, the Republican plan, will gut Medicaid, stripping it of \$880 billion, taking dead aim at seniors, the poor, and the afflicted.

TrumpCare will impose an age tax on people between the ages of 50 and 64, causing some in that category who are currently paying approximately \$1,700 per year to pay close to \$14,000 in age tax—on people between 50 and 64.

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That is TrumpCare, the Republican plan, an unmitigated disaster taking dead aim at the American people. It will result in tens of thousands of Americans dying. It is a death sentence. Seniors will die. The poor will die. The chronically ill will die. Rural Americans will die. People between the age of 50 and 64 will die. And the executioner will be the authors and those who support the Republican healthcare plan.

The SPEAKER pro tempore. Members are reminded to refrain from engaging in personalities toward the President.

MNIKESA'S ACA TESTIMONY

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

Ms. DELAURO. Mr. Speaker, I rise today to share the testimony of one of my constituents. Her name is Mnikesa Whitaker-Haaheim. She is a fifth-generation, college-educated woman, founder of Ballet Haven, a rigorous dance training program. She is an English teacher who has won the Teacher of the Year award twice. And I regret to tell you that she is also living with and dying from a debilitating disease, and these are her words:

“The debate about healthcare has turned into something of a spectacle—as if it exists apart from the flesh and bones that are experiencing the consequences of the decisions being made. I think it is exceedingly important to talk about the felt experience of illness.

“The feeling like an elephant's sitting on my chest—daily—because I

have pulmonary fibrosis. No, I have never smoked. Not cigarettes. Not anything. Ever. I am simply sick. The feeling of my leg bones splintering, waking me up with the pain, several times a night, several times a week. Each leg is splayed beneath me as if I'd fallen from a window. Of course that's not what happened. This is just what joints and muscles feel like as part of my rare disease.

"The feeling of having a widespread flu-like, bone-crushing ache that does not end. I don't have the flu. I have a rare, autoimmune disease. This is what my entire body feels like 90 percent of the time. The feeling of choking without warning, regularly on coffee. On water. On my own spit. This is what my disease feels like.

"The feelings I'm talking about are what it is like to not be able to take a deep breath, ever, because over 70 percent of my lungs have turned to hardened, stony, scar tissue. The feeling of not even remembering what it is like to take a deep breath.

"Because my particular disease is one that is categorized as autoimmune, it would be several months before we got the correct diagnosis; autoimmunity is notoriously difficult to diagnose.

"And unless you are a specialized medical professional or happen to know someone who is afflicted by rheumatoid disorders, you have likely never heard of what I have: anti-synthetase syndrome—scleroderma. It is rare, progressive, and aggressive. Often it is fatal, especially with the amount of lung damage that I have incurred.

"When after 2 years of chemotherapy, the progression of my pulmonary fibrosis and overall disease process was not successfully remaining stable, I had to go on supplemental oxygen. Within 6 months, I was getting so sick that I eventually had to medically retire at 36 years old; it was a heart-breaking decision.

"I loved my job, and I was good at it. Without the protections afforded to me through the Affordable Care Act, my oxygen, the cost of seeing my numerous specialists, paying for 14 medications, admissions to the hospital, and life-threatening emergency trips to the ER would be nothing short of financially catastrophic for my family.

"A rare disease like mine baffles many doctors. It has not been uncommon for my caretakers to have to spend hours on the phone with insurance companies fighting for a drug that is literally thousands of dollars but necessary for my treatment.

"When you have a rare illness, you often have to try new things. Insurance companies will unabashedly see you as a risk. Why? You are expensive, rare and dying. That is an unholy trinity.

"But since the Affordable Care Act, my medications have been affordable. Access to care is not accessible if you cannot afford it, and what the ACA has done is create a safeguard so that the care that my doctors have prescribed

for one of their sickest patients is truly accessible to that patient because I can afford it.

"I come from a family who has, for generations, always worked and always paid into 'the system.' There are next to no services available for a relatively young woman like me at social services. I know. I've checked. I am not old enough for a full teacher's pension, but do receive a small disability allowance. I receive a small Social Security check, but I am well below the poverty level.

"I need you to understand that people like me are not asking for anything for free. I am willing to continue to pay for the quality health care that I have had. I am willing for there to be changes made to it."

"I find it unconscionable, however, that decisions can be made regarding life and death without actual regard for the felt lives and actual deaths that you will be responsible for if you repeal the ACA.

"I do not know the course that my disease will take. But I have the blood of some powerful ancestors flowing in me, and their fight for life continues in me as well. I am honored to do so in their memory and on behalf of the millions of Americans who do not have the words or the ability to speak for themselves yet are terrified of losing their affordable, solid coverage under the ACA."

Those were her words—and she is not alone in her fear of repeal. Mr. Speaker, I will enter into the RECORD testimony from other women in my district whose lives have been changed by the Affordable Care Act.

Mr. Speaker, we owe it to Mnikesa and everyone like her across the country to protect their health care and to reject this repeal bill.

MICHIGANDERS WILL LOSE COVERAGE

The SPEAKER pro tempore. The Chair recognizes the gentlewoman from Michigan (Mrs. LAWRENCE) for 5 minutes.

Mrs. LAWRENCE. Mr. Speaker, I rise today in strong opposition to the American Health Care Act.

This week, the Republicans will call for a vote to push 24 million Americans off of their health care and transfer massive healthcare costs on working families across the country.

Today I will take a moment to talk about the impact that TrumpCare will have on my district, the 14th District of Michigan. Under this bill, 70,000 constituents of mine will lose coverage by 2026.

One of the pillars of the existing Affordable Care Act were allowing States like Michigan—who, for the record, has a Republican Governor who worked hard to make sure that we were able to have Medicare expansion so that we could use the Affordable Care Act in Michigan.

One of the pillars of the Affordable Care Act was to expand Medicaid coverage to millions of people. According to the statistics from Healthy Michigan, which is our process for affordable

health care in Michigan, over 650,000 Michiganders enrolled and gained access to health coverage.

In Oakland and Wayne Counties, which I represent, there are over 140,000 individuals enrolled in Healthy Michigan, the Affordable Care Act. Under the Republican bill, these same Michiganders will lose the coverage that they depend on for their long-term care.

Approximately 200,000 seniors, disabled individuals, children, and women who receive care through traditional Medicaid will be severely impacted by the Republican health plan. That includes half of all the children in Michigan, including over 100,000 children in my district alone.

Republicans are using the repeal-and-replace legislation once again to target women's health by defunding Planned Parenthood. No matter how many times it has been substantiated, it is a fact, it has been stated, the Republicans do not seem to understand or refuse to accept the fact that Federal dollars do not pay for abortions.

Planned Parenthood provides a variety of preventative care, including contraception and cancer screening for millions of Americans and women in this country.

Instead of allowing Planned Parenthood to continue their important mission of providing women across the country with quality health care, Republicans have decided to jeopardize the health of millions of Americans because of a blatantly partisan witch hunt.

I would like to take a minute to share a letter one of my constituents wrote me about her experience with the Affordable Care Act:

"As a self-employed person, the first time in my life I've been able to have health care in Michigan has been through the Affordable Care Act, and I still only very, very rarely go to the doctor.

"But I'm happy to pay into the system every month because I believe that's what it means to be a good citizen: that a healthy community is a safer community, a happier community, and a more creative community.

"Health care is a very important issue to me. My brother has cystic fibrosis, and it is only through Medicaid expansion that he is still able to receive health care.

"The thought of the Medicaid expansion being phased out and my brother being somehow responsible for paying for tens of thousands of dollars per month for necessary medication destroys me."

Mr. Speaker, my constituents deserve better. I urge my colleagues to oppose TrumpCare, the American Health Care Act.

I will stand here and say that the Affordable Care Act is not perfect, but if we really do the job that we are sent here to do as Members of Congress, we would sit down together and fix what is wrong with our existing healthcare