

Ms. TENNEY. Mr. Speaker, I rise today to recognize the Central Association for the Blind and Visually Impaired.

Established in Utica in 1929, CABVI, as it is known, provides a wide range of opportunities for the blind and visually impaired, helping them to acquire job skills and training, good wages and benefits, and a greater independence and quality of life.

In their important mission, CABVI employs a segment of our population that experiences among the highest levels of unemployment in the country.

CABVI also provides vital health and rehabilitation services for people experiencing vision loss. Their resources and services have improved the quality of life for many in our region, including my late father who spent the last 7 years of his life legally blind and confined to a wheelchair. My family is forever grateful to them for their care and kindness.

Today I was honored to welcome to Washington my good friend Rudy D'Amico, president and CEO of CABVI; Robert Porter, public policy director; and Leta Laukitis, executive assistant. Joining them from the southern tier, colleague Ken Fernald, CEO of the Association for Visual Rehabilitation and Employment in Binghamton, New York. All joined by Jennifer Small, chief operating officer; John Ellzey, assistive technology instructor; Katie Lawson, switchboard operator; and Chervelle Amaker, purchasing agent and buyer.

Mr. Speaker, I thank them for their important work and their continued dedication to our community. I look forward to continuing to advocate for them throughout my time in Congress.

□ 1730

LET'S GET IT DONE

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

Mr. CICILLINE. Mr. Speaker, yesterday, Senate Republicans delayed a vote on their bill to repeal the Affordable Care Act. This is a bill that Republicans wrote in secret. They allowed no input from the public or members of the Democratic Caucus, yet they still could not find the votes to pass their bill.

Maybe that is because it eliminates health insurance for 22 million Americans; it imposes an age tax on older Americans; it allows insurance companies to discriminate based on pre-existing conditions; it slashes Medicaid and leaves Medicare to wither on the vine. But no matter the reason, the lesson is clear: it is time for Republicans to give up on their effort to repeal the Affordable Care Act.

The American people are benefiting from this law. Seniors like that they are saving money on prescriptions. Parents like that their kids can stay on their plan until they are 26. Workers

like that their employers have to offer healthcare coverage.

It is not perfect, but let's work together to approve the Affordable Care Act to make sure it works even better for the American people. Democrats are willing to do that. If Republicans will give up the idea of repeal, we can work together to make the Affordable Care Act even better. Let's get this done for our constituents and the American people.

WAYZATA GIRLS CHAMPS

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

Mr. PAULSEN. Mr. Speaker, I rise today to congratulate the Wayzata High School girls synchronized swimming team, who recently won the Minnesota High School State Championship.

The Trojans triumphed at the State meet last month, where the undefeated team earned the championship title for the 11th consecutive year. They faced tough competition, but Wayzata's excellent figure scores put them over the edge to secure the win.

This talented team of dedicated girls, led by Head Coach Hensel, worked hard all season, winning each of their meets by at least 11 points. That commitment didn't stop at the pool. It is also in the classroom, where each of these students excelled as well.

Mr. Speaker, congratulations to all the members, athletes, students, teachers, coaches, families, and fans of the Wayzata High School girls synchronized swimming team on their outstanding performance this season.

TAX BILL DISGUISED AS A HEALTHCARE BILL

(Ms. MICHELLE LUJAN GRISHAM of New Mexico asked and was given permission to address the House for 1 minute and to revise and extend her remarks.)

Ms. MICHELLE LUJAN GRISHAM of New Mexico. Mr. Speaker, I am angry.

I am angry that Republicans are trying to fool the American people. The Republican healthcare bill is nothing more than a tax bill disguised as a healthcare bill.

TrumpCare is an almost \$570 billion tax break for health insurance companies, pharmaceutical companies, and the extremely wealthy. It is a bill that asks working families to pay more for less: less coverage, less access, and less care.

Recently, a concerned constituent called my office after discovering that his son would need surgery at birth for a heart defect and then subsequent surgeries later on. He wanted to know what he could do to stop TrumpCare and protect his son, who would be born with a preexisting condition and face thousands of dollars of cost throughout his life.

Mr. Speaker, let's pass healthcare legislation that invests in and protects the healthcare of all Americans, holds the healthcare industry accountable, and lowers cost.

1-YEAR ANNIVERSARY OF DALLAS POLICE SHOOTING

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

Mr. BURGESS. Mr. Speaker, July 7, 2016, is forever marked by the sadness and loss our community suffered when five Dallas police officers were gunned down in the deadliest attack for law enforcement in the United States since the September 11 attacks.

These officers were killed as they protected Dallas citizens exercising their constitutional right to protest. They put their own lives on the line for the safety of others.

Reflecting on the events of last July 7, what stands out to me is the heroism of those who answered when duty called and a community that banded together during this tragic event. We are in the midst of an environment that can be deeply divided. We should all seek to follow the example of the Dallas community.

I want to acknowledge former Dallas Chief of Police David Brown and offer my sincere gratitude for his leadership; as well as the Dallas Police Department; first responders; the Parkland hospital; Baylor University hospital, where this iconic photograph was taken, for providing excellent emergency care; and others who helped the victims of this attack.

Mr. Speaker, we must recognize the sacrifice of the men and women and the critical role they played to protect our communities.

RECOGNIZING KELLY CRAFT AS U.S. AMBASSADOR TO CANADA

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

Mr. COMER. Mr. Speaker, I rise to applaud President Trump's selection of Ms. Kelly Craft as the next U.S. Ambassador to Canada.

Canada is the number one export market for my home State of Kentucky. Agriculture is the major industry in my congressional district, and Canada is a critical export market for Kentucky farm products. As a result of our successful history of trade with the nation of Canada, I cannot think of a better person to lead relations between these two countries than my dear friend, Kelly Craft.

Kelly was raised in Glasgow, Kentucky, which is 30 miles from my hometown. She has a lifetime of achievements and is extremely qualified. On a personal note, Kelly has always been there for and believed in me, and I am very appreciative of her support and friendship.

I look forward to Kelly Craft's great leadership as Ambassador to Canada, and I urge a swift confirmation process in the Senate.

SENATE BILL A MARCH BACK TO BAD OLD DAYS FOR WOMEN

(Mrs. CAROLYN B. MALONEY of New York asked and was given permission to address the House for 1 minute.)

Mrs. CAROLYN B. MALONEY of New York. Mr. Speaker, some of my friends and colleagues on the other side of the aisle continue to claim that, under the Senate's healthcare plan, women will be protected from discrimination. They won't be charged more for their healthcare than men. However, the facts show that nothing could be further from the truth.

The Senate bill actually targets women for the cruelest cuts of all. It does so by allowing States to do away with guaranteed access to essential health services, now available under the Affordable Care Act. They are services like maternity care, no-cost birth control, and mammogram screening.

But the Senate plan would allow States to completely waive any guarantee of service. States could, once again, allow insurers to consider pre-existing conditions, like pregnancy, in setting fees and allow them to charge more. Plus, \$800 billion in Medicaid cuts and defunding Planned Parenthood disproportionately harms women.

Mr. Speaker, no matter how many times they say otherwise, they are marching back to the bad old days for women.

DEBT AND DEFICIT

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

Mr. SCHWEIKERT. Mr. Speaker, I yield to the gentlewoman from Ohio (Ms. KAPTUR), who has always treated me very kindly.

NAFTA NEGOTIATIONS

Ms. KAPTUR. Mr. Speaker, as NAFTA renegotiation approaches, I rise to call attention to the mammoth U.S. trade deficit with our NAFTA nation partners.

Our current deficit with NAFTA nations is \$74 billion. This red on the chart translates into tens of thousands of lost U.S. jobs, all while wages are depressed for North America's struggling workers. Since NAFTA's passage, there hasn't been a single year of trade balance for this country. That translates into lost jobs.

Thus far, President Trump has failed to correct these trade deficits. In fact, the trade deficit this year has ballooned to more than \$22 billion from the same period in 2016.

Balanced trade accounts in 5 years should be first on our agenda. My bill,

the Balancing Trade Act, H.R. 2766, requires the administration to address trade deficits of more than \$10 billion with any nation.

As negotiations near, let's focus on key principles such as vigorously enforcing a first world rule of law; including labor provisions that allow workers across this continent to improve their standard of living and outlaw labor trafficking; enact environmental standards for human health and forge an agricultural labor agreement that helps displaced farmers; reform the unaccountable tribunals called Investor-State Dispute Settlements so that they work for people, not just big corporations; address currency manipulation; and, finally, stamp out the illegal drug trade that is plaguing this continent.

The wealth NAFTA created has not been shared by all, but only a very few, and often only the very rich. Our foundational principle for NAFTA reform must be free and fair trade among free people with a rule of law.

Mr. SCHWEIKERT. Mr. Speaker, this is one of those things I partially do, I think, as therapy. About once every other month, I ask for a block of time to try to take a bunch of very complex numbers and try to find ways to put them on boards and demonstrate them.

I am going to take a little divergence just for a moment or two, in response to some of the things I have heard today. We are actually going to focus on debt and deficit and what is actually demographically driving them, what is really happening in this country, and what is going to drive all public policy in our life.

You have had a handful of things said about the ACA—many people know it as ObamaCare—and our replacement. I know some of the things that the Senate is working on.

There is a math problem—and it is very simple—in the individual market. So if you hear someone turn to you and say, This is about healthcare for everyone or this is employer-based, or Medicare, it is not.

In my congressional district, less than 2 percent of my population actually purchased in the individual market. So you have to start putting this in perspective.

Here is your math problem. Because the prices kept moving up and the deductibles kept becoming larger and larger, half of our population—that 50 percent that only uses 3 percent of healthcare dollars—stopped buying.

I came across a number earlier this week—I haven't had a chance to vet it, but it was in a publication—saying that, of the 18- to 30-year-old population that would be in the individual purchasing market, only about 17 percent of them were actually buying the insurance.

So those of you who do math, you start to understand what happens in a world where half the population that really uses very little healthcare services doesn't buy a product and those who are purchasing it are those who are the high users of it.

Remember, 50 percent of all healthcare dollars are used by 5 percent of the population. So you start to see it is this hockey stick curve that shoots up. That is the math problem that is trying to be fixed.

In the last 3 years, if you are from Arizona, you have had a 190 percent price hike in the mean plan and you have a single choice. So if we are going to be intellectually honest, should we hold our brothers and sisters around here to their own words and their own promises? You remember the promises a few years ago about keep your doctor, \$2,500 discount, lots of choices, lots of options, well, in Arizona, your prices have skyrocketed, you didn't get to keep your doctor, and you now have a single choice.

□ 1745

That is the reality of the math. Sometimes it is just so hard sitting here when you hear people just pulling things out of the air, and then you go to the bill and say: But I can't find that.

And you get these weird logic trains that if this happened and a meteor hit here and this and that. At some point we need to be honest with the American people saying it is a math problem. This is not about removing costs from the healthcare system. It is actually moving around, how you fairly distribute the cost of it.

This summer now we are starting to work on it, just like we voted on about an hour ago a piece of legislation that starts to remove cost out of the system. It is these future pieces of legislation, like the tort liability bill that was just passed out of the House here, that will actually start to drive down costs.

Remember a really important conceptual idea: in 1986, there was a law passed here, signed by President Reagan, that said you cannot deny an American health services if they show up at the emergency room, if they show up at the hospital.

So if you actually look at the number of procedures in society in the last 30, 31 years, pre-ACA, after the ACA came into effect, what we see in the future, we haven't removed procedures and costs. We have just moved the money around.

All right. So what is happening in our country? Do you remember when the President introduced his budget, what, about 6 weeks ago, 2 months ago, and the gnashing of teeth and the wailing and the crying?

We have a math problem, and it is based on demographics. We are going to see this multiple times in these slides. I am one of them. I am at the very tail end. I am a baby boomer. There are 76 million of us who are baby boomers, who are heading towards retirement. That demographic curve is changing the cost structure of government.

On the slide you see next to me, this is 9 years from now. Remember, we are