

his teammates; to his coach, Paul Myers; and to all who gave him the Most Courageous award at their team's award banquet. Joe says that the comradery and friendship that he has found with his teammates is what means the most to him.

Mr. Speaker, I thank Mr. Dietterick for being an important part of our community. He is an inspiration and he is a hero.

AFFORDABLE CARE ACT LAWSUIT

The SPEAKER pro tempore. Under the Speaker's announced policy of January 3, 2019, the gentleman from California (Mr. GARAMENDI) is recognized for 60 minutes as the designee of the majority leader.

Mr. GARAMENDI. Mr. Speaker, I just put this placard up to emphasize what our Democratic Caucus is attempting to do. We have a program called "For the People," and we are trying to deal with the issues of healthcare across this Nation.

We know, as do basically all the American public, that healthcare is, in many cases, not affordable. So how can we deal with this?

Well, one way is to deal with the cost of prescription medicines. We have a program. We have actually voted it off the floor. It is over in the Senate where it will linger as the Grim Reaper, Senator MCCONNELL, kills legislation that would be for the people. So this is one example of many that we Democrats are trying to address.

Back in 2010, we addressed this issue, at least in part, with the Affordable Care Act, which was promptly called ObamaCare by our Republican colleagues at that time. They campaigned against it and, ultimately, succeeded in winning the House in the 2010 election, and then spent 2011, 2012, 2013, 2014, 2015, 2016, and 2017 in an effort to repeal the Affordable Care Act. Fortunately, they did not succeed.

When the new President, Mr. Trump, came to office, they tried, once again, to repeal the Affordable Care Act in 2017. They failed, largely because a Senator from Arizona, who was then suffering from cancer, voted no in the Senate. So I thank Senator McCain for having the courage and the understanding of what it meant to have a preexisting condition.

□ 1945

So here we are today with all kinds of charts that I am not going to put up. I am just going to speak directly to this issue.

As was said just a moment ago by my colleague from Ohio, the appellate court in New Orleans is taking up an issue that Republicans, including the President, have put before the court. Unable to gain a repeal in the Congress of the United States, they are now pursuing in the courts of the land a repeal put forward by, I think, 16 attorneys general—all Republicans—to use the courts to repeal the Affordable Care Act.

I want us to understand what this means. The fight of the last 8 years, unsuccessfully, in the court of the people, the Congress and the Senate of the United States, being unsuccessful, they are now attempting in the courts of this land to do what they could not do through the representatives of the people of the United States.

The cynical effort to do this actually began with the December 2017 tax cuts that the Republicans rammed through Congress without one hearing: not a hearing in the Ways and Means Committee, not a hearing in the Senate Committee on Finance, not a hearing at all.

Attached to that legislation was a repeal of the mandate that was in the Affordable Care Act that every American must either purchase insurance or have insurance through their employer. That repeal then opened the door to the current attempt now in the appellate court in New Orleans that could give rise to a decision that might ultimately be made by the U.S. Supreme Court that would totally repeal all aspects of the Affordable Care Act.

So what does this mean? Mr. Speaker, what does this mean for you and me?

I hope you do not have a preexisting condition. I do, because I am over 65, and 130 million Americans have a preexisting condition. The repeal of the Affordable Care Act would remove the protections that those Americans have that would guarantee them coverage without discrimination.

Mr. Speaker, I was the insurance commissioner in California in the early 1990s and again in 2002 to 2005. I know what it means when the insurance companies discriminate based upon preexisting conditions. I have seen the documents that they would require men and women to fill out before they would issue a health insurance program.

Every conceivable issue that a human being would have, from high blood pressure to, indeed, being a female, was on that list, and the insurance companies had unilateral, total discretion to charge more or not provide insurance at all.

So the President of the United States, at this moment, together with those attorneys general and, apparently, the support of our Republican colleagues are, at this moment, attempting to reestablish a burden on 130 million Americans who do have a preexisting condition, who are protected but, if they have their way in court, would lose that protection and face, once again, the onerous and, in many cases, deadly burden of having a preexisting condition and not being able to get healthcare insurance or having to pay several times more because of their preexisting condition.

Who among us does not have that? Well, perhaps the other 40 percent—actually, 50 percent of Americans who stand at risk of developing high blood pressure, diabetes, or some other illness.

That is not all. In my district in the Sacramento Valley of California, the Affordable Care Act has allowed the creation of what we call Federally Qualified Health Centers, which now are the principal providers of initial healthcare in my district.

It is not just for poor people, not just for transients who have moved from one job to another, but for people who have been insured for years but, because of a lack of medical services, could not get insurance.

These Federally Qualified Health Centers are totally dependent upon the Affordable Care Act. Repeal the Affordable Care Act and those clinics are gone, and the services that they provide will not be in communities, both urban and rural, across America.

How bad is it that those attorneys general are so stuck on repealing ObamaCare that they are ignoring the reality that millions upon millions of Americans have come to depend upon these clinics? If the Affordable Care Act is found to be contrary to law and the Constitution by the courts and by the cynical, diabolical repeal of one section of the Affordable Care Act, those people will not be able to get primary care services.

And that is not all. The Affordable Care Act expanded the Medicaid program across this Nation, and some 15 million Americans have been able to gain healthcare access through the Medicaid programs. In California, we call it Medi-Cal. The Medi-Cal program in California provides, perhaps, 3 million Californians with access to healthcare services. That, too, the expansion will be gone, and the support for States across this Nation will be eliminated if the Affordable Care Act is found to no longer exist because of court action.

How cynical, how sad, how harmful, but that is what they are pursuing. And that is not all. There is a problem that existed before the Affordable Care Act.

Young men and women found coverage in some universities, in some jobs through either the university and the fees or through an employer; but most, when they became 18 years of age, lost their family insurance. The Affordable Care Act said that is not good. They would be able to stay on their family's insurance until the age of 26, where, presumably, they would be better able to buy insurance themselves or be able to have a job in which insurance would be provided.

Insurance is expensive, so the exchanges were set up across the Nation, insurance exchanges where people could shop for insurance. Those exchanges provided not only access to insurance markets, but they also provided, through the Affordable Care Act, tax credits that would make the insurance affordable to them.

Nope, it is going to be gone. It is going to disappear if the court in New Orleans rules against the Affordable Care Act.

And so how will they afford insurance? Well, they won't. And in many States where there are Federal exchanges—California not included, because California set up its own State exchange. But in those States that have a Federal exchange, it won't exist. The ability to shop for insurance will be diminished or eliminated and, along with it, the subsidies. So those people, some 9 million who now enjoy those subsidies, will not receive them.

It goes on and on.

Are you a senior? Are you on Medicaid? If so, you are in the last year in which the doughnut hole will no longer exist, beginning 4 years ago. The doughnut hole, the prescription drugs doughnut hole in which prior to the Affordable Care Act there was a subsidy, part D, for prescription drugs, that ended at about \$1,500 of prescription costs.

Then there was a doughnut hole in which the individual on Medicare would have to pay for insurance, and that was somewhere around \$4,000. And then above that, Medicare would once again pick up the cost or most of the cost.

In the Affordable Care Act, we specifically set up a system so that over a 4-year period, the doughnut hole would disappear. It would shrink each and every year. It would rise from \$1,500 to \$2,000, \$3,000, and so forth. And next year, it would be gone.

I am sorry for the seniors. The Affordable Care Act, if found by the court to no longer be constitutional, would reemerge immediately upon an action by either the appellate court or, I suppose, ultimately, the Supreme Court. So, welcome the doughnut hole back.

If someone happens to be a senior, they better start pocketing money—which I am sure they don't have, to begin with—to prepare for the day when the cynical action of these attorneys general—Republicans, every single one of them—and the President would once again reestablish the awesome, terrible prescription drugs doughnut hole.

How small-minded can you be? Apparently, there is no end to it. So here we are. Our effort on this Democratic side of the aisle is for the people, not for some ideological mumbo jumbo, but for the people. We want a healthcare program that provides solid benefits for Americans.

The Affordable Care Act takes us a long, long way toward that goal. It doesn't achieve it totally, and we have more to do. Many of us talk about Medicare for All, and we hope to get there some day. But in the meantime, we have the Affordable Care Act, and our Republican colleagues are doing everything they can since its institution in 2010 to do away with it, and they have never, ever provided a substitute.

Do you remember that repeal and replacement mantra? There has never been a replacement program that made any sense whatsoever.

So, we are for the people. We want to deal with the cost of prescription drugs, not to increase them for seniors, as our Republican colleagues are attempting to do; not to put Americans out of the insurance market, as they are attempting to do, by eliminating the guaranteed coverage regardless of your healthcare status; not to put people out of insurance if they are 18 to 26 years of age, as our Republican colleagues are attempting to do; not to eliminate the clinics that millions upon millions of Americans now depend on for their primary care, as our Republican colleagues are attempting to do.

□ 2000

We want it for the people. We want healthcare coverage for every American. We want it to be affordable, and we want it to be available.

So here we are on a day in which the appellate court in New Orleans is hearing from the President's lawyers in the Department of Justice that 13 million Americans should lose their health coverage and that 130 million Americans should be, once again, facing insurance discrimination because of an existing healthcare issue. We are hearing from the President's lawyers that it is good to eliminate the clinics, that it is good to eliminate the subsidies that some 9 million Americans are able to get to so that they can afford insurance, and that the exchanges that provide a marketplace for people to sort out what kind of an insurance policy they want should be eliminated.

The President's lawyers are out there purposely harming Americans all because the President has said we must repeal the ObamaCare program.

I am sorry. I disagree. I want Americans to have healthcare coverage. I was an insurance commissioner for years, and I fought the insurance companies every single day. Then I came here in 2009 and was able to vote, providing on this floor the vote that allowed the Affordable Care Act to move out of this House to the Senate and eventually become law—the 218th vote. I am proud of that vote because I know from my personal experience that the Affordable Care Act dealt with real problems that Americans had and gave Americans a real opportunity to get healthcare and to get healthcare services.

Here we are with the President of the United States actively this day doing everything he could not achieve in the Congress but rather now in the courts doing everything he can to harm Americans—how cynical, how terrible, and how harmful. But that is where we are.

We will see what the court does. Hopefully, they will be sympathetic to 130 million Americans, to 9 million Americans, to 15 million Americans, to children, and to young adults 18 to 25. Maybe they will be sympathetic. We will see what happens.

But if the Affordable Care Act is somehow through the courts repealed and there is no replacement, then I

want the American people to understand who is responsible for the harm that will immediately be inflicted upon Americans. It is our President and it is his colleagues who have aided and abetted and who today in-State attorneys general are arguing for the harm that will come to Americans.

We haven't given up the fight, and we will never give up the fight so that every American has affordable health insurance, whatever that may be.

We have come a long way with the Affordable Care Act, and we will fight all along the way. Should we lose this battle, we are never, ever going to give up our goal of providing quality, affordable healthcare to every American.

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

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

RECESS

The SPEAKER pro tempore. Pursuant to clause 12(a) of rule I, the Chair declares the House in recess subject to the call of the Chair.

Accordingly (at 8 o'clock and 3 minutes p.m.), the House stood in recess.

□ 2348

AFTER RECESS

The recess having expired, the House was called to order by the Speaker pro tempore (Mr. PERLMUTTER) at 11 o'clock and 48 minutes p.m.

REPORT ON RESOLUTION PROVIDING FOR CONSIDERATION OF H.R. 2500, NATIONAL DEFENSE AUTHORIZATION ACT FOR FISCAL YEAR 2020, AND PROVIDING FOR CONSIDERATION OF MOTIONS TO SUSPEND THE RULES

Mr. MCGOVERN, from the Committee on Rules, submitted a privileged report (Rept. No. 116-143) on the resolution (H. Res. 476) providing for consideration of the bill (H.R. 2500) to authorize appropriations for fiscal year 2020 for military activities of the Department of Defense and for military construction, to prescribe military personnel strengths for such fiscal year, and for other purposes, and providing for consideration of motions to suspend the rules, which was referred to the House Calendar and ordered to be printed.

PUBLICATION OF BUDGETARY MATERIAL

STATUS REPORT ON CURRENT SPENDING LEVELS OF ON-BUDGET SPENDING AND REVENUES FOR FY 2019

HOUSE OF REPRESENTATIVES,
COMMITTEE ON THE BUDGET,
Washington, DC, July 9, 2019.

DEAR MADAM SPEAKER: To facilitate application of sections 302 and 311 of the Congressional Budget Act of 1974, I am transmitting