

HEALTH CARE

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from Indiana (Mr. BUYER) is recognized for 5 minutes.

Mr. BUYER. Mr. Speaker, the President and the Democrat leaders here in Congress are not listening to the American people. Today, our Nation's unemployment rate is 10.2 percent, the highest level in 26 years. This is an astounding level of unemployment. It tells only part of the story of the struggles Americans are experiencing and Washington is ignoring.

A deeper look at the unemployment numbers reveals the true costs of the Obama-Pelosi economic policies. The actual unemployment rate in America is 17.5 percent. When the currently unemployed, those who are unable to find work and those who have given up looking for jobs are included, it is 17.5 percent unemployment.

We must focus on the economy first. We should start by cutting government spending to shore up the U.S. dollar. We should encourage job creation in the private sector and increase private investment. We must rely on the proven methods to get our economy back on track such as an immediate tax relief, decreasing the capital gains tax rates, and reducing the tax burdens on small business.

We are living in an economy in despair as we face a two-front war. The President needs to address the economy first; and, as Commander in Chief, he needs to make a decision on Afghanistan.

Mr. President, you cannot vote "present" on Afghanistan. You need to make a decision.

Instead, he and the Democrat leadership are jamming legislation through Congress with massive spending increases, bailouts, greater government control of businesses, and job-destroying taxes and regulations, all while leaving our troops in limbo in Afghanistan.

Washington has it all wrong. Unfortunately, the President, Speaker PELOSI, and Senate Leader REID are proceeding with a 2,032-page bill that promotes the government takeover of health care; and most Republicans have been shut out of the process.

With little room for engagement, though, I have been successful to help improve a bill that I do not like. I have done this for a reason. It is because of our veterans. I have been able to provide important protections for our veterans and servicemembers who would have been significantly impacted by this health bill had the Democrats had their way at the beginning. I have been able to ensure that the veterans enrolled in VA health care cannot be hit with a 2.5 percent tax. Also, I sought to ensure that the VA is reimbursed by the government-run health plan for nonservice-connected care it provides to the veterans. I appreciate them including these amendments.

After succeeding with an amendment to ensure veterans and servicemembers

have the ability to obtain additional health care in the health insurance exchange created by H.R. 3962, my amendment was altered; and, under H.R. 3962, veterans' and servicemembers' choice of health insurance will be left to the administration to determine.

Again today I tried to fix this with an amendment, but it was denied in the Rules Committee. A number of veterans and military groups, including the VFW, share these concerns and support the amendment that I submitted to the Rules Committee today. I will include for the RECORD the letters from the AMVETS, Blinded Veterans Association and the Retired Enlisted Association.

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Our veterans and military organizations in support of the Buyer-McKeon amendments are the VFW, the Air Force Sergeants Association, MOAA, the Association of the United States Army, National Military Family Association, and the Enlisted Army National Guard, U.S.

Also, there are Members who are co-sponsoring these amendments: JERRY MORAN of Kansas, HENRY BROWN of South Carolina, JEFF MILLER of Florida, BRIAN BILBRAY of California, DOUG LAMBORN of Colorado, GUS BILIRAKIS of Florida, Dr. PHIL ROE of Tennessee, VERN BUCHANAN of Florida, and RODNEY ALEXANDER of Louisiana.

Our veterans have earned the VA health care as well as the liberty to choose whatever other coverage they prefer. I find it outrageous that the government would attempt to dictate where and how these veterans and servicemembers would obtain health care.

Additionally, under H.R. 3962, the authorities of the VA and DOD Secretaries are jeopardized, and the health care systems that they oversee could be affected by the new health care czar created in all but one section of this bill. Again, the Democrat leadership has not addressed this issue that I sought to address, and these amendments have been denied today.

As the Blinded Veterans Association stated in their letter to me: "It is critical to ensure that the authority of the Secretary of the VA and the Secretary of DOD could never be challenged or obstructed by any provision in the bill or by a Secretary or a commissioner from another sector of government."

Finally, it is important to note that under H.R. 3962, veterans and servicemembers enrolled in VA health care and TRICARE will not be eligible for the affordable tax credits . . . available to other Americans living under 400% of the federal poverty level. I submitted an amendment, which would have allowed individuals enrolled in VA health care and TRICARE to receive these tax credits, and this amendment was denied consideration by the Democrats.

I oppose H.R. 3962. This legislation restricts veterans' health care options and imposes a sweeping government takeover of our nation's health care system, and I support the Repub-

lican plan to improve our nation's health care and lower premiums, thereby increasing access to quality healthcare.

According to the non-partisan Congressional Budget Office (CBO), the Republican health care reform legislation would reduce health insurance premiums by up to 10 percent for employees working in small businesses, up to 8 percent for individuals who do not have access to employer-provided health insurance and up to 3 percent for employees who get coverage through large businesses.

All told, under the Republican plan, health insurance premiums would cost Americans nearly \$5,000 less than the least costly option under Speaker PELOSI's plan. All of this without a government takeover of our health care system and 1/6 of our nation's economy.

The Democrats' plan is not about insuring the uninsured or bringing down health care costs. In fact, under Democrat proposals in Congress, up to 114 million Americans could lose the private health insurance that they enjoy today, and CBO found that the House Democrats' bill will make health insurance more expensive than it is now, raising insurance premiums about 30 percent more than currently projected by the year 2016.

We must focus on the uninsured and the uninsurable. The Republican health care plan does just that by creating new health insurance options for small businesses—the economic engines of our economy—enacting real medical liability reform so that physicians can continue to focus on their patients and not junk lawsuits, guaranteeing affordable health insurance for individuals with preexisting conditions, protection seniors' Medicare benefits, and lowering health care premiums for all Americans.

Our nation's health care system can be improved without increasing taxes and jeopardizing the jobs we still have in America. The President and Democrat leadership in Congress must reorganize their priorities. They must stop focusing on job-killing policies. It is time to start listening to Americans and fix our economy first.

AMVETS,

Lanham, MD, November 6, 2009.

Congressman STEVE BUYER,
Rayburn House Office Building,
Washington, DC.

CONGRESSMAN BUYER: On behalf of AMVETS, one of the nation's largest and most inclusive veterans' service organizations, I want to express our support for your amendments to H.R. 3962, the Affordable Health Care for America Act.

Since health care reform legislation was first introduced, AMVETS has vocally called on leaders in Congress to ensure that any reform legislation would not have a negative impact on health care options for members of our military, veterans, or their loved ones. AMVETS believes that your amendments help to ensure that those who have served our nation are cared for appropriately.

When the most recent version of health care reform was released, AMVETS raised concerns on the clarity of the language and whether or not veterans and their loved ones would still have access to the health care exchange, should VA and military health care prove insufficient for their needs.

AMVETS believes that the three amendments you have offered today help to clarify language in the bill that members of the military and veterans will still have access to the exchange without penalty.

AMVETS fully supports your amendments to ensure that our nation's heroes have access to the quality health care they have earned.

Sincerely,

RAYMOND C. KELLEY,
National Legislative Director.

BLINDED VETERANS ASSOCIATION,
Washington, DC, November 6, 2009.

Hon. STEVE BUYER,
Ranking Member, Committee on Veterans Affairs,
Cannon House Building, Washington, DC.

DEAR RANKING MEMBER BUYER: On behalf of the Blinded Veterans Association (BVA), the only congressionally chartered veterans' service organization exclusively dedicated to serving the needs of our nation's blinded veterans and their families for sixty-four years, BVA is writing to express strong concerns about H.R. 3962, America's Affordable Health Choices Act of 2009. As currently drafted, without your amendments BVA would consider this legislation inadequate because it could limit the health care choices for veterans, and threaten veterans who currently utilize the high quality of VA health care offered to veterans through the VA health care system by forcing them into private insurance plans. Earlier this year, BVA along with five other congressionally chartered veterans service organizations wrote to support your amendments and serious concerns about provisions contained in the previous House health care reform bill, H.R. 3200 that could have had negative effects on veterans, their families, and the Department of Veterans Affairs health care system. BVA and other VSO's had been assured that key amendments by you including protection of veterans enrolled in VA would be retained as the bill moved forward and this is not the case today.

The Veterans Health Administration (VHA) provides medical care services to its 8 million enrolled veterans at more than 1,400 medical centers, outpatient clinics and other points of service. With over 270,000 employees, the VHA runs the largest integrated health care system in the United States, and over the past decade the quality of care provided has risen to amongst the finest health care systems in the nation. Under H.R. 3962, VA health care and TRICARE would be deemed "qualified" coverage but we point to this section as now written as it is ambiguous and could be interpreted to disqualify individuals enrolled in VA health care or TRICARE from participating in the exchange. This amendment was accepted at the Energy and Commerce Committee, but it failed to be included H.R. 3962.

It is critical that congress ensure in the current health care reform effort to ensure that the authority of the Secretary of VA and Secretary of DOD could never be challenged or obstructed by any provision in the bill or by a secretary or commissioner from another sector of government. As currently written, H.R. 3962, would provide for the Secretary of Defense and the Secretary of VA to retain sole authority over their respective health care systems only as it pertains to Subtitle A, the Health Insurance Exchange. The original Buyer Amendment adopted in Energy and Commerce Committee did this but the current legislation leaves this open and vague. Second key issue we support being amended is in section 342 of the bill to allow individuals enrolled in VA health care and TRICARE to be eligible for affordable tax credits. Currently, H.R. 3962 defines an "affordable credit eligible individual" as one who is not enrolled in acceptable coverage—which would exclude individuals enrolled in VA health care or TRICARE.

Unfortunately, as currently drafted, H.R. 3962 fails to adequately recognize, protect or

preserve this invaluable system for our nation's 24 million veterans. BVA once again supports Ranking Member Buyer amendments to ensure that veterans are protected. Enrollment in VA health care, especially in the case of service-connected disabled veterans, should never become a bar or obstacle to the receipt of benefits that non-veteran citizens receive in this or any other health care reform bill. Any national health reform legislation must make certain that all veterans, including all of those enrolled in VA health care, remain eligible to enroll in any Exchange-participating health benefits plan offered under H.R. 3200 through the Health Insurance Exchange, or in any other public or cooperative health insurance program.

The VHA provides a uniform medical benefits package to all enrolled veterans, regardless of their enrollment priority group, that emphasizes preventive and primary care, and offers a full range of outpatient and inpatient services and prescription medications. Accordingly, enrollment in the VHA health care program must be considered acceptable coverage in the same manner as members of the uniformed services and their dependents, including Civilian Health and Medical Program of the VA (CHAMPVA) coverage furnished under section 1781 of title 38 United States Code, so that they will not be subject to any tax or penalty for lack of health care coverage.

Finally, BVA would stress again, that it is imperative that any other health care reform legislation considered in Congress, must make clear that the health care system of the Department of Veterans Affairs shall be run by the Secretary of Veterans Affairs to meet the health care needs of veterans, dependents and survivors, and that this authority shall not be infringed by any national health care organizations or any other departments, agencies or independent organizations of the federal government.

Ranking Member Buyer on behalf of the Blinded Veterans Association membership we represent, and for the benefit of the millions of veterans living today and future veterans, we support the amendments you are offering today with your colleagues to clarify the current language in H.R. 3962 to protect the health care system of our veterans. Unless the changes and clarifications discussed above are made in the legislation, we will oppose movement of H.R. 3962 or any other legislation that could negatively impact the current health care system for our nation's veterans.

Sincerely,

THOMAS ZAMPIERI,
Director, Government Relations.

THE RETIRED ENLISTED ASSOCIATION,
Alexandria, VA, November 6, 2009.

Hon. STEVE BUYER,
Ranking Member, Committee on Veterans Affairs,
House of Representatives, Washington, DC.

DEAR CONGRESSMAN BUYER: The Retired Enlisted Association (TREA) shares the concern that H.R. 3962 does not ensure that veterans and TRICARE beneficiaries would have access to the Health Care Exchange, and that the same beneficiaries would be excluded from eligibility for "affordability credits". Thus, we do support amendments to the bill that would address these concerns.

While it is no doubt true that most veterans and TRICARE beneficiaries would not have a problem if the legislation were enacted as it currently stands, those who live in remote areas could find themselves in dire straits with regard to their health care without the changes you seek. These are precisely the people who frequently have difficulty in accessing the health care benefits

which they have earned and have just as much right to as every other veteran or TRICARE beneficiary.

Finally, we recommend that the language you propose to insert at the end of section 202 be changed from "EXCEPTION FOR VETERANS AND MEMBERS OF THE ARMED FORCES" to "EXCEPTION FOR VETERANS AND MEMBERS OF THE UNIFORMED SERVICES" NOAA and USPHS members are not considered to be members of the Armed Forces but are TRICARE beneficiaries.

Sincerely,

LARRY MADISON,
Legislative Director.

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from California (Ms. WOOLSEY) is recognized for 5 minutes.

(Ms. WOOLSEY addressed the House. Her remarks will appear hereafter in the Extensions of Remarks.)

HEALTH CARE

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from the Virgin Islands (Mrs. CHRISTENSEN) is recognized for 5 minutes.

Mrs. CHRISTENSEN. Mr. Speaker, this House and our Nation are poised for a historic vote tomorrow. That vote will determine whether tens of millions of people who are uninsured and underinsured will finally have access to health care. But beyond that, it will begin to transform the current sick care system which is draining this country, not just of its finances, but of some of its brightest and best who, because they are not able to access the fantastic health care this country has to offer, are not as productive as they would or should be.

It will enable many, those in our rural areas and our territories, those in blighted urban areas and racial and ethnic minorities who have been left out of the health care mainstream to finally have access to wellness and more productive and fulfilling lives.

Our vote tomorrow will also determine how successfully we will compete in the global community where everyone is in a race to the top, whether or not we will, through reducing the highest health care in the worlds, set our country on a more sustainable economic footing, and whether we can regain our leadership in this world by raising our health indicators, like infant and maternal mortality, to levels that match or better the other industrialized nations we now lag behind.

To me, a vote against this bill is a vote against what is best for our country.

No one ever thought we would have had a perfect bill, but what we have in H.R. 3962, the Affordable Health Care for America Act, is as near a perfect bill as anyone could have conceived when we started out this process. I applaud the outstanding leadership of our Speaker, our leader, our whip, our caucus Chair and vice Chair, the chairmen