bill. He spoke about wanting to make sure that insurance would be available across State lines. I think he referenced, or someone else on the other side referenced having high risk pools available, that we should address preexisting conditions, and we should offer coverage to children of families up to the age of 26. What is so interesting is that all of those proposals, each and every one of those proposals, are included in the health care reform measure that we will all have the opportunity to vote on this weekend.

Mr. LANCE, if he has the courage to vote with the Democrats, would be improving coverage for over 500,000 residents in his district. He would be giving tax credits to 74,000 families and 18,000 small businesses. He would be improving Medicare for 96,000 people in his district. Those are the kinds of figures that speak to the American people.

I reserve the balance of my time.

Mr. ROE of Tennessee. I yield myself as much time as I may consume.

Madam Speaker, I have spent the last 31 years before I came to Congress in the real world practicing medicine. So I know from where I speak. I have seen it, seen patients. I am probably one of the only people in this Chamber right now that has actually gone to an emergency room at 3 o'clock in the morning and seen someone without health insurance coverage and treated them, and treated numerous patients over the years without coverage. So I know that from a personal basis as a physician and just as a citizen.

Obviously what we are dealing with now is we are dealing with a very complex issue, health care. It is not easy. There is no question about that. I think the difference that we have, the gentlelady from California just pointed out some similarities, and that is where I think the American people would like us to start instead of this incredibly complex bill that the gentleman from Alaska read just a minute ago, only a portion of, that is incomprehensible.

There are two things you can do that would cover 20 million people, and we can do it on one sheet of paper and not have however many new bureaucracies and czars and agencies and IRS agents and all of that. And that is, which I wholeheartedly agree with, is allow young adults, I have had three in my only family do this, who graduated from college and didn't have insurance right after they got out, let those folks stay on, pick your number, 26, 27 years of age, on their family's health insurance policy. Simply sign up and adequately fund SCHIP, the State Children's Health Insurance Plan, and Medicaid. By doing those two things, you can cover 20 million people. This bill, as complex as it is, covers presumably 31 million people.

My concern with the cost is that one of the things that this bill does not do, it does not address costs. And let me just give you an example. When Medicare was established in 1965, the government estimates at that time was that in 25 years that bill would cost $15 billion. The actual cost of that bill, $90 billion. That was in 1990. The actual cost today, Madam Speaker, is over $500 billion. And we know that this bill is going to remove $500 billion, or approximately $500 billion from this plan.

Let me just tell you what begins to happen, and I have watched it in my own practice, in 2011. The baby boomers hit. Seventy-eight million baby boomers in the next 20 years, 35 million or more in the next 10 years, and you're going to provide the care they need with 500 billion less dollars. I don't think you get that math. The way I read that is that three things happen: Number one, you decrease access. Number two, if you don't get the access, you get decreased quality. And number three, you are going to increase costs because people are going to pay, if they can afford to, for the care that they are receiving.

As my friend Mr. LANCE brought out, malpractice reform is desperately needed. I am an obstetrician. I know that all too well, about how many of my colleagues have left the practice of delivering babies, one of the most fulfilling things. I have delivered almost 5,000 babies. And when I left my practice to come to Washington, I never felt like I had a job. It was a privilege to take care of patients and bring those young people in and watch them grow up and flourish in the community I lived.

Young doctors are not able to do that now because of the cost. And it is not in here at all. In our own State, where we have a mutual company, an insurance company, State Volunteer Mutual Insurance Company, which insures the doctors of Tennessee, since the inception of that company, over half the malpractice premium dollars have gone to attorneys, not to the injured party. Less than 40 cents on the dollar. Many of my good attorney friends have said, we need to do something about this. I agree.

So we don't disagree about what needs to be done; it's the method to get there. We are going to have a large government bureaucracy that is expanding a plan that is not working, which is Medicaid. And I have some very good ideas about what we should do for that. We shouldn't treat our Medicaid patients different than we treat other patients. I absolutely agree with that. Therefore, I would argue also we have the insurance industry—I am not going to sit up here and be a shill for them. I have argued with them for 20 years, 30 years about care. But I will point out one thing.

You can take all the profits, that is what I have heard for the last 3 weeks up here is the evil insurance companies, you can take every nickel that they make and it will run our health plan in America, our health, for 2 days. So what are you going to do the next 363 days? Only 2 days. Take them all and put them out, you only cover people for 2 days. So that is not the solution. It is just demonizing them. They need to shape up, there is no question about that. And competition will help that happen.

I know this is a great vote. I think it is one of the biggest votes that we have had in the last 45 years in America. The people in my district overwhelmingly oppose this bill by about 8-to-1. I am going to vote against this bill for the reasons that I have stated, and certainly would be willing to work with the other side, and asked to do that.

One of my great frustrations in coming to Washington, D.C., was to have spent over 30 years in the practice of medicine and not be included in the decision. The physicians caucus on our side, 10 doctors, 14—we have other folks other than M.D.s in that caucus—and the two Senators who are M.D.s, none were included in this discussion about health care. I think that was wrong. I think it was a mistake on the other side, and would have certainly liked to have brought over 300 years of experience to the table and discuss with them real solutions, positive solutions for health care.

I yield back the balance of my time.

Ms. SPEIER. Madam Speaker, in closing, I wish that the gentleman from Tennessee would have returned to the resolution that is before us in concluding his comments. We are here, as you know, to recognize the life and work of Donald Harington. And while we were trying to recognize the great work of an American novelist, we find ourselves drifting into a discussion of health care. But in any case, we are going to conclude this particular discussion by urging our colleagues to recognize the life and work of Donald Harington by supporting this measure.

I yield back the balance of my time.

The SPEAKER pro tempore. The question is on the motion offered by the gentlewoman from California (Ms. SPEIER) that the House suspend the rules and agree to the resolution, H. Res. 1040.

The question was taken.

The SPEAKER pro tempore. In the opinion of the Chair, two-thirds being in the affirmative, the ayes have it.

Ms. SPEIER. Madam Speaker, on that I demand the yeas and nays.

The yeas and nays were ordered.

The SPEAKER pro tempore. Pursuant to clause 8 of rule XX and the Chair's prior announcement, further proceedings on this motion will be postponed.

CLARENCE D. LUMPKIN POST OFFICE

Ms. SPEIER. Madam Speaker, I move to suspend the rules and pass the bill (H.R. 4840) to designate the facility of the United States Postal Service located at 1979 Cleveland Avenue in Columbus, Ohio, as the ''Clarence D. Lumpkin Post Office''.

The Clerk read the title of the bill.

The text of the bill is as follows:

H.R. 4840

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

SECTION 1. CLARENCE D. LUMPKIN POST OFFICE.

(a) DESIGNATION.—The facility of the United States Postal Service located at 1979 Cleveland Avenue in Columbus, Ohio, shall be known and designated as the ''Clarence D. Lumpkin Post Office''.

(b) REFERENCES.—Any reference in a law, map, regulation, document, paper, or other record of the United States to the facility referred to in subsection (a) shall be deemed to be a reference to the ''Clarence D. Lumpkin Post Office''.

The SPEAKER pro tempore. Pursuant to the rule, the gentlewoman from California (Ms. SPEIER) and the gentlewoman from North Carolina (Ms. FOXX) each will control 20 minutes.

The Chair recognizes the gentlewoman from California.

GENERAL LEAVE

Ms. SPEIER. Madam Speaker, I ask unanimous consent that all Members may have 5 legislative days in which to revise and extend their remarks.

The SPEAKER pro tempore. Is there objection to the request of the gentlewoman from California?

There was no objection.

Ms. SPEIER. I yield myself such time as I may consume.

Madam Speaker, I rise in support of H.R. 4840, a bill designating the United States Postal facility located at 1979 Cleveland Avenue in Columbus, Ohio, as the Clarence D. Lumpkin Post Office. H.R. 4840 was introduced by my colleague, the gentleman from Ohio (Mr. TIBERI) on March 12, 2010. It was referred to the Committee on Oversight and Government Reform, which reported it by unanimous consent on March 18, 2010. It has bipartisan support from 17 Members of the Ohio delegation.

Mr. Clarence Lumpkin was born in 1925 and spent years as a community activist in Columbus, Ohio. He is often affectionately referred to as the mayor of Linden, a neighborhood in the northeastern part of the city. Among his many accomplishments, Mr. Lumpkin has helped the Community Development Block Grant task force, persuaded the city to separate storm and sanitation sewers to stop basement flooding, led anti-drug marches throughout Columbus, made Linden the first inner city community with lights on every residential street, and improved the Linden area by including the Point of Pride concept that was first shared with city leaders in a speech given in 1974. Before moving to Linden, Mr. Lumpkin served in the United States Army, and he is a veteran of World War II.

Madam Speaker, Clarence Lumpkin has spent his life serving his community and his country, doing everything he could to improve the lives of his fellow citizens. I urge my colleagues to join me in honoring this great American by supporting this resolution.

I reserve the balance of my time.

Ms. FOXX. Madam Speaker, I yield myself such time as I may consume.

Madam Speaker, I rise today in support of H.R. 4840, introduced by my colleague from Ohio (Mr. TIBERI), designating the United States Postal Service located at 1979 Cleveland Avenue in Columbus, Ohio, as the Clarence D. Lumpkin Post Office.

Growing up in the poor rural south in a family of sharecroppers, Clarence D. Lumpkin has had his fair share of challenges, but that has never deterred him from moving ahead. Mr. Lumpkin picked cotton as a youngster from sunup to sundown, served lunch to turpentine workers, and at the age of 10 lost his mother, who had been bedridden for most of his life.

He entered the first grade at 12 years old. Hungry for knowledge, Mr. Lumpkin was a model student who studied constantly. After graduating from high school, Mr. Lumpkin joined the Army, where he served in New Guinea during World War II. After the war, he moved to Ohio, where over a period of 41 years he worked a number of jobs, finally retiring as chief of the enforcement division in the Department of Highway Safety's Bureau of Motor Vehicles.

Mr. Lumpkin is a remarkable man who came from a very difficult childhood and turned his experience of hard work into service to his country in the Army and lifelong service to his community, where he has truly made a difference every day in people's lives. In gratitude for his service, I ask all Members to join me in supporting H.R. 4840.

I reserve the balance of my time.

Ms. SPEIER. I continue to reserve the balance of my time.

Ms. FOXX. Madam Speaker, I yield myself such time as I may consume.

Madam Speaker, as my colleagues have said today, and I have mentioned, also, we are here this week, we are here on a Friday afternoon, we are not normally here, because our colleagues across the aisle, along with the President, have decided that it is time for the government to take over one-sixth of our economy and to institute a government-run health care plan in this country. We have talked about this before, but this is the wrong way to go.

The American people do not want this plan. And why are we being kept in town on a Friday afternoon and being told we will probably vote on Sunday? Because despite the fact that the Democrats control 253 seats and need only 216 votes, they cannot get their colleagues to agree with them to vote on this terrible bill.

□ 1600

They, again, try to blame Republicans for the situation that we're in, but they cannot do that. The American people are paying attention, they know about the Slaughter rule, they know the tricks and chicanery that are being used to get people to vote for this bill that Americans do not want. But we've raised the awareness of process as well as substance here.

And I want today to talk about even a person in this great State of Massachusetts who has predicted that passing this bill will be a disaster. There was an article in The Boston Globe on March 17, 2010, that talks about State treasurer Timothy Cahill who was, until recently, a Democrat but who has become an Independent candidate for governor, who has said that the State's universal health care law is bankrupting Massachusetts and will do the same nationally if Congress passes a similar plan. ''If President Obama and the Democrats repeat the mistake of the health insurance reform here in Massachusetts on a national level, they will threaten to wipe out the American economy within four years.'' That is a statement that he made at a press conference.

He went on further to criticize the 2006 health care law and said—he started last summer when he began to think about running for Governor. His criticism has echoed that leveled by Senator SCOTT BROWN during his run for the U.S. Senate.

Another quote from Mr. Cahill. ''It is time for the President and the Democratic leadership to go back to the drawing board and come up with a new plan that does not threaten to bankrupt this country.''

Many people are understanding exactly what Mr. Cahill is talking about. They know that this is not the direction to go.

Another quote from Mr. Cahill in this article says, ''The real problem is the sucking sound of money that has been going in to pay for this health care reform. And I would argue that we're being propped up so that the Federal government and the Obama administration can drive it through.'' He says in this article that the only reason they've been able to survive in Massachusetts is because the Obama administration is pumping money into Massachusetts, as he said, to keep it going in order that they can get their own health care plan through, which will be a disaster.

I want to point out further that our own chairman of the Rules Committee said herself last year that the Senate has ended up with a bill that isn't worthy of its support. And she said then in an op-ed, Supporters of the weak Senate bill say just passing any bill is better than no bill. I strongly disagree. It's time that we draw the line on this weak bill and ask the Senate to go back to the drawing board. The American people deserve at least that.

Mr. Speaker, I agree with that statement of the esteemed chair of the Rules Committee, Ms. SLAUGHTER. I believe that Americans know that they deserve a better life. They know that our freedom is at stake. They know they are not more secure than they were 3 years ago when the Democrats took control of this Congress. They

know that their taxes are higher and will go higher.

Mr. Speaker, it's time that we stop the charade of saying that this health care bill is going to help the American people and admit to the fact that it is going to destroy jobs, bring down our economy, and take away the freedom that Americans have to choose their health care.

With that, I reserve the balance of my time.

Ms. SPEIER. Mr. Speaker, I yield to the gentleman from New York (Mr. TONKO) as much time as he may consume.

Mr. TONKO. I thank the gentlewoman from California for the opportunity.

You know, when I listen to the discussion on this floor, when I hear my friends from the other side of the aisle talk about the great plan that they have put forth, I think I need to share with the American public that their plan means 50 million Americans will go without health care coverage. I think that's an important distinction here.

And also when we talk about their plan, to me it translates to higher costs, it translates to reduced consumer protections, and it also speaks to no regulations on an industry that has had record profit columns over the last couple of years.

So I think our bill states very emphatically that we're about changing the course of direction. We're about putting individuals, families, doctors, in control of the health care outcome—not government, not insurance companies. So this effort to empower the insurance companies is not the solution America is looking for. It is not the solution.

They are looking for a thoughtful, academic approach. The Democrats in this House have put forward a sound plan. The Speaker, to her credit, has taken the input from the Members of this majority and advanced them to the United States Senate and to the White House, and we have been able to achieve, on behalf of the people of this great country, situations that allow us to control those skyrocketing costs to make certain that, again, our families, our individuals, our doctors, are making those decisions and not the greed of insurance companies.

We want to make certain that as we go through this effort that we provide assistance to those who are struggling in this economy. In fact, in my district, I can look at a family with an average annual income of $50,000 and state to them that with this measure, they will realize a $5,800 benefit, a tax credit, to help them afford their health care costs. That is monumentally important to that family.

It also speaks to the ''whose side we're on.'' When a person comes to a situation, a catastrophic situation in their life, they need to know that they have access and affordability and quality care that is their option.

So when someone with acne is asking to be insured, our House, our majority, says yes, you should be insured. The other side says ''no.'' When someone says that our health care costs are driving bankruptcy for American families, when we say there should be a cap on out-of-pocket expenditures, our side says ''yes,'' their side says ''no.'' When we speak to gender discrimination on the rating of premiums for women, especially in childbearing years, our side with a very sensitive concern says ''yes'' to giving them more fairness in the equation. The other side says ''no.''

So it continues to go on and on, and the American public needs to know that what this debate is about is providing control to the American families, the working families of this country, enabling them not to be put into bankruptcy because of catastrophic illness, enabling them to have access to health care coverage, enabling them to be strengthened by Medicare improvements where their pharmaceutical needs will be met if they're Medicare eligible, where the Medicare trust fund is stabilized. That's what this measure does.

And let me finally close with the impact on small business. We ask our small business to be that response team to drive us out of the economic woes.

This President, this Congress inherited devastating deficits from the previous administration. And so it's important for us to rebuild the economy. Many, myself included, profess that small business is the backbone of our economy, is the springboard to economic recovery. Well, we're dulling the competitive edge simply with health care costs that are crippling to our small business community.

So we need improvements with the exchanges that are developed with this proposal. They are then enabled, as individuals or small businesses, to enter into an exchange. Think of it. A small business of 5 or 10 employees can be crippled by catastrophic situations. Their premiums could rise exponentially simply because of 1 of 5 or 1 of 10 employees being impacted severely by a health situation. By entering into a pool, into an exchange, that is diluted a great deal. The ebbs and flows are neutralized. And so the impact is a favorable one for our small business community. They realize the benefits of a sounder, more modest premium because they're into an exchange. So there are many improvements.

But it's about greed. We say ''no'' to greed. Others say ''yes.'' It's about fairness. We say ''yes'' to fairness. Others say ''no.'' It's about strengthening that Medicare. We say ''yes.'' Others say ''no.''

I am proud to stand here this afternoon on this House floor to say that by working with my colleagues, with the leadership, verbalizing the strength of our ideas and our passion to make a difference. We have a very sound bill before us.

Let's deal with fact, not fiction. Let's insert ourselves with a sense of compassion for all people in this country. This is a historic moment waiting to happen here on this Hill in Washington, and I am proud to serve in this House and to have had the response that we have had.

Thank you, Representative SPEIER, for the opportunity to join you this afternoon.

Ms. FOXX. Republicans are not saying that we don't need to do something to reform health care. We all agree with that. We need to do something to reform it. We have commonsense solutions. And compassion begins with preserving freedom. Don't tell me you're compassionate when you want to take away the people's freedom. That isn't compassion.

I would now like to yield 3 minutes to my colleague from New Jersey (Mr. GARRETT).

Mr. GARRETT of New Jersey. I thank the gentlelady.

In my hand right here—and the chairman may know what I have here—is a document from your side of the aisle which basically is your talking points to your communication folks and the like saying that you want to talk about information. The memo actually says to your Members, We cannot emphasize enough, do not allow yourselves to get into a discussion of the details of CBO scores or any other such narratives. It continues to say, Do not give them—meaning Republicans or the media and such—grounds for debating the issue. Isn't that fascinating that, after all of this, the truth comes out?

The fact of the matter is that you do not want to discuss the details. You do not want to get into the facts of the matter. You want to talk in hyperbole and rhetoric.

Well, let me spend my next 2 minutes telling the American public what the actual details are and what the CBO says about your bill.

Number one: Delayed benefits, immediate taxes. This bill raises taxes before any other major benefits would go into effect. Ninety-eight percent of the major benefits don't start until 2014, but we immediately start taking taxes out of the American public's pocket.

Two: The CLASS Act has been described by Members of their House, Senator CONRAD, as a Ponzi scheme. Why is that? Something in there called the CLASS Act appears to make the bill cost less than it does because, as the CBO states, the program would pay out far less in benefits than it would receive in premiums under the 10-year budget window.

What does that simply mean? That means we will be collecting taxes for years and years and years before we actually pay out any benefits.

Thirdly, no doc fix. I've heard other people talk about that. That 10-year doc fix will cost $371 billion. If you really want to talk about the facts—as obviously you do not want to—you

would have included the doc fix in here to give us a better picture of what this bill costs.

Raid on Social Security. A raid on Social Security in this bill, in the presentation that you're making. I also heard somebody talk about AARP. Where are they talking about the fact that in your presentation on the numbers, they rely on $53 billion in new Social Security revenue to achieve the appearance, only the appearance, of deficit reduction.

□ 1615

The fact of the matter is these revenues are meant to stay and pay for Social Security benefits, not to fund a new entitlement.

Fourthly, double-counting of Medicare savings benefits, the other side of the aisle claims that $520 billion in Medicare cuts and $210 billion in Medicare taxes in the bill will improve solvency of the Medicare trust fund. But that's not the case. You're double-counting. Look, either Medicare savings improves solvency on the one hand, or they pay for this brand-new entitlement. You can't have it both ways. But I guess that's why you don't want to get into, as your very own talking point memo says, do not get into discussing the details.

One last one, if time permits, your legislation relies on unrealistic budget cuts. This is not my suggesting that. This is what your very own actuary at HAS says.

The SPEAKER pro tempore (Mr. LUJÁN). The time of the gentleman has expired.

Ms. FOXX. I yield the gentleman 10 additional seconds.

Mr. GARRETT of New Jersey. Your very own actuary said this, that the level of cuts was ''unrealistic and finally jeopardized access to care for senior citizens.'' That's not me saying this; that's not this side of the aisle. That is your very own actuary saying what your bill will do is jeopardize care to senior citizens. When you begin to discuss the details, you will agree to vote ''no'' on this bill.

ANNOUNCEMENT BY THE SPEAKER PRO TEMPORE

The SPEAKER pro tempore. Members are reminded to address their remarks to the Chair.

Ms. SPEIER. Mr. Speaker, I now yield 3 minutes to the gentleman from Florida (Mr. HASTINGS).

Mr. HASTINGS of Florida. Mr. Speaker, I thank my distinguished colleague from California.

The last time I looked, I thought we were talking about celebrating the distinguished career of an individual named Mr. Lumpkin and naming a post office. I understand the desperate need that our colleagues have to talk about what is about to take place in America that is particularly historic since they have had a negative drumbeat about it for the last 15 months.

Please know this, I hear all the time on the floor of the House what the American people want. If we put some harsh reality into it and took out this poll or that poll, what we would learn is that a significant number of the American people want this health care measure that we are talking about and, indeed, more. When I hear someone say that the American people don't want this, and I heard one of our distinguished colleagues earlier on the minority side say that people in his district don't want it, well, people in my district do. And so I guess he and I cancel each other out. And if you went through the entire body, I think you would find that the same thing exists.

Now, I also have ranted right here on this floor and I meant it to be such that people will understand. I don't want to hear anybody else say that what we are proposing is socialism. And when they talk about a tremendous government takeover, I particularly know that all of us know that Medicare is a government program, and every one of us experienced at some point in our town hall meetings people saying to us, I don't want the government in my life. And I say, are you on Medicare? And they say, yes. And I say, well, that's a government program. Medicaid is a government program. There are poor people in nursing homes. There are people that are sick that if they did not have Medicare, they wouldn't have anything.

So I ask my colleagues, whose side are you on? Are you really on the side of people who would argue that 32 million people that are going to be covered under the Democratic plan would not be covered if we did not do something, as I believe we are historically going to do? And, therefore, it's troubling to me. I gather that the National Institutes of Health is not a government program, the Center for Disease Control must not be a government program, the Army, the Pentagon, they must not be government undertakings. And so all of this talk about government as a person is very disturbing to me as a person.

The same thing that people raise here in their fear-mongering is the same thing that took place with reference to Social Security.

The SPEAKER pro tempore. The time of the gentleman has expired.

Ms. SPEIER. I yield the gentleman 1 additional minute.

Mr. HASTINGS of Florida. It is the same fear-mongering that took place about Social Security, oh, by the way, another government program. So it is not as if money is going to be evaporating. The same insurance companies that have made a ton of money are going to make two tons of money whether we pass this bill or not, and they have already in our faces shown us that they are willing to raise prices on the American people as desperate as we find them at this time.

I also want to put to rest this business about Slaughter House rules. I serve with Ms. SLAUGHTER, and I'm honored to do so. And what I think people must not have done is read ''Slaughterhouse-Five.'' In ''Slaughterhouse-Five,'' there is a bird who says, poo-tee-weet, p-o-o-t-e-e-w-e-e-t. The jabbering bird symbolizes the lack of anything intelligent to say. Thank you very much. Poo-tee-weet.

Ms. FOXX. Mr. Speaker, I think the gentleman from Florida has made our case by bringing up the fact that Medicare is a government program. It's going broke. Medicare costs were 20 times more than what was estimated for part of the program, seven times more for part of the program, 2½ times more for part of the program. The gentleman from Florida has made our case on this issue.

I now would like to yield 3 minutes to the distinguished gentleman, the former attorney general of California, Mr. LUNGREN.

Mr. DANIEL E. LUNGREN of California. I thank the gentlelady for yielding.

Mr. Speaker, hosanna and hallelujah. We have just heard the solution to all of our problems. It's spelled g-o-v-e-r-n-m-e-n-t, government. What I just heard from the gentleman from Florida is all of our problems will be solved by government. If you have a program, make it larger. If you have three, let's have six. If you have Medicare going broke, let's make it go broke faster. If you have Medicaid going broke, let's make it go broke faster. If you have Social Security, which just this last week now is having to cash in the IOUs because it's in a deficit position on an annual basis, then just make it larger.

The American people are smarter than that. The gentleman talks about the fact that he doesn't know where these American people are that are against this bill. I guess he has amnesia. I guess he wants to join the Speaker in pretending that August didn't exist. Those town halls were made up of cut-out figures. They weren't real people. The folks that are calling our offices are not real people. The 1,000 emails I got in 2 days this week in which 59 of them were in favor of the bill and everybody else against, I guess they don't count.

This is funny since we happen to be representing the people in the people's House, supposedly, although it's hard to tell if we're going to do the Slaughter rule which suggests that we won't even have an opportunity to truly vote on it.

And by the way, the Constitution says that we are supposed to initiate revenue-raising bills, not the Senate. So they took a bill in the House, kept the label on it, took everything out, every single word of content, and put a whole new bill in, and sent it back to us. That is called bait and switch if you're someone in the private sector.

The American people are asking for more. So it is interesting to hear much of the histrionics on the floor. But the fact of the matter is every single national poll shows the American people don't want this bill.

Now, the canard that we are hearing is therefore you don't want to cover 32

million people. Untrue. We have a better plan. We have a plan that doesn't go to Big Government. It goes to Big Competition. It goes to the individual rather than the government. I am not one who hates government; but I do believe this, when government gets inordinately larger, the individual gets smaller. That is not the essence of America established in our Constitution.

Now, some people want to just throw that out and say, government is the answer, government is always better, so we can combine the worst parts of our health care system with the worst parts of the post office, with the worst parts of the Internal Revenue Service, and we will get what? The bill that we are going to not have a chance to vote on except sort of vote on it. But we all know what it means.

I thank the gentlelady for the time.

Ms. SPEIER. Mr. Speaker, I would like to inquire how much time both sides have remaining.

The SPEAKER pro tempore. The gentlewoman from California has 8 minutes remaining. The gentlewoman from North Carolina has 4¾ minutes remaining.

Ms. SPEIER. Mr. Speaker, I now yield 3 minutes to the gentlewoman from Maine (Ms. PINGREE).

Ms. PINGREE of Maine. Mr. Speaker, thank you to the gentlewoman from California for allowing me this opportunity to talk a little bit about the topic that has taken over our debate about a post office today. Normally, we would be discussing the naming of a post office; but because we are on the eve of this historic vote and very likely to proceed forward on the issue of reforming our health care system, we have been spending most of the day talking about that. And I just want to say in spite of the rhetoric and the anger that flares up across the different sides of the aisle, I personally, as a freshman Member of this legislature, can't imagine my good fortune to be here, to be here this weekend with the hopes that we may finally move forward on reforming our health care system.

I feel like the first entire year and a half I have been in office, more than anything else in my district, people say to me, when are you going to do something about that health care bill? When are you really going to fix the system? And much of this comes from people who are struggling in this economy. They are out of work. They are worried about being out of work. They are small business owners trying to figure out how to cover the cost of health care.

I have been working on this issue for a lot of years, and I can't believe how exciting it is that we might be here this weekend and finally move forward on reform.

I think back to 1992 when I, like my colleague from California, was a former member of a State legislature. And in 1992, I was running for office for the first time as a State legislator, and it was the number one issue that year. President Clinton, the future President Clinton, was running for office talking about reforming the health care system. Every door I knocked on in the 19 towns in the legislative district where I ran, people said something to me about the cost of health care. And think of that, that was almost 20 years ago. If they thought costs were high then, if small business owners thought it was difficult to cover their employees, what does it look like today?

I got elected to that State legislature. And for 8 years, my State, the State of Maine, struggled to reform the health care system. We created our own plan, the Dirigo health care system, to expand the number of people we covered. We passed a bill to regulate the price of prescription drugs, to negotiate for a better price for prescription drugs. And what did we get from Congress? We got a failed health care plan in the nineties, and then we got 8 years of a majority party that decided not to do anything.

In fact, when they decided to do something about prescription drug pricing, they said you can't even negotiate with the drug companies. They didn't do anything to lower costs, and they decided in the dark of the night to do something about that.

But here we are today. We have the chance to begin to close the doughnut hole in the prescription drug plan. That will take effect when we pass this bill. That will begin to take effect and completely close by 2020.

We are going to be able to move forward on advances in Medicare, eliminate copays for preventative care under Medicare. We are going to see real savings for our senior citizens, and I can't be more excited than to go back and say to my State legislators, do you know what? We've finally done something at the Federal level. We are going to do something to help a struggling State like Maine.

The SPEAKER pro tempore. The time of the gentlewoman has expired.

Ms. SPEIER. I yield the gentlewoman 1 additional minute.

Ms. PINGREE of Maine. I can't tell you how happy I will be to go back and tell those State legislators who have tried to carry on in the face of this difficult era in a State where jobs are being lost, where businesses are struggling to cover people, they're saying to me, when I visit the State legislature, they are saying, when are you going help us at the Federal level? When are you going to realize that you are part of the responsibility as our State as struggled to cover those costs?

Do you know what is really exciting? I hear every day people say, nobody in America wants this. Well, the fact is when I go back and talk to small business owners, individuals who have coverage, individuals who struggle with their insurance company dropping their coverage, I hear people who say, do something about it. In fact, in my State, people think we haven't gone far enough. When they polled the doctors in my State, these are physicians, and we have heard a lot of talk about doctors today and what they would do, the physicians in my State, over 50 percent of them say, why don't you do single-payer health care? They say this isn't going far enough.

So the fact is, I couldn't be more excited to be here this weekend. In fact, I think it's my responsibility, not to complain about being here on a Friday afternoon.

The SPEAKER pro tempore. The time of the gentlewoman has again expired.

Ms. SPEIER. I yield the gentlewoman 30 additional seconds.

Ms. PINGREE of Maine. I'm not complaining about being here on a Friday afternoon. In fact, my constituents would say to me if I went back home, why don't you get down to Washington and finish the job? Why don't you get down there and handle this difficult issue, go through all the difficult procedural issues, do what you have to do to pass this bill? And by Sunday afternoon or Sunday evening, I want to see you casting a vote to reform the health care system to change the way our insurance companies do business, to help out struggling State budgets, and to make sure that people in this country once and for all have coverage for health care and we move forward in our system.

□ 1630

Ms. FOXX. Mr. Speaker, I just want to point out to the gentlewoman from Maine that Republicans did a lot when they were in control, and what got stopped was because of Democrats in the Senate. We passed health savings accounts which give people individual control, Medicare part D which Democrats voted against because there was the private sector involvement.

And I guess we are going to get the same kind of results from the promises of this that we are getting from the stimulus bill. Her State is in such bad trouble because the President's stimulus plan, which was not going to allow unemployment to go above 8 percent, has failed so badly.

ANNOUNCEMENT BY THE SPEAKER PRO TEMPORE

The SPEAKER pro tempore. Members are reminded to address their remarks to the Chair.

Ms. FOXX. I now yield 2 minutes to Dr. CASSIDY from Louisiana.

Mr. CASSIDY. Mr. Speaker, I think my perspective might be a little bit different. In fact, when my colleague was speaking about physicians, I was sitting here thinking I am a physician. And not only am I a physician, but I have actually been working to treat the uninsured for the last 20 years. My practice has been for the uninsured, so it is a little bit different. And one reason that I ran for office is I was frustrated with the way that politicians always dealt with health care.

It is a truism: Politicians overpromise and underfund. We can see

that with Medicare going bankrupt in 7 years. We can see that with Medicaid bankrupting States. And I saw that in my practice, because everybody would be promised these benefits, and in my practice I could not get them for them. Inevitably, quality and access suffered.

But we are told now it's different. We are told, No, believe us this time we are going to adequately fund. We are going to adequately fund by taking $500 billion from Medicare to create a new entitlement.

Wow, we are really doing a lot for Medicare there, aren't we?

We are going to expand Medicaid; Medicaid, which is bankrupting States. So now, instead of somebody having no insurance and being unable to see a physician, we are now going to give them Medicaid. But we are going to have to decrease payments so much that we are going to raise taxes, costing jobs, and they still won't be able to see a patient.

I say that because The New York Times had a heartrending article about a woman on Medicaid in Michigan, and payments are so low she can't get cancer treatment. When I hear we are taking care of the 31 million people without insurance, I think of that woman on Medicaid in Michigan with a government-funded—no, I am sorry—with a government-underfunded policy with which she cannot gain access.

If that is morality, we must have a different definition of morality. It is morality for show. It is not morality for reality.

Now, there are alternatives. And another frustrating thing about this debate is that actually we know what works. We can look at Massachusetts, where they attempted to expand access.

The SPEAKER pro tempore. The time of the gentleman has expired.

Ms. FOXX. I yield the gentleman 1 additional minute.

Mr. CASSIDY. In Massachusetts, they attempted to expand access and control costs. That is this plan. And what we just heard in Massachusetts is the Democratic treasurer saying this plan will bankrupt our Nation in 4 years.

Alternatively, what we can also say is that we know what works. The Kaiser Family Foundation did a study in which they found that health savings accounts lowered costs by 30 percent and that 27 percent of people with health savings accounts—27 percent of people with health savings accounts were previously uninsured. By lowering costs, we expanded access.

We know what works. The plan they proposed has already failed. The plan we proposed, there is data to show it works.

Now, we can talk about the Congressional Budget Office report that supposedly saves money, 10 years of tax revenue for 6 years of big government programs. That is a savings. Or, in 2018 it saves money by pushing the cost of Medicaid out onto the States. That saves money.

The SPEAKER pro tempore. The time of the gentleman has again expired.

Ms. FOXX. I will give the gentleman 30 more seconds. That leaves me 30 seconds, Mr. Speaker?

The SPEAKER pro tempore. The gentlewoman is correct.

Mr. CASSIDY. In my State, the first 3 years we are responsible for these additional costs is going to cost my State $600 million. Well, that is a savings to the taxpayer. Now it is just the State taxes that are going up instead of the Federal taxes.

Now, there are bipartisan solutions. I challenge my colleagues, let's take a break. Let's go home Sunday and Monday and Tuesday and come back Wednesday. Let's have a town hall meeting, each of us in our districts, hear from our people back home what solutions they want to see and come back and vote on Thursday. Somehow, I think that these people who are on the bubble will learn that they should be representatives and not dictators.

Ms. SPEIER. Mr. Speaker, I yield 2 minutes to the gentleman from New York (Mr. WEINER).

Mr. WEINER. I rise to pay tribute to Clarence Lumpkin. This is a great day for the State of Ohio. The mayor of Linden deserves to have a post office named for him for all his service.

I do hate to pollute this debate with facts. I am really almost hesitant to do so. The previous speaker pointed out an inequity that exists that, frankly, Medicaid doctors don't get reimbursed enough. We are fixing that in the reconciliation bill, so I trust my colleague will be voting for that, because it increases the reimbursement rates for people that we are expanding coverage to so that doctors get paid at the Medicare rate.

Do you know what you won't hear today in this conversation about the post office? Is that Mr. Lumpkin, who we are honoring today, I think is about 70 years old.

Mr. CASSIDY. Will the gentleman yield time?

Mr. WEINER. Certainly. We don't have a lot.

Mr. CASSIDY. I understand, and I appreciate it.

When you say that we are going to give a raise for primary care physicians, that is actually not included in this in terms of the Medicaid costs, so State Medicaid costs are now going to go up.

Mr. WEINER. Reclaiming my time to inform the gentleman that he is wrong.

Mr. CASSIDY. Will the gentleman yield?

Mr. WEINER. No. After yielding, it wasn't much of a payoff.

Mr. CASSIDY. We will get back to the facts later.

Mr. WEINER. It wasn't much of a payoff.

Mr. CASSIDY. Believe me, if you yield again, it will be.

Mr. WEINER. Mr. Lumpkin, who we are honoring today, if it were up to the members of the minority party, Mr. Lumpkin would not have Medicare, would he? He would have had Social Security privatized.

Now, I couldn't help noticing that not long ago the ranking minority member of the House Budget Committee, a Republican, floated a plan that for once, at least, was honest about the intentions of the Republicans. It said, Cut off Medicare. End it as a program we know. And I know that the previous speaker doesn't like it. A lot of my constituents believe it is a very worthy program. Ninety-six percent of all beneficiaries who were surveyed last year said they like it. But the Republicans say, No, we want to eliminate it.

And let's not forget how many of them signed on the dotted line to privatize Social Security. Boy, that seems smart, huh? Investing Social Security in the stock market. Now, that is a far-reaching idea.

Now, Mr. Lumpkin, who, God willing, will live another 20, 25 more years, he is going to be able to see Medicare for the rest of his life, thanks to the bill we are going to pass in short order, and no thanks to the votes of the people on the other side of the aisle who would deny him that.

Now, you may not like Medicare, but come out and say it. Don't say we are going to propose privatizing it. Let's see what you do. Can you get a majority over there to stand up, to come out from behind the artifice and to say—forgive me. Will the Speaker ask——

The SPEAKER pro tempore. The time of the gentleman has expired.

Ms. SPEIER. I yield the gentleman 25 additional seconds.

Mr. WEINER. Look, the fact of the matter is there are differences of opinion here and they are philosophical and deep felt. We believe in Medicare; we created it. You opposed it at the time; you oppose it now. We support Social Security.

I would direct my remarks to the Speaker. Can you inform them that they opposed Social Security then; they oppose it now.

This is a philosophical divide. And every single member of the minority party has said that they are going to do anything they can to stand up in defense of the health insurance industry. That is a consistent position. We disagree with it, and Mr. Lumpkin is going to have Medicare for the rest of his life, which should be long.

The SPEAKER pro tempore. The gentlewoman from North Carolina is recognized for 30 seconds.

Ms. FOXX. Mr. Speaker, the good Lord gave us two ears and one mouth for a reason.

If our colleagues would listen, they would hear us say we don't want to do away with these programs. We want to save them.

Mr. Speaker, I urge all Members to support the passage of H.R. 4840.

I yield back the balance of my time.

The SPEAKER pro tempore. The gentlewoman from California is recognized for the remaining 1 minute.

Ms. SPEIER. Mr. Speaker, I find that we are incapable of doing what we were here to do, which was to pass a number of suspension measures, this one for Clarence Lumpkin. God bless him for having to listen to this debate, but we are, in fact, very supportive of this resolution.

I just want to remind my colleagues that government-run programs are not bad, because Medicare is a government-run program, Medicaid is a government-run program. The veterans in this country embrace a health care program that is among the best in this country; again, a government-run program. Being government-run is a good thing.

I yield back the balance of my time.

The SPEAKER pro tempore. The question is on the motion offered by the gentlewoman from California (Ms. SPEIER) that the House suspend the rules and pass the bill, H.R. 4840.

The question was taken.

The SPEAKER pro tempore. In the opinion of the Chair, two-thirds being in the affirmative, the ayes have it.

Ms. SPEIER. Mr. Speaker, on that I demand the yeas and nays.

The yeas and nays were ordered.

The SPEAKER pro tempore. Pursuant to clause 8 of rule XX and the Chair's prior announcement, further proceedings on this motion will be postponed.

NATIONAL WOMEN'S HISTORY MONTH

Ms. SPEIER. Mr. Speaker, I move to suspend the rules and agree to the resolution (H. Res. 1174) supporting the goals and ideals of National Women's History Month.

The Clerk read the title of the resolution.

The text of the resolution is as follows:

H. RES. 1174

Whereas the purpose of National Women's History Month is to increase awareness and knowledge of women's involvement in history;

Whereas as recently as the 1970s, women's history was rarely included in the kindergarten through grade 12 curriculum and was not part of public awareness;

Whereas the Education Task Force of the Sonoma County (California) Commission on the Status of Women initiated a ''Women's History Week'' celebration in 1978 centered around International Women's History Day, which is celebrated on March 8;

Whereas, in 1980, the National Women's History Project, which celebrates its 30th anniversary this year, was founded in Sonoma County, California, by Molly Murphy MacGregor, Mary Ruthsdotter, Maria Cuevas, Paula Hammett, and Bette Morgan to broadcast women's historical achievements;

Whereas National Women's History Project founder Mary Ruthsdotter, who passed away in January 2010, was a leader in the effort to ensure the inclusion of women's accomplishments in the Nation's history;

Whereas, in 1981, responding to the growing popularity of women's history celebrations, Congress passed a resolution making Women's History Week a national observance;

Whereas, during this time, using information provided by the National Women's History Project, founded in Sonoma County, California, thousands of schools and communities joined in the commemoration of National Women's History Week, with support and encouragement from governors, city councils, school boards, and Congress;

Whereas, in 1987, the National Women's History Project petitioned Congress to expand the national celebration to include the entire month of March;

Whereas educators, workplace program planners, parents, and community organizations in thousands of communities in the United States under the guidance of the National Women's History Project, have turned National Women's History Month into a major local learning experience and celebration;

Whereas the popularity of women's history celebrations has sparked a new interest in uncovering women's forgotten heritage;

Whereas the President's Commission on the Celebration of Women in American History was established to consider how best to acknowledge and celebrate the roles and accomplishments of women in United States history;

Whereas the National Women's History Museum was founded in 1996 as an institution dedicated to preserving, interpreting, and celebrating the diverse historic contributions of women, and integrating this rich heritage fully into the Nation's teachings and history books;

Whereas the House of Representatives recognizes March 2010 as National Women's History Month; and

Whereas the theme of National Women's History Month for 2010 is ''Writing Women Back into History'': Now, therefore, be it

Resolved, That the House of Representatives—

(1) supports the goals and ideals of National Women's History Month; and

(2) recognizes and honors the women and organizations in the United States that have fought for and continue to promote the teaching of women's history.

The SPEAKER pro tempore. Pursuant to the rule, the gentlewoman from California (Ms. SPEIER) and the gentlewoman from North Carolina (Ms. FOXX) each will control 20 minutes.

The Chair recognizes the gentlewoman from California.

GENERAL LEAVE

Ms. SPEIER. Mr. Speaker, I ask unanimous consent that all Members may have 5 legislative days within which to revise and extend their remarks.

The SPEAKER pro tempore. Is there objection to the request of the gentlewoman from California?

There was no objection.

Ms. SPEIER. I yield myself such time as I may consume.

Mr. Speaker, I rise in support of H. Res. 1174, a bill supporting the goals and ideals of National Women's History Month.

This resolution was introduced by my distinguished colleague, the gentlewoman from California, Representative LYNN WOOLSEY, on March 11, 2010. It was referred to the Committee on Oversight and Government Reform, which ordered it reported by unanimous consent on March 18 of this year. It enjoys wide support from over 120 Members of the House, and I am pleased to be an original cosponsor of the measure.

Mr. Speaker, as recently as the 1970s, women's history was rarely covered in the kindergarten through grade 12 curriculum. Since the late 1970s, the concerted efforts of education commissions, historical societies, and others have increased recognition of the roles and accomplishments of women in history of the United States of America.

These efforts included the establishment of Women's History Week back in 1978, which this body formally acknowledged in 1981. In 1987, the national celebration was expanded to the entire month of March. These celebrations have initiated new interests in highlighting the history of women in America, and it is most appropriate that we recognize Women's History Month here today with this resolution of appreciation.

Mr. Speaker, women make history in this country every day, from our very own Speaker PELOSI and the Members of the House and Senate from both sides of the aisle, to the Supreme Court justices, to women scientists, CEOs, Nobel Prize winners, Olympians, teachers, writers, doctors, and leaders in every profession.

In November of 2008, voters in New Hampshire elected 13 women, a majority, to their State Senate, making it the country's first State-level legislative body with more women than men.

Mr. Speaker, I ask my colleagues to join me in taking a moment to recognize Women's History Month by supporting this measure.

I reserve the balance of my time.

Ms. FOXX. Mr. Speaker, I yield myself such time as I may consume.

Mr. Speaker, I rise today in support of H. Res. 1174, supporting the goals and ideals of National Women's History Month. Designating a month each year to honor women's history gives us the opportunity to highlight the significant role that women have played in the history of this Nation through their many accomplishments.

From colonial times to the 21st century, the advancements of women have been inspiring. They are now being given their rightful place in our country's history for their tireless efforts in enriching all of our lives.

The President's Commission on the Celebration of Women in American History was established in 1987 to give national recognition to this effort and to highlight the accomplishments of women in American history throughout the month of March. Establishing March as National Women's History Month created an ideal teaching opportunity for educators, parents, community organizations, and workplace programs.

Embracing the history of women in the United States gives us the opportunity to recognize the many contributions women have made to the growth and success of the United States. I encourage all Members to support this important resolution.

I reserve the balance of my time.

Ms. SPEIER. Mr. Speaker, I yield to the gentlelady from California (Ms.