Dangerously and unconstitutionally, he reposted a third party's post: "HANG THEM GEORGE WASH-INGTON WOULD!!"

President Trump's call for the execution of lawmakers is a reckless and flagrant abuse of presidential power that promotes extra-judicial punishment and the assassination of Members of Congress, and warrants impeachment by the U.S. House of Representatives and trial by the Senate.

ARTICLE II. Abuse of Presidential Power to Intimidate Federal Judges in Violation of the Separation of Powers and Independence of the Judiciary.

In his conduct of the office of President of the United States, Donald John Trump, in violation of his constitutional oath to faithfully execute the office of President of the United States and, to the best of his ability, preserve, protect, and defend the Constitution of the United States, and in violation of his constitutional duty to take care that the laws be faithfully executed, has unfaithfully, dangerously, and unconstitutionally abused his official position by threatening federal judges.

President Trump has fostered a political climate in which lawmakers and judges face threats of political violence and physical assault; and in this climate has made threats and vituperative comments against federal judges, putting at risk their safety and wellbeing, and undermining the independence of our judiciary.

Case in point, in response to a federal district court ruling with which President Trump disagreed, he posted: "This Radical Left Lunatic of a Judge, a troublemaker and agitator who was sadly appointed by Barack Hussein Obama, was not elected President... This judge, like many of the Crooked Judges' I am forced to appear before, should be IMPEACHED!!!"

Another U.S. District Chief Judge has reported receiving increased numbers of violent threats, particularly after he began hearing arguments in a lawsuit against the Trump administration.

In 2025, roughly a third the federal judiciary has been flooded with threats, with data showing that these threats spike each time Trump uses abusive rhetoric against judges.

On May 2, 2025, Reuters reported that U.S. Supreme Court Justice Ketanji Brown Jackson addressed President Donald Trump's attacks on the judiciary. The relevant part of the article stated as follows:

1) "U.S. Supreme Court Justice Ketanji Brown Jackson said on Thursday attacks by Republican President Donald Trump and his allies on judges were 'not random' and seemed 'designed to intimidate the judiciary.'"

2) Specifically, U.S. Supreme Court Justice Jackson remarked that, "The attacks are not random. They seem designed to intimidate those of us who serve in this critical capacity."

3) Justice Jackson added, "The threats and harassment are attacks on

our democracy, on our system of government. And they ultimately risk undermining our Constitution and the rule of law."

The judiciary is afforded power over "all Cases, in Law and Equity, arising under this Constitution, the Laws of the United States, and Treaties made" and "to Controversies to which the United States shall be a Party." U.S. Const. art. III, sec. 2. Intimidating judges, and recklessly calling for the impeachment and removal of judges who disagree with him demonstrate a willingness by Trump to usurp authority afforded by our Constitution to the judiciary and demonstrate a disregard for the Constitution and the careful balance of powers that protects our country from abuses by any single branch.

President Trump's threats place the lives of federal judges, court officials, and innocent bystanders at risk, promote the incitement of violence, and undermine our democracy, which cannot survive where President Trump's incendiary comments engender invidious hate and where dissent is punishable by death.

In all of this, Donald John Trump has acted in a manner contrary to his trust as President and subversive of constitutional government to the great prejudice of the cause of law and justice and to the manifest injury of the people of the United States.

Wherefore Donald John Trump, by such conduct, warrants impeachment, trial, and removal from office.

□ 2140

 $\mbox{Mr. GREEN}$ of Texas. Mr. Speaker, I yield back the balance of my time.

The SPEAKER pro tempore. Under rule IX, a resolution offered from the floor by a Member other than the majority leader or the minority leader as a question of the privileges of the House has immediate precedence only at a time designated by the chair within 2 legislative days after the resolution is properly noticed.

Pending that designation, the form of the resolution noticed by the gentleman from Texas will appear in the RECORD at this point.

The Chair will not at this point determine whether the resolution constitutes a question of privilege. That determination will be made at the time designated for consideration of the resolution.

AND STILL I RISE

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

Mr. GREEN of Texas. Mr. Speaker, and still I rise to note that tonight I have called for the impeachment of Donald John Trump, President of the United States of America.

He is an abuser of Presidential power. He has called for the execution of Members of the House of Representatives, of this very House. He has demeaned Members of the judiciary.

He has conducted himself in office such that persons are now threatening Members of the judiciary, threatening Members of the House of Representatives, and threatening Members of the Senate.

Donald John Trump, by his conduct, merits impeachment, trial, and conviction in the Senate of the United States of America and should never hold any office of public trust ever again.

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

TURNING HEALTHCARE INTO FINANCIAL ENGINEERING

(Under the Speaker's announced policy of January 3, 2025, Mr. Schweikert of Arizona was recognized until 10 p.m. as the designee of the majority leader.)

Mr. SCHWEIKERT. Mr. Speaker, the good news is we have only until 10:00. The bad news is I am going to use every second of it. Let's race through this because originally, I think I was going to go almost an hour. Maybe this is mercy.

I want to walk through just a couple of concepts here. One, we are going to talk about one of my intense frustrations. I have talked about this for a decade or more. Please, how do I get my brothers and sisters on the left and those on the right to understand we have turned the whole discussion of healthcare into financial engineering? Work with me on this.

Many of us know ACA as ObamaCare. It is a financing bill. It has community rating in it, so the guaranteed access, but it is a financing bill. It is who gets subsidized and who has to pay. Our Republican alternative was a financing bill. It just had a little better actuarial modeling in it. Medicare for all is a financing bill.

We don't have the discussion about what we pay, the waste, the fraud, the adoption of technology, the adoption of cures, the adoption of how we deliver, the adoption of making us autonomous because we can wear our medical lab on our body now. I wear one of the data rings, and I experimented with a Dexcom in the last couple of weeks.

Instead, we are going to beat each other up around here. The Democrats are going to try to make a political issue out of it. We are going to basically fumble because we had trouble explaining that we have turned healthcare into financing. They want to hand out billions and billions of dollars more to insurance companies to buy down rates.

Let's actually walk through some points I want to make. This is the first one. I desperately hope this number evens out as we go through the rest of the year.

Our model right now says in the first quarter of this fiscal year—remember, October 1, we began the 2026 fiscal

year. For every dollar we are taking in tax collections, Mr. Speaker, we are spending \$1.62. The original model was, every \$1 in, we would spend \$1.42 or \$1.43. Our spending is up.

What is driving that spending up? It is the refinancing of our debt at higher interest rates, because we had all that debt we sold a few years ago at very low interest rates. The fact of the matter is healthcare costs keep going up. The stupid discussion we are going to have here is a financing debate—how much more subsidies should we hand out—and not a discussion of what we are going to do to change the price of healthcare.

Let's actually take a quick run through this. I am going to try to explain a couple of basic things about the ACA. Most of us know it as ObamaCare.

This chart is hard to read from a distance. ACA goes into effect. I want us to step all the way back out to where we are here when the enhanced subsidies—these are subsidies on top of subsidies—is \$40 billion. Over here, the basic subsidies, the growth of the subsidies since the pandemic, is another \$75 billion. On top of the base subsidies, they are \$80 billion. This is only 7 percent of the healthcare market.

Let's take a look at that. This is so hard for people to understand. I was listening to one of my Democrat colleagues speak the other day. It was a complete distortion field of the truth and what was going on out there. They say all the healthcare is going to go up this much.

Are they willing to admit they screwed up? They created an absolutely distorted model. By screwing up all the incentives, everyone's healthcare costs went up, even though the ACA, ObamaCare, is only this little wedge here. It is 7 percent of the healthcare population.

The vast majority of the other population gets it through their employer, veterans, Medicare, and Medicaid. Then I need my colleagues to see this other wedge there. That is the portion that is not getting subsidies from taxpayers. The rest of this right here is getting subsidized.

I will show a chart in a moment where 41 percent of this population that is being subsidized in the ACA had no premium at all. You as a taxpayers bought their healthcare. Is that really what the Democrats promised us? Does anyone remember President Obama saying that healthcare premiums will be lowered by \$2,500? Folks will get to keep their doctors. Should we hold the left to their own standards?

As conservatives, we need to get off our heinies and start explaining that if we continue this model, we are all screwed. We need to step up and say we can do this better. We have technology where we can lower premiums rather dramatically. I have been coming behind this microphone for a decade. I will try to go fast enough to touch on it.

I did this board the other day. I just need to show you this is what they call an economic scoring of the enhanced premium tax credits, which is basically the subsidies on top of the subsidies.

Functionally, only 38 percent of that \$40 billion is actually going to cover actual insurance where people are going to use it. The vast majority of it just disappears. It either doesn't get used, or it may have disappeared with the brokers or the insurance companies. Something is horribly wrong in this money.

Yet, when we actually start to look at the studies and articles, here is the GAO report about the ACA. It has a simple line here.

"Patient Protection and Affordable Care Act: Preliminary Results from Ongoing Review Suggest Fraud Risks in the Advance Premium Tax Credit Persist."

□ 2150

Then you read it, Mr. Speaker, and it is page after page after page of different types of fraud. People have been signed up and had no idea. Brokers are going to prison right now because they have been signing up folks in the system.

"ObamaCare Is a Mecca for Fraud," The Wall Street Journal from just a couple days ago. "Open Enrollment is Healthcare's Most Expensive Lie."

How many more studies do we need to explain that you are being defrauded, Mr. Speaker?

If this were helping people be healthier, then bless it, but, instead, the Democrats are terrified to tell the truth because the model they built is only 7 percent of the population. Almost one-half of that population is getting the healthcare for free, and it has created a distortion field of costs.

I will give you a simple test, Mr. Speaker. Ask yourself, go back 10, 15 years ago. Let's go do 10 years ago when the ACA goes into effect.

Mr. Speaker, how much have your healthcare costs, your insurance costs, changed?

Remember, Mr. Speaker, insurance is different from healthcare. How much have your costs changed?

Did they meet the promise that was given to you: We are going to make things more affordable.

It is not the Affordable Care Act, and that is the reality of the math.

So let's continue to walk through parts of this

The number of subsidized zero claims is fascinating. The enhanced subsidies that came out after COVID were only supposed to be 5 years. The Democrats voted for this. I don't think a single Republican did. It was their plan. This was Democrat policy, and now they are acting all uppity saying: Well, you Republicans need to fix our mistake.

Almost 11 million who were part of that enhanced population never made a claim. We are now seeing studies, data mining, looking at a huge portion of these people had no idea they had been signed up. It is rampant fraud.

Let's have a little more fun here.

How many who were enrolled with these enhanced subsidies ended up having no skin in the game at all and who had no cost?

Last year, 41 percent had no cost. You, as a taxpayer, Mr. Speaker, paid for their healthcare. This year we modeled it. It is going to be around 39 percent. Think about that, Mr. Speaker.

Is that what you were promised? Is that what you were told?

As we start to walk through this, 6.4 million people this year were improperly enrolled in subsidized ObamaCare plans costing taxpayers \$27 billion a year.

Understand, Mr. Speaker, what this means. It is rampant fraud.

Mr. Speaker, how many members of the Democratic Party, the left, have you seen come behind the microphone saying: Hey, we really like subsidized healthcare, and we really like the level of fraud, so we don't want to change anything?

Mr. Speaker, 96 percent of all applications representing fake enrollees were approved on the ObamaCare marketplace and received subsidies. Understand, Mr. Speaker, do you remember, we were promised: Well, the website is going to find fraud.

It turns out that 96 percent of the fraudulent applications going in where someone is just bleeding the system got approved. The system doesn't stop the fraud.

This is your money, Mr. Speaker. You are paying for fraudsters, and you are paying for brokers who are going to jail.

Our debate here is: Well, we want to give another \$40 billion to the fraudsters, but there will be a portion of that that will get some buydown on their healthcare costs.

In 2023, one Social Security number—and I used this one just because it is so easy to understand. Remember, there is a system that is supposed to be mining this for fraud—one Social Security number was used and got 125 policies.

How do we not catch that?

We are really that bad at this.

I am not going to make you go through that.

Mr. Speaker, this chart is almost impossible to read. I am going to put it up on my website. What you need to understand is that these are the different ways people ended up in healthcare.gov or healthcare.care. The broker community goes and walks you through, but what we are discovering is that it has no actual checks for fraud.

Have the Democrats stepped up and said: Okay, we know a huge portion of this cash we were handing out after COVID has been disappearing. It is not going to make our brothers and sisters healthier and provide them access to care. Are they willing—no, they are not—to actually fix this system so we are not bleeding American taxpayers?

Now let's actually talk about some solutions

First, I need everyone to understand how perverse the system is. I have come behind the mike over and over and over and over and said: You have this technology that you can wear, this thing you can blow into, this thing here that can diagnose. This wearable here is actually more accurate than a human doctor. The Apple watch now is an FDA approved medical device for the heart, it should be allowed to prescribe. I need you to understand, Mr. Speaker, how perverse healthcare has become moneywise.

This one is absurd but it is easy to understand. Here are a couple of articles: Paper industry, drugmakers spar over requirement to print prescription forms.

Mr. Speaker, to show you how absurd the world has become, there was a simple attempt to say: We are just going to put your prescriptions on your phone so when you get them you can see all the side effects.

Mr. Speaker, do you know that all that paper that is printed? We had lob-byists here and a U.S. Senator who blocked it saying: No, my paper industry

When the paper industry was able to stop a simple money-saving reform because apparently cutting down trees and turning it into paper pulp and printing it is more important than something that would have been dramatically more efficient. It has gotten that absurd.

We attempted to basically run a piece of legislation because we did a study on how they duplicate MRIs, X-rays, ultrasounds, and CTs there are. We have some numbers that look like it could be as much as \$25 to \$35 billion a year.

Do something crazy. When you get your knee MRI, Mr. Speaker, put the data, the images on this so when you go to the next doctor a week later, it is right there: Doctor, let me hand it to you. Not get another scan.

We already have lobbyists running around the building saying: No, the duplicate scans are part of our profit model.

Where are my own brothers and sisters, particularly on the conservative side, saying: We want to unleash technology. We want to unleash doing this a better, faster, and cheaper way?

For those Members who run around saying: PBM reform. Fine, but understand that every study we have right now is that PBM reform saves a fraction of a fraction of money, and it is already happening.

Mr. Speaker, you will start to see companies now ditching the middleman and starting to sell directly. Go look up Civica RX for anyone who is in front of a computer. It is a co-op making drugs, selling insulin cheaper than our Federal Government-subsidized price.

The fact of the matter is legalizing, encouraging, and incentivizing disruption in the market is where you get all sorts of different channels. If PBM is the best price, God bless them. If the drug company wants to sell directly to

consumers, bless them. If a co-op wants to get together with your Medicaid system, the hospital system, or insurance company and they decide that we are going to manufacture our own and we are going to do it cheaper than the government-subsidized price, then bless them.

There are ways to crash the price of healthcare. We have one right here. It is a discussion of AI. AI went through someone's medical bills and started realizing how much mis-billing there was in there.

What if we did something very, very simple: Legalize one of my AI billing—we call it clean claims. Where here is the doctor's note, here is the insurance contract, they meet, and it gets paid.

How much staffing and other things would you save but also how much more money?

We have the technology. I just can't seem to get our brothers and sisters here willing to accept the bills.

Here is another one that is incredibly optimistic. If you have a subscription to Wired magazine this week—Mr. Speaker, and it is something we in our office have been working on for years now—they call it a fentanyl vaccine. It is not technically a vaccine. It is a protein binder that attaches to the drug making it so it can't pass the brainblood barrier. There is an entire article in Wired magazine.

We did some research. I had trouble believing this number. I had one of my economists actually go back and double check it: \$1.5 trillion in 2020 is the cost from fentanyl.

There are solutions, Mr. Speaker. We need to step up and start understanding there is a moral way to approach the cost of healthcare, and it is not a bunch more taxpayer subsidies. It is actually lowering the price.

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

$\square \ 2200$

ADJOURNMENT

Mr. SCHWEICHERT. Mr. Speaker, I move that the House do now adjourn.

The motion was agreed to; accordingly (at 10 p.m.), under its previous order, the House adjourned until tomorrow, Thursday, December 11, 2025, at 11 a.m.

EXECUTIVE COMMUNICATIONS, ETC.

Under clause 2 of rule XIV, executive communications were taken from the Speaker's table and referred as follows:

EC-2358. A letter from the Administrative Assistant, United States Coast Guard, Department of Homeland Security, transmiting the Department's final rule — Renaming of U.S. Coast Guard Districts [Docket No.: USCG-2025-0716] received December 3, 2025, pursuant to 5 U.S.C. 801(a)(1)(A); Public Law 104-121, Sec. 251; (110 Stat. 868); to the Committee on Transportation and Infrastructure.

EC-2359. A letter from the Administrative Assistant, United States Coast Guard, De-

partment of Homeland Security, transmitting the Department's temporary interim rule — Drawbridge Operation Regulation; Canaveral Barge Canal, Port Canaveral, FL [Docket No.: USCG-2025-0780] (RIN: 1625-AA09) received December 3, 2025, pursuant to 5 U.S.C. 801(a)(1)(A); Public Law 104-121, Sec. 251; (110 Stat. 868); to the Committee on Transportation and Infrastructure.

EC-2360. A letter from the Administrative Assistant, United States Coast Guard, Department of Homeland Security, transmitting the Department's temporary final rule—Safety Zone; Maumee River, Toledo OH [Docket No.: USCG-2025-0912] (RIN: 1625-AA00) received December 3, 2025, pursuant to 5 U.S.C. 801(a)(1)(A); Public Law 104-121, Sec. 251; (110 Stat. 868); to the Committee on

Transportation and Infrastructure. EC-2361. A letter from the Manager, Legal Litigation and Support, AGC-010, FAA, Department of Transportation, transmitting the Department's final rule — Revocation of Class E Airspace; Oakwood, TX [Docket No.: FAA-2025-2304; Airspace Docket No.: 25-ASW-10] (RIN: 2120-AA66) received December 5, 2025, pursuant to 5 U.S.C. 801(a)(1)(A); Public Law 104-121, Sec. 251; (110 Stat. 868); to the Committee on Transportation and Infrastructure.

EC-2362. A letter from the Manager, Legal Litigation and Support, AGC-010, FAA, Department of Transportation, transmitting the Department's final rule — Amendment of Class D and Class E Airspace, Establishment of Class E Airspace, and Revocation of Class E; Wichita, KS [Docket No.: FAA-2025-2232; Airspace Docket No.: 25-ACE-3] (RIN: 2120-AA66) received December 5, 2025, pursuant to 5 U.S.C. 801(a)(1)(A); Public Law 104-121, Sec. 251; (110 Stat. 868); to the Committee on Transportation and Infrastructure.

PUBLIC BILLS AND RESOLUTIONS

Under clause 2 of rule XII, public bills and resolutions of the following titles were introduced and severally referred, as follows:

By Mr. FLOOD:

H.R. 6547. A bill to amend the Federal Deposit Insurance Act to provide an exception to the least-cost resolution requirement, and for other purposes; to the Committee on Financial Services.

By Mr. THOMPSON of Mississippi (for himself and Mr. Garbarino):

H.R. 6548. A bill to amend the Homeland Security Act of 2002 to establish the Law Enforcement Mental Health and Wellness Program, and for other purposes; to the Committee on Homeland Security.

By Mr. BERGMAN:

H.R. 6549. A bill to amend title 38, United States Code, to limit the obligation or expenditure of funds by the Secretary of Veterans Affairs for certain purposes; to the Committee on Veterans' Affairs, and in addition to the Committee on Rules, for a period to be subsequently determined by the Speaker, in each case for consideration of such provisions as fall within the jurisdiction of the committee concerned.

By Mr. LOUDERMILK (for himself, Mr. BARR, and Mr. FLOOD):

H.R. 6550. A bill to require annual reporting on interactions between Federal banking supervisory agencies and global financial regulatory or supervisory forums, and for other purposes; to the Committee on Financial Services.

By Mr. LOUDERMILK:

H.R. 6551. A bill to require annual reports on national bank and Federal savings association charter applications, depository institution holding company applications, Federal deposit insurance applications, and