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House of Representatives

The House met at 12:30 p.m. and was called to order by the Speaker pro tempore (Ms. EDWARDS of Maryland).

DESIGNATION OF SPEAKER PRO TEMPORE

The SPEAKER pro tempore laid before the House the following communication from the Speaker:

WASHINGTON, DC,
July 27, 2009.

I hereby appoint the Honorable DONNA F. EDWARDS to act as Speaker pro tempore on this day.

NANCY PELOSI,
Speaker of the House of Representatives.

MORNING-HOUR DEBATE

The SPEAKER pro tempore. Pursuant to the order of the House of January 6, 2009, the Chair will now recognize Members from lists submitted by the majority and minority leaders for morning-hour debate.

The Chair will alternate recognition between the parties, with each party limited to 30 minutes and each Member, other than the majority and minority leaders and the minority whip, limited to 5 minutes.

HEALTH CARE REFORM THAT PUTS PATIENTS FIRST

The SPEAKER pro tempore. The Chair recognizes the gentlewoman from North Carolina (Ms. FOXX) for 5 minutes.

Ms. FOXX. Madam Speaker, President Obama recently held a televised press conference to discuss health care reform. As Republican JOHN BOEHNER noted last week, several of President Obama's points may not accurately reflect the health care legislation before the House.

The President said that the government will stay out of health care decisions. But that isn't how the legislation is shaping up. A simple amendment to the legislation that would have guaranteed that no bureaucrat will make any decisions or interfere with any decision between a doctor and a patient was rejected by the Democrats in control of the Energy and Commerce Committee. That doesn't bode well for government staying out of health care decisions.

President Obama also said that the plan will not add to the government's deficit. Of course we all know that the Congressional Budget Office has been throwing water on that idea for weeks. They've already estimated that the current plan will add $239 billion to our deficit over the next 10 years.

And that deficit number is based on a provision in the plan that starts collecting taxes before the health care component kicks in, essentially offsetting a significant deficit with taxes collected before the bills start arriving. That means that after 10 years we will have a new structural deficit as the costs of this plan far outstrip the punitive taxes on small businesses.

But what really concerns me about this plan is Washington's history of underestimating costs of expensive plans like this.

If you look at this chart, based on research from Congress' Joint Economic Committee, you will notice that over the years congressional estimates of the cost of health care programs were extremely unreliable.

For instance, when Congress was considering Medicare part A, the hospital insurance component, Congress estimated it would cost $9 billion by 1990. Actual cost in 1990? $67 billion, seven times more than Congress estimated.

And the 1967 estimate for the entire Medicare program in 1990 was $12 billion. Actual cost? $111 billion, almost 10 times the original estimate.

Later, in 1987, Congress estimated that Medicaid's disproportionate share of hospital payments to States would cost less than $1 billion in 1992. Five years later the results were in: $17 billion, which is an incomprehensible 17-fold increase over the estimate just 5 years earlier.

You get the idea. Government programs have a tendency to take on a life of their own and cost taxpayers way more than was originally estimated or envisioned. While I'm willing to allow for some margin of error in estimated costs—they are estimates after all—what concerns me is that we are starting out with estimates for huge deficits with this health care plan. At the same time, we are paying for it out of the pockets of America's job creators, the small businesses. If the current proposal becomes law, are we going to be coming back to these small business with another tax increase in 5 or 10 years?

We need health care reform that puts patients first and that won't destroy the small businesses that are a pillar of our economy. Republicans have a better solution that won't put the government in charge of people's health care, that will make sure that we bring down the cost of health care for all Americans and ensure affordable access for all Americans.

We should be considering the Republican plan and not this job-destroying Democrat plan.

ADVANCE CARE PLANNING

The SPEAKER pro tempore. The Chair recognizes the gentleman from Oregon (Mr. BLUMENAUER) for 5 minutes.

Mr. BLUMENAUER. Madam Speaker, we in Congress and the new administration have been given a gift of serving in a time of opportunity to solve some of the long-festering problems with the American health care system. One opportunity to achieve true reform is to provide greater value to patients

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when they are most vulnerable, when loved ones are facing the last few weeks of life.

Today, these patients have a wide variety of treatment options available. We can test them, hook them up to machines, poke them with needles, perform all sorts of heroic measures, and where appropriate, we can accomplish amazing results with virtually no cost to older citizens. Yet, when it comes time to help people understand what their choices are, to have their questions answered, to be able to shape treatment for what their values and interests might be, we fail them utterly.

H.R. 3200, health care reform, does have a simple solution to empower people and their families. Yet, this carefully crafted provision has been attacked by some opponents of reform, for example, Betsy McCaughey in The Wall Street Journal claiming wildly that somehow this would be mandatory, that it would be done by a government assigned physician, with the threat of coercing senior citizens.

A simple reading of the provision shows that that's simply not the case. Like all other Medicare provisions, it would be voluntary. It would by the physician of one's choice. There's nothing mandatory about it.

It has led the American Association of Retired People to issue a statement about this opinion piece in The Wall Street Journal. ''Ms. McCaughey's criticism misinterprets legislation that would actually help empower individuals and doctors to make their own choices on end-of-life care.

''This measure would not only help people make the best decisions for themselves, but also ensure that their wishes are followed. To suggest otherwise is a gross, even cruel, distortion, especially for any family that has been forced to make the difficult decisions on care for loved ones approaching the end of their lives.''

The AARP makes clear, ''We will fight any measure that would prevent individuals and their doctors from making their own health care decisions. We will also fight the campaign of misinformation that vested interests are using to try to scare older Americans in order to protect the status quo. Profits should never be allowed to come before people in this debate.''

And sadly, it's not just right-wing pundits who are involved with an effort of distortion. I would hope that my friends in the Republican leadership would reconsider their ill-advised attempt to equate this bipartisan effort to empower families with a slippery slope on pressuring seniors or even euthanasia. This is simply categorically false and destructive.

The provision in question was carefully considered. It was the result of real bipartisan cooperation to help families. Indeed, some of the most moving comments in our committee deliberations came from Republican colleagues who talked about the concerns that they faced with their families in this difficult end-of-life situation and how we needed to do better.

Madam Speaker, there are lots of areas where we can disagree as we're dealing with health care reform. By all means, let's debate and argue over areas of genuine disagreement, but let's not attack this long-overdue assistance to families facing the difficult situation at the end of life. Let's not attack it. Let's embrace it. American families deserve no less.

THE NEW YORK FED: A HOPELESSLY CONFLICTED REGULATOR

The SPEAKER pro tempore. The Chair recognizes the gentleman from Florida (Mr. STEARNS) for 5 minutes.

Mr. STEARNS. Madam Speaker, I rise today to address the increasingly troublesome issue of conflicts of interest within our financial regulatory system and the potential long-term harm this could render on American taxpayers.

To be specific, conflicts of interest abound at the Federal Reserve Bank of New York, the entity that has been at the forefront of our Federal Government's efforts to respond to the worst financial crisis our country has faced in decades. The New York Fed is, of course, intimately intertwined with the Federal Reserve and the Treasury Department, too, but Americans may be surprised to hear how close this entity is to major Wall Street financial firms as well. In fact, MIT economist Simon Johnson was recently quoted as saying, ''The New York Fed sticks out as being not just very, very close to Wall Street, but to the most powerful people on Wall Street.''

In particular, the Federal Reserve Bank of New York is notably close to investment bank turned bank holding and receiver of billions of dollars in TARP funds, Goldman Sachs. The last two heads of the New York Fed, including Stephen Friedman, were former key employees of Goldman Sachs, and the current president of the New York Fed, William Dudley, was at Goldman Sachs for 20 years, including 10 years as chief economist. And of course, the New York Fed is now tasked with overseeing Goldman Sachs.

Furthermore, former Treasury Secretary Henry Paulson, who engineered the $750 billion bailout of Wall Street and created the TARP program, was also the former CEO and chairman of Goldman Sachs. And in another noncoincidence, during his time as Treasury Secretary, Mr. Paulson managed to bail out insurance company AIG while letting Goldman Sachs' main competitor, Lehman Brothers, fail, thus ensuring AIG would be able to turn around and pay Goldman Sachs $12.9 billion in losses, making Goldman Sachs the largest recipient of public funds from AIG.

Additionally, until December 2008, the chairman of the New York Federal Reserve, Stephen Friedman, was a former director of Goldman Sachs. Friedman actually resigned from his position as chairman earlier this year after a controversy erupted over his purchase of Goldman Sachs stock during his time in his position as the New York Fed chairman.

And, in yet another conflict-of-interest scenario, let us not forget that Timothy Geithner, who was then president of the New York Fed, he decided to give $30 billion of taxpayers' funds to J.P. Morgan's acquisition of Bear Stearns, but Jamie Dimon of J.P. Morgan Chase was on the board of the New York Fed.

Alarmingly, Madam Speaker, the Obama administration is now proposing we give more power to the Federal Reserve and, in turn, this same New York Federal Reserve. Let us first consider that the New York Fed is dominated by the banks it is supposedly regulating, and let us not forget these regulated banks hold the majority of seats on the New York Fed board.

Former president of the Federal Reserve Bank of St. Louis, William Poole, he recently stated that employees at the New York Fed ''play a very valuable role, day in, day out, with detailed contacts with the big financial firms.''

With such close proximity to large financial firms, how do we really know whose interest the New York Fed is putting first? Are the interests of Wall Street insiders taken into consideration before the interests of the American people? Are Wall Street's interests automatically equated with the interests of the American people?

The New York Fed is part of a system Congress created in 1913 to avoid the concentration of too much power in New York or Washington alone. Yet, it seems today that all of the power at the New York Fed is concentrated within a few major Wall Street financial firms whose key employees now enjoy prominent positions within our Federal Government.

The intimacy between the Fed and the firms they regulate should cause all of us to pause. It was, after all, the New York Fed that allowed companies like Goldman Sachs and J.P. Morgan to convert themselves to bank holding companies so that they could receive access to taxpayer-funded, Henry Paulson-created TARP funds and then turn around just a few months later and post billions in record profits and dole out some of the highest bonuses in history.

Madam Speaker, what is the sense in giving more powers to the regulator of the largest financial firms on Wall Street, the New York Fed, when their failed regulation of mortgage lending is what led to the accumulation of toxic assets in our financial system in the first place? Why on earth give more power to such a hopelessly conflicted regulator?

RECESS

The SPEAKER pro tempore. Pursuant to clause 12(a) of rule I, the Chair declares the House in recess until 2 p.m. today.

Accordingly (at 12 o'clock and 45 minutes p.m.), the House stood in recess until 2 p.m.

□ 1400

AFTER RECESS

The recess having expired, the House was called to order by the Speaker pro tempore (Mr. DRIEHAUS) at 2 p.m.

PRAYER

The Chaplain, the Reverend Daniel P. Coughlin, offered the following prayer:

Lord God, You are blessed from the rising to the setting of the sun each day all around the world.

Today, as the United States Capitol recognizes Korean War Armistice Day and honors over 6 million Americans who served in the Korean War, 56 years later, we once more decry the price and pain of war, applaud the bravery of those who served in the military, and pray for peace in Asia and around the world.

We commend to Your compassionate and faithful love all Korean War veterans, their families and the comrades made during the years of conflict. We pray also for the people of North and South Korea, for separated families and for those once lost and now forgotten by all except You, Almighty God.

Show Your eternal mercy upon all Your people both now and forever. Amen.

THE JOURNAL

The SPEAKER pro tempore. The Chair has examined the Journal of the last day's proceedings and announces to the House his approval thereof.

Pursuant to clause 1, rule I, the Journal stands approved.

PLEDGE OF ALLEGIANCE

The SPEAKER pro tempore. Will the gentleman from Arkansas (Mr. BOOZMAN) come forward and lead the House in the Pledge of Allegiance.

Mr. BOOZMAN led the Pledge of Allegiance as follows:

I pledge allegiance to the Flag of the United States of America, and to the Republic for which it stands, one nation under God, indivisible, with liberty and justice for all.

GOVERNMENT HEALTH CARE MATH

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

Mr. KIRK. Mr. Speaker, some are urging Congress to back a $1 trillion government health care bill because they claim 50 million Americans are uninsured. But when you hear the rest of the story, the numbers fall apart. While the Census reports that 45.7 million people lacked insurance during some portion of the year, we find that 9.5 million are non-citizens or illegal aliens, 12 million are eligible for public programs but have not bothered to enroll, 9 million lacked insurance for less than a year, and 7.3 million make over $84,000 a year but have chosen not to buy insurance.

When you do that math, you find that there are 7.8 million lower-income, long-term, uninsured American citizens. But this smaller number is not big enough to justify $1 trillion and raising your taxes to rates higher than France, which is why congressional leaders hope you do not look under the hood of their bill or the numbers they use to justify it.

WE NEED TO START OVER TOGETHER

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

Mr. WILSON of South Carolina. Mr. Speaker, there is bipartisan concern in Congress and across America that the House Democrat leadership's health bill will drive up short-term deficits and long-term debt, ration care with waiting lists, and destroy jobs. Some estimates range from 1.6 million by the NFIB to 4.7 million jobs lost due to this legislation.

There is a better, more positive way to approach health care reform, and it starts by sitting down in a bipartisan way to build a consensus. We all believe the status quo is unacceptable, that we must work to make health care more affordable, accessible and of the highest quality.

Republicans have offered a set of proposals we feel can expand accessibility for individuals and small businesses while preserving the doctor-patient relationship. We should promote health care reform, but we should not sacrifice quality and choice just for an arbitrary timeline.

In conclusion, God bless our troops, and we will never forget September the 11th in the global war on terrorism.

HEALTH CARE

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

Mr. STEARNS. Mr. Speaker, last week the Democrats released a thousand-page-plus health care bill that will cost in the order of $1.5 trillion and will allow for the Federal Government to nationalize health care in America I hope the American people will learn more about this bill before it is voted on the House floor here.

The Federal Government will eventually control almost 20 percent of our GDP and will control every single doctor and patient health decision that's made in this country.

It's clear we must reform the country's health care delivery system, but in the process of expanding affordable access, we must not create a weaker, more expensive system that future generations will have to pay for. Eighty-three percent of Americans enjoy the health insurance they currently have. We must strengthen and expand our current health care system and not destroy it in favor of a $1.5 trillion experiment.

CONGRATULATING MERLIN WALTERS ON HIS SERVICE TO THE UNITED STATES

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

Mr. BOOZMAN. Mr. Speaker, I rise today to commend the service of Merlin Walters, who has distinguished himself as an exemplary citizen with 58 years of service to our country, five in the military and an astounding 53 years with the U.S. Postal Service.

Mr. Walters served as a master mechanic in the Arkansas National Guard at Camp Robinson in Little Rock, Arkansas, and has committed himself as a public servant ever since. In 1956, President Eisenhower appointed him as a full-time carrier for the Hartman Post Office in Hartman, Arkansas. After 11 years of dedicated service, he was appointed to the office of Postmaster of Hartman by President Johnson. He has been a familiar face at the Hartman Post Office for 53 years, and at 89 years old, you can still find him there every day hard at work.

Mr. Walters said he always finds enjoyment in working at the post office in Hartman. He believes in working until the job is done and done right. His hard work and dedication have not gone unnoticed. I thank him for his service to the residents of Arkansas.

ANNOUNCEMENT BY THE SPEAKER PRO TEMPORE

The SPEAKER pro tempore. Pursuant to clause 8 of rule XX, the Chair will postpone further proceedings today on motions to suspend the rules on which a recorded vote or the yeas and nays are ordered, or on which the vote incurs objection under clause 6 of rule XX.

Record votes on postponed questions will be taken after 6:30 p.m. today.

VETERANS' INSURANCE AND HEALTH CARE IMPROVEMENTS ACT OF 2009

Mr. FILNER. Mr. Speaker, I move to suspend the rules and pass the bill (H.R. 3219) to amend title 38, United States Code, to make certain improvements in the laws administered by the

Secretary of Veterans Affairs relating to insurance and health care, and for other purposes, as amended.

The Clerk read the title of the bill.

The text of the bill is as follows:

H.R. 3219

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

SECTION 1. SHORT TITLE; TABLE OF CONTENTS.

(a) SHORT TITLE.—This Act may be cited as the ''Veterans' Insurance and Health Care Improvements Act of 2009''.

(b) TABLE OF CONTENTS.—The table of contents for this Act is as follows:

Sec. 1. Short title; table of contents.

TITLE I—MATTERS RELATING TO INSURANCE

Sec. 101. Permanent extension of duration of Servicemembers' Group Life Insurance coverage for totally disabled veterans.

Sec. 102. Increased amount of Veterans' Group Life Insurance.

Sec. 103. Elimination of reduction in amount of accelerated death benefit for terminally-ill persons insured under Servicemembers' Group Life Insurance and Veterans' Group Life Insurance.

TITLE II—MATTERS RELATING TO HEALTH CARE

Sec. 201. Higher priority status for certain veterans who are medal of honor recipients.

Sec. 202. Provision of hospital care, medical services, and nursing home care for certain Vietnam-era veterans exposed to herbicide and veterans of the Persian Gulf War.

Sec. 203. Prohibition on collection of copayments from catastrophically disabled veterans.

Sec. 204. Establishment of Director of Physician Assistant Services at Veterans Health Administration of Department of Veterans Affairs.

Sec. 205. Committee on Care of Veterans with Traumatic Brain Injury.

Sec. 206. Revision of certain requirements for the pilot program of enhanced contract care authority for health care needs of veterans in highly rural areas.

TITLE III—MATTERS RELATING TO BENEFITS

Sec. 301. Benefits for qualified World War II veterans.

Sec. 302. Waiver of housing loan fee for certain veterans with service-connected disabilities called to active service.

TITLE I—MATTERS RELATING TO INSURANCE

SEC. 101. PERMANENT EXTENSION OF DURATION OF SERVICEMEMBERS' GROUP LIFE INSURANCE COVERAGE FOR TOTALLY DISABLED VETERANS.

(a) EXTENSION.—Section 1968(a) of title 38, United States Code, is amended—

(1) in paragraph (1)(A), by striking clause (ii) and inserting the following new clause (ii):

''(ii) The date that is two years after the date of separation or release from such active duty or active duty for training.''; and

(2) in paragraph (4), by striking subparagraph (B) and inserting the following new subparagraph (B):

''(B) The date that is two years after the date of separation or release from such assignment.''.

(b) EFFECTIVE DATE.—The amendments made by subsection (a) shall apply with respect to a person who is separated or released on or after June 15, 2005.

SEC. 102. INCREASED AMOUNT OF VETERANS' GROUP LIFE INSURANCE.

(a) INCREASED AMOUNT.—Section 1977(a) of title 38, United States Code, is amended—

(1) in paragraph (1), by inserting ''Except as provided in paragraph (3),'' before ''Veterans' Group Life Insurance shall be''; and

(2) by adding after paragraph (2) the following new paragraph:

''(3) Not more than once in each five-year period beginning on the one-year anniversary of the date a person becomes insured under Veterans' Group Life Insurance, such person may elect in writing to increase the amount for which the person is insured if—

''(A) the person is under the age of 60;

''(B) the increased amount is $25,000; and

''(C) the amount for which the person is insured does not exceed the amount provided for under section 1967(a)(3)(A)(i) of this title.''.

(b) EFFECTIVE DATE.—Paragraph (3) of section 1977(a) of title 38, United States Code, shall take effect on the date that is 180 days after the date of the enactment of this Act.

SEC. 103. ELIMINATION OF REDUCTION IN AMOUNT OF ACCELERATED DEATH BENEFIT FOR TERMINALLY-ILL PERSONS INSURED UNDER SERVICEMEMBERS' GROUP LIFE INSURANCE AND VETERANS' GROUP LIFE INSURANCE.

(a) ELIMINATION OF REDUCTION.—Section 1980(b)(1) of title 38, United States Code, is amended by striking ''reduced by'' and all that follows through ''the Secretary''.

(b) EFFECTIVE DATE.—The amendment made by subsection (a) shall apply with respect to a payment of an accelerated death benefit under section 1980 of title 38, United States Code, made on or after the date of the enactment of this Act.

TITLE II—MATTERS RELATING TO HEALTH CARE

SEC. 201. HIGHER PRIORITY STATUS FOR CERTAIN VETERANS WHO ARE MEDAL OF HONOR RECIPIENTS.

Section 1705(a)(3) of title 38, United States Code, is amended by inserting ''veterans who were awarded the medal of honor under section 3741, 6241, or 8741 of title 10 or section 491 of title 14,'' after ''Veterans who are former prisoners of war or who were awarded the Purple Heart,''.

SEC. 202. PROVISION OF HOSPITAL CARE, MEDICAL SERVICES, AND NURSING HOME CARE FOR CERTAIN VIETNAM-ERA VETERANS EXPOSED TO HERBICIDE AND VETERANS OF THE PERSIAN GULF WAR.

Section 1710(e) of title 38, United States Code, is amended—

(1) in paragraph (3)—

(A) by striking ''subsection (a)(2)(F)—'' and all that follows through ''(C) in the case'' and inserting ''subsection (a)(2)(F) in the case''; and

(B) by redesignating clauses (i) and (ii) of the former subparagraph (C) as subparagraphs (A) and (B) of such paragraph (3) and by moving such new subparagraphs two ems to the left; and

(2) in paragraph (1)(C)—

(A) by striking ''paragraphs (2) and (3)'' and inserting ''paragraph (2)''; and

(B) by inserting after ''on active duty'' the following: ''between August 2, 1990, and November 11, 1998,''.

SEC. 203. PROHIBITION ON COLLECTION OF COPAYMENTS FROM CATASTROPHICALLY DISABLED VETERANS.

(a) IN GENERAL.—Subchapter III of chapter 17 of title 38, United States Code, is amended by adding at the end the following new section:

''§ 1730A. Prohibition on collection of copayments from catastrophically disabled veterans

''Notwithstanding subsections (f) and (g) of section 1710 of this title, subsection (a) of section 1722A of this title, and any other provision of law, the Secretary may not require a veteran who is catastrophically disabled to make any copayment for the receipt of hospital care or medical services under the laws administered by the Secretary.''.

(b) CLERICAL AMENDMENT.—The table of sections at the beginning of such chapter is amended by inserting after the item relating to section 1730 the following new item:

''1730A. Prohibition on collection of copayments from catastrophically disabled veterans.''.

SEC. 204. ESTABLISHMENT OF DIRECTOR OF PHYSICIAN ASSISTANT SERVICES AT VETERANS HEALTH ADMINISTRATION OF DEPARTMENT OF VETERANS AFFAIRS.

(a) IN GENERAL.—Section 7306(a) of title 38, United States Code, is amended by striking paragraph (9) and inserting the following new paragraph (9):

''(9) The Director of Physician Assistant Services, who shall serve in a full-time capacity at the Central Office of the Department and who shall be a qualified physician assistant, who shall be responsible to and report directly to the Under Secretary for Health on all matters relating to the education and training, employment, appropriate utilization, and optimal participation of physician assistants within the programs and initiatives of the Administration.''.

(b) DEADLINE FOR IMPLEMENTATION.—The Secretary of Veterans Affairs shall ensure that an individual is serving as the Director of Physician Assistant Services under section 7306(a)(9) of title 38, United States Code, as added by subsection (a), by not later than 120 days after the date of the enactment of this Act.

SEC. 205. COMMITTEE ON CARE OF VETERANS WITH TRAUMATIC BRAIN INJURY.

(a) ESTABLISHMENT OF COMMITTEE.—Subchapter II of chapter 73 of title 38, United States Code, is amended by inserting after section 7321 the following new section:

''§ 7321A. Committee on Care of Veterans with Traumatic Brain Injury

''(a) ESTABLISHMENT.—The Secretary shall establish in the Veterans Health Administration a committee to be known as the 'Committee on Care of Veterans with Traumatic Brain Injury'. The Under Secretary for Health shall appoint employees of the Department with expertise in the care of veterans with traumatic brain injury to serve on the committee.

''(b) RESPONSIBILITIES OF COMMITTEE.—The committee shall assess, and carry out a continuing assessment of, the capability of the Veterans Health Administration to meet effectively the treatment and rehabilitation needs of veterans with traumatic brain injury. In carrying out that responsibility, the committee shall—

''(1) evaluate the care provided to such veterans through the Veterans Health Administration;

''(2) identify systemwide problems in caring for such veterans in facilities of the Veterans Health Administration;

''(3) identify specific facilities within the Veterans Health Administration at which program enrichment is needed to improve treatment and rehabilitation of such veterans; and

''(4) identify model programs which the committee considers to have been successful in the treatment and rehabilitation of such veterans and which should be implemented more widely in or through facilities of the Veterans Health Administration.

''(c) ADVICE AND RECOMMENDATIONS.—The committee shall—

''(1) advise the Under Secretary regarding the development of policies for the care and

rehabilitation of veterans with traumatic brain injury; and

''(2) make recommendations to the Under Secretary—

''(A) for improving programs of care of such veterans at specific facilities and throughout the Veterans Health Administration;

''(B) for establishing special programs of education and training relevant to the care of such veterans for employees of the Veterans Health Administration;

''(C) regarding research needs and priorities relevant to the care of such veterans; and

''(D) regarding the appropriate allocation of resources for all such activities.

''(d) ANNUAL REPORT.—Not later than June 1 of 2010, and each subsequent year, the Secretary shall submit to the Committees on Veterans' Affairs of the Senate and House of Representatives a report on the implementation of this section. Each such report shall include the following for the calendar year preceding the year in which the report is submitted:

''(1) A list of the members of the committee.

''(2) The assessment of the Under Secretary for Health, after review of the initial findings of the committee, regarding the capability of the Veterans Health Administration, on a systemwide and facility-by-facility basis, to meet effectively the treatment and rehabilitation needs of veterans with traumatic brain injury.

''(3) The plans of the committee for further assessments.

''(4) The findings and recommendations made by the committee to the Under Secretary for Health and the views of the Under Secretary on such findings and recommendations.

''(5) A description of the steps taken, plans made (and a timetable for the execution of such plans), and resources to be applied toward improving the capability of the Veterans Health Administration to meet effectively the treatment and rehabilitation needs of veterans with traumatic brain injury.''.

(b) CLERICAL AMENDMENT.—The table of sections at the beginning of such chapter is amended by inserting after the item relating to section 7321 the following new item:

''7321A. Committee on Care of Veterans with Traumatic Brain Injury.''.

SEC. 206. REVISION OF CERTAIN REQUIREMENTS FOR THE PILOT PROGRAM OF ENHANCED CONTRACT CARE AUTHORITY FOR HEALTH CARE NEEDS OF VETERANS IN HIGHLY RURAL AREAS.

Subsection (b) of section 403 of the Veterans' Mental Health and Other Care Improvements Act of 2008 (Public Law 110–387; 38 U.S.C. 1703 note) is amended to read as follows:

''(b) COVERED VETERANS.—For purposes of the pilot program under this section, a covered veteran is any veteran who—

''(1) is—

''(A) enrolled in the system of patient enrollment established under section 1705(a) of title 38, United States Code, as of the date of the commencement of the pilot program under subsection (a)(2); or

''(B) eligible for health care under section 1710(e)(3)(C) of title 38, United States Code; and

''(2) resides in a location that is—

''(A) more than 60 minutes' driving distance, as determined by the Secretary, from the nearest Department health care facility providing primary care services, in the case of a veteran seeking such services;

''(B) more than 120 minutes' driving distance, as determined by the Secretary, from the nearest Department health care facility providing acute hospital care, in the case of a veteran seeking such care; or

''(C) more than 240 minutes' driving distance, as determined by the Secretary, from the nearest Department health care facility providing tertiary care, in the case of a veteran seeking such care.''.

TITLE III—MATTERS RELATING TO BENEFITS

SEC. 301. BENEFITS FOR QUALIFIED WORLD WAR II VETERANS.

(a) ESTABLISHMENT OF COMPENSATION FUND.—Subchapter II of chapter 5 of title 38, United States Code, is amended by adding at the end the following new section:

''§ 533. Qualified World War II Veterans Equity Compensation Fund

''(a) COMPENSATION FUND.—(1) There is in the general fund of the Treasury a fund to be known as the 'Qualified World War II Veterans Equity Compensation Fund' (in this section referred to as the 'compensation fund').

''(2) Subject to the availability of appropriations for such purpose, amounts in the compensation fund shall be available to the Secretary without fiscal year limitation to make payments to eligible individuals in accordance with this section.

''(b) ELIGIBLE INDIVIDUALS.—(1) An eligible individual is an individual who—

''(A) during the 1-year period beginning on the date of the enactment of this section, submits to the Secretary an application containing such information and assurances as the Secretary may require;

''(B) has not received benefits under the Servicemen's Readjustment Act of 1944 (Public Law 78–346); and

''(C) has engaged in qualified service.

''(2) For purposes of paragraph (1), a person has engaged in qualified service if the service of the person has been determined to have been active duty service pursuant to section 1401 of the GI Bill Improvement Act of 1977 (38 U.S.C. 106 note).

''(c) AMOUNT OF PAYMENTS.—The Secretary shall make a monthly payment out of the compensation fund in the amount of $1,000 to an eligible individual. The Secretary shall make such payments to eligible individuals in the order in which the Secretary receives the applications of the eligible individuals.

''(d) AUTHORIZATION OF APPROPRIATIONS.—(1) There are authorized to be appropriated to the compensation fund amounts as follows:

''(A) For fiscal year 2010, $222,000,000.

''(B) For fiscal year 2011, $193,000,000.

''(C) For fiscal year 2012, $170,000,000.

''(D) For fiscal year 2013, $146,000,000.

''(E) For fiscal year 2014, $124,000,000.

''(2) Funds appropriated to carry out this section shall remain available until expended.

''(e) REPORTS.—The Secretary shall include, in documents submitted to Congress by the Secretary in support of the President's budget for each fiscal year, detailed information on the operation of the compensation fund, including the number of applicants, the number of eligible individuals receiving benefits, the amounts paid out of the compensation fund, the administration of the compensation fund, and an estimate of the amounts necessary to fully fund the compensation fund for that fiscal year and each of the three subsequent fiscal years.

''(f) REGULATIONS.—The Secretary shall prescribe regulations to carry out this section.''.

(b) REGULATIONS.—Not later than 180 days after the date of the enactment of this Act, the Secretary shall prescribe the regulations required under section 532(f) of title 38, United States Code, as added by subsection (a).

(c) CLERICAL AMENDMENT.—The table of sections at the beginning of such chapter is amended by inserting after the item related to section 532 the following new item:

''533. Qualified World War II Veterans Equity Compensation Fund.''.

SEC. 302. WAIVER OF HOUSING LOAN FEE FOR CERTAIN VETERANS WITH SERVICE-CONNECTED DISABILITIES CALLED TO ACTIVE SERVICE.

Section 3729(c)(1) of title 38, United States Code, is amended by inserting after ''retirement pay'' the following: ''or active service pay''.

The SPEAKER pro tempore. Pursuant to the rule, the gentleman from California (Mr. FILNER) and the gentleman from Florida (Mr. STEARNS) each will control 20 minutes.

The Chair recognizes the gentleman from California.

Mr. FILNER. I thank the Speaker, and I yield myself such time as I may consume.

I rise in strong support of passage of this bill, the Veterans' Insurance Health Care Improvement Act of 2009, H.R. 3219. This important legislation was assembled with the help of many members of the House Committee on Veterans Affairs, without whose efforts this bill would not have been possible. I'm surprised to see my friend, Mr. STEARNS, managing the bill, having just railed against nationalization of health care, which is not what the Obama plan has, but then he's a great supporter of the veterans' health system, which I think may come under his definition. So I'm pleased that he supports so strongly the Veterans Administration health care system, which is nationalized care, but I wish he would support Mr. Obama's health care plan, which has nothing to do with nationalization.

But I want to recognize and applaud the outstanding effort of especially two dynamic members on the committee who sponsored major insurance provisions of the bill under consideration. Mrs. HALVORSON of Illinois sponsored the Families of Veterans Financial Security Act, H.R. 2774, which has become section 101 of this bill. And Mrs. KIRKPATRICK of Arizona sponsored the Veterans and Service Members Accelerated Benefit Option Equity Act of 2009, H.R. 2988, which is now section 103 of this bill.

These measures represent commonsense yet critical insurance provisions intended to ensure that our veterans, servicemembers and their families who have insurance-related needs receive the full measure of the benefit offered and that the survivors have ample replacement income to meet their needs. All of the provisions would give veterans and servicemembers greater flexibility in their insurance choices, and, consequently, greater peace of mind.

Additionally, the Congressional Budget Office reports that none of the bills would increase Federal direct spending for veterans' insurance programs. And I want to applaud, also, the chairman of our Disability Assistance

and Memorial Affairs Subcommittee on these measures, Mr. HALL of New York, for his leadership on these measures.

The legislation further provides for a wide variety of health care improvements in recognition of veterans who have sacrificed so much for the safety and freedom of the Nation. It enhances the lives of the Nation's veterans, from World War II to the current conflicts.

Other members also contributed to the health care provisions of this, and I want to thank them for their efforts. For example, Mr. MITCHELL of Arizona, who wrote H.R. 1197, the Medal of Honor Health Care Equity Act of 2009, which assigns a higher priority status for VA hospital care and medical services for veterans who are recipients of the Medal of Honor.

Another provision by Mr. HARE of Illinois, H.R. 1302, would establish a position of director of physician assistant services within the Office of the Under Secretary of Veterans Affairs for Health. And Mrs. HALVORSON from Illinois also sponsored H.R. 1335, which would prohibit the Secretary of Veterans Affairs from collecting certain copayments from veterans who are catastrophically disabled from non-service-connected causes and have income above the means tested level.

Mr. MCNERNEY from California sponsored H.R. 1546, the Caring for Veterans with Traumatic Brain Injury Act, and that has been incorporated to establish a committee on the care of veterans with traumatic brain injury to assess the VA's ability to treat and rehabilitate veterans with TBI—that is traumatic brain injury—and to provide recommendations on how to more effectively treat these veterans.

Mr. NYE of Virginia introduced H.R. 2926, which was incorporated into the bill to provide hospital care, medical services, and nursing home care for certain Vietnam-era veterans exposed to herbicides and also veterans of the Persian Gulf War.

Mr. BUYER's bill, H.R. 2270, would establish a compensation fund for all civilian groups who are given veteran status under the G.I. Bill Improvement Act of 1977, and that is also in the bill.

And finally, we have a bill introduced by Mr. TEAGUE of New Mexico to waive the housing loan fee for certain veterans with service-connected disabilities called to active service.

So I want to thank all of the members of our committee who've worked so hard to put together the important legislation we are considering today, and I hope my colleagues will support H.R. 3219 as amended

Mr. Speaker, I reserve the balance of my time.

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

Mr. Speaker, I rise in strong support of H.R. 3219, as amended, to amend title 38 of the United States Code, which would make improvements in the laws administered by the Secretary of Veterans Affairs relating to insurance and health care and for other purposes.

□ 1415

H.R. 3219, as amended, combines veterans' life insurance and health care provisions from bills by several Members that improve the lives of veterans, and I will highlight for my colleagues just a few of these this afternoon.

The bill includes provisions of H.R. 2349, the Veterans' Group Life Insurance Improvement Act of 2009, that was introduced by the ranking member, Mr. BUYER, to allow veterans under the age of 60 to purchase up to $400,000 of veterans' group life insurance coverage in $25,000 increments every 5 years. This bill gives our veterans greater flexibility in their life insurance choices and is supported by the VA and veterans service organizations. That's good.

Another provision that has been included in H.R. 3219, as amended, is from H.R. 2270, also introduced by Ranking Member BUYER, which provides equity for all of the 28 World War II civilian groups that were later given veteran status under the process set up by the GI Bill Improvement Act of 1977.

The bill provides equity by making all these groups eligible for the same $1,000 a month payment that merchant mariners of World War II would receive under H.R. 23, as amended, which the House passed earlier this year.

One group of veterans that would benefit from this provision are the members of the American Volunteer Group, also known as the Flying Tigers. This was a distinct group of American ground crew and pilots who worked as part of the Chinese Air Force with U.S. Government approval in defense of allied strongholds before and after America's entrance into the war. The Flying Tigers, P–40 aircraft, with their distinctive shark's teeth painted on the nose of the fuselage, became famous for their many, many successful raids on Japanese targets in China, including one just 12 days after Pearl Harbor.

Mr. Speaker, the Flying Tigers are credited with destroying 297 aircraft, of which 229 were air-to-air victories. This statistic is even more impressive when you consider that they were largely outnumbered in almost every engagement they were involved with, and all of their supplies had to be flown over the Hump from India over the Himalayan Mountains.

Also, Mr. Speaker, there is another well-known group. It is called the Women Air Force Service Pilots, WASPs. These were female pilots who flew noncombat missions for the United States Army Air Corps during the war. Over 1,000 of these brave pilots flew missions all across this country in support of the war effort. Although they had been promised to be made part of the Air Corps following the war, they were disbanded on December 20, 1944, with little fanfare and with little recognition.

Earlier this year, the President signed S. 614 to award the Congressional Gold Medal to an estimated 300 WASPs that are still alive today. The passage of S. 614, coupled with the benefit provided to the WASPs under the bill, will finally give these brave women veterans the recognition they deserve.

I want to thank the chairman, Mr. FILNER, for accepting the amendment to include these groups in the bill so that we can provide simple equity for all of these veterans that were not eligible for the World War II GI Bill.

I urge my colleagues to support this legislation.

Mr. Speaker, I reserve the balance of my time.

Mr. FILNER. Mr. Speaker, I yield as much time as she may consume to one of our dynamic new members of our committee, Mrs. HALVORSON of Illinois.

Mrs. HALVORSON. Thank you, Mr. FILNER, for yielding and for your leadership on the Veterans' Affairs Committee.

I rise in support of H.R. 3219. Included in H.R. 3219 is the language from legislation that I introduced which would eliminate copayments from catastrophically disabled veterans who receive medical care from the Department of Veterans Affairs. Right now, some catastrophically disabled veterans are thrown into financial hardship because of copayments they pay to the VA.

Catastrophically disabled veterans have conditions that compromise their ability to carry out the activities of daily living, including such basic self-care tasks as eating, bathing, and dressing. Veterans in these situations have enough challenges to face on a daily basis; having enough resources to make their copayment should not be another challenge that they have to deal with.

This legislation would allow our veterans to receive the health care that they deserve without adding another burden that makes it more difficult to afford.

Also included in this language from my bill, the Families of Veterans Financial Security Act, which would make permanent the extension that totally disabled veterans currently receive from the Servicemembers' Group Life Insurance program, also known as the SGLI. The SGLI is operated by the VA and provides low-cost group life insurance to members of the uniformed services. This program was developed to make insurance benefits available for veterans and servicemembers who were not able to secure insurance from private companies due to the extra risks involved in military service or because of a service-connected disability.

Currently, a temporary SGLI disability extension exists to allow servicemembers who are totally disabled to retain their SGLI coverage at no cost for up to 2 years. This extension guarantees that veterans most in need—the ones that are seriously disabled as a result of their service—won't lose their

life insurance coverage. This legislation would make the extension permanent and provide financial security to the families of disabled veterans.

I urge my colleagues to support H.R. 3219.

Mr. STEARNS. Mr. Speaker, I would like to take a moment to thank JOHN HALL of New York and DOUG LAMBORN of Colorado, the chairman and ranking member on the Subcommittee on Disability Assistance and Memorial Affairs, and MIKE MICHAUD of Maine and HENRY BROWN of South Carolina for all of their hard work on the legislation which was included in this bill. I would also like to thank Chairman FILNER and Ranking Member BUYER for their cooperation in moving the legislation forward.

Mr. Speaker, I urge my colleagues to support H.R. 3219, as amended, and I yield back the balance of my time.

Mr. FILNER. I yield as much time as he may consume to the gentleman from American Samoa (Mr. FALEOMAVAEGA).

Mr. FALEOMAVAEGA. Mr. Speaker, I rise in strong support of H.R. 3219, legislation to amend title 38, U.S. Code, to make certain improvements in the laws administered by the Secretary of Veterans Affairs related to insurance and health care, and for other purposes.

Mr. Speaker, I do want to commend the gentleman from California, my colleague, the chairman of the Committee on Veterans' Affairs, and my good friend from Florida who is managing on the other side of the aisle this important legislation.

Mr. Speaker, H.R. 3219, among other things, would make permanent the 2-year extension of the free Servicemembers' Group Life Insurance coverage period for totally disabled veterans following separation from active or reserve duty, enable veterans insured under the Veterans' Group Life Insurance program to increase the amount of their coverage, and eliminate the reduction in the amount of accelerated death benefits for terminally ill persons insured under both the SGLI and the VGLI programs.

Mr. Speaker, such improvements to the SGLI and VGLI programs would maximize the opportunity for totally disabled veterans, especially those who have no commercial insurance, the chance to obtain insurance coverage to pay for their medical expenses. Especially in this time of economic hardship, this bill would provide tremendous financial help and security for our veterans and their families.

Moreover, this bill would expand existing health care programs to include veterans that were not otherwise qualified. For example, this bill would provide for the enhanced treatment authority for veterans of the Vietnam era, like myself, and veterans of the Gulf War who may have been exposed to Agent Orange, herbicides known to contain dioxin, which has been linked to cancer and other disorders. While the full impact of these herbicides remain unknown, veterans affected have shown symptoms including persistent memory and concentration problems, chronic headaches, widespread pain, gastrointestinal problems, and other chronic abnormalities not explained by well-established diagnoses.

Mr. Speaker, as a Vietnam veteran myself, and a proud member of the 100th Battalion 442nd Infantry Reserve Unit out of Hawaii, I certainly appreciate the service and sacrifice of my fellow servicemen in the United States Armed Forces.

Again, I urge my colleagues to support this bill.

GENERAL LEAVE

Mr. FILNER. Mr. Speaker, I ask unanimous consent that all Members may have 5 legislative days in which to revise and extend their remarks and include extraneous material on H.R. 3219, as amended, and urge my colleagues to unanimously support the bill.

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

There was no objection.

Mr. BUYER. Mr. Speaker, I rise in support of H.R. 3219, as amended, the Veterans' Insurance and Health Care Improvements Act of 2009, which would amend title 38, United States Code, to make certain improvements in the laws administered by the Secretary of Veterans Affairs relating to insurance and health care.

H.R. 3219, as amended combines several pieces of legislation including H.R. 2349, the Veterans' Group Life Insurance Improvement Act of 2009, and H.R. 2270, the Benefits for Qualified World War II Veterans Act of 2009, both of which I introduced earlier this year.

H.R. 2349 gives eligible veterans the option of purchasing additional life insurance coverage under the Veterans Group Life Insurance Program. They would be able to purchase this coverage every five years in $25,000 increments up until age 60. This provision gives these veterans that choice to increase their life insurance as they get older and may see the need to purchase more as their family grows. The costs of such increases in coverage would be offset by premiums veterans pay, so there is no direct cost to the government.

Another provision included in H.R. 3219, as amended, is the substance of H.R. 2270, which provides a $1,000 monthly payment to all World War II civilian groups that were later given veteran status under the process set up by the G.I. Bill Improvement Act of 1977.

Earlier this year, the House created an inequitable situation when we singled out one of these civilian groups, merchant mariners, to receive this payment while excluding the other 28 groups who also served bravely in defense of our country. I am pleased that the bill before us corrects this situation.

One of these groups that are now eligible under this provision is American Volunteer Group also known as the Flying Tigers. These were civilian pilots and ground crew who fought against the Japanese before and after Pearl Harbor and had one of the most impressive combat records in the Pacific Theater.

During the subcommittee legislative hearing on H.R. 2270, members had the opportunity to meet and hear testimony of 90-year-old former Flying Tiger, Ed Stiles, Sr.

I had the opportunity to meet with Mr. Stiles and his family, and it was an absolute pleasure to hear his stories about the brave pilots and ground crews of the Flying Tigers who saved countless American lives by tying up Japanese air forces in China before and after Pearl Harbor.

I want to thank my colleagues for including these two provisions in H.R. 3219, as amended. I urge my colleagues to support this legislation.

Mr. HARE. Mr. Speaker, I rise in strong support of H.R. 3219, the Veterans' Insurance and Health Care Improvements Act of 2009.

Earlier in this session, I introduced H.R. 1302, a bill to create a full-time Director of Physician Assistant (PA) Services in the Department of Veterans Affairs (VA) Central Office. I would like to thank my colleague, Representative JERRY MORAN, for his leadership with me on this bill, as well as Chairmen FILNER and MICHAUD, Ranking Members BUYER and BROWN and many other VA Committee colleagues for joining us as cosponsors".

Today, I am very pleased to speak in support of H.R. 3219, which incorporates the provisions of my bill and eight other bills that were favorably considered by the House Committee on Veterans' Affairs.

PAs have long been a key component in the Veterans Health Administration (VHA). Almost two thousand PAs are currently employed by the VA, roughly 30 percent of whom are veterans. While the PA Advisor position, established by Congress in 2000, has been valuable, many problems exist.

For example, as the American Academy of Physician Assistants (AAPA) explained in written testimony on October 18, 2007, "In one case, a local facility decided that a PA could not write outpatient prescriptions despite licensure in the state allowing prescriptive authority. In other facilities, PAs were told that the VA facility can not use PAs and will not hire PAs." These inconsistencies and restrictions not only hinder PAs currently employed by the VA, but also discourage PAs from even entering the VA system, ultimately impacting the medical care of our nation's veterans.

PAs are the fourth fastest growing profession in the country, yet the VA is simply not competitive with the private sector for new PA graduates. The lack of a Director of PA Services at the VA prevents necessary recruitment and retention of the PA workforce in the VA at a time when we need more health care professionals to provide necessary care to our Veterans.

Considering the fact that nearly 40 percent of all VA PAs are projected to retire in the next five years, the VA is in danger of losing its PA workforce unless serious focus is directed toward recruitment and retention of this critical group.

One of the biggest challenges facing current and future PAs in the VA system is their exclusion from recruitment and retention benefits. The VA designates physicians and Nurse Practitioners (NPs) as critical occupations. As such, these individuals receive priority in scholarships and loan repayment programs. Unfortunately, the VA has not designated the PA profession as a critical occupation despite the fact that the VA has determined PAs and NPs functionally interchangeable.

Additionally, VA medical facilities, at times, post vacant positions for NPs only, excluding

PAs. There is also a hiring trend in the VA of NPs outpacing PAs nearly three to one, again despite the interchangeability between the two specialties.

Finally, PAs are not included in any of the VA special locality pay bands, so PA salaries are not regularly tracked and reported by the VA. There is evidence that this has resulted in lower pay for PAs employed by the VA compared to other health care professionals. This only serves as yet another deterrent for PAs to enter the VA system.

A permanent Director at the VA Central Office (VACO) would serve as an advocate on behalf of PAs and work to ensure their fair treatment. It is time for the VA to devote serious attention to PA recruitment and retention. Enactment of H.R. 1302 is a start.

As a Congressman who represents a district with rural communities, I know that PAs play a key role in providing medical care in rural and other medically underserved areas. I want to ensure that they are equally well utilized by the VA. I know that medical institutions like the Cleveland Clinic, the Mayo Clinic, the MD Anderson Cancer Clinic at the University of Texas, and others have a Director of PA Services to make sure that the PAs they employ are integrated into their health systems. Additionally, each branch of the Armed Services has a Chief PA to help the military best utilize its PA workforce. It is time for the VA to do the same.

I strongly urge my colleagues to show their support of strengthening Veterans' healthcare by voting "yes" on H.R. 3219.

Mr. TEAGUE. Mr. Speaker, I believe that this bill represents something that we can always use more of in government, a little common sense. In this case, that common sense is a simple fix that will ensure that disabled veterans will be able to receive the housing assistance that they have earned. I am the sponsor of legislation that will make that fix.

My bill, H.R. 2180, will waive VA home loan fees for certain veterans with service-connected disabilities that have been recalled to active service. I am proud to say that this provision has been included in H.R. 3219.

Currently, the Department of Veterans Affairs underwrites home loans that are made by private lenders to eligible veterans. The benefits of having a VA home loan are many. For example, the buyer is informed of reasonable value, the interest rate is negotiable, and there are no mortgage insurance premiums. Veterans also have the right to prepay without penalty, and the VA provides assistance to veteran borrowers in default due to financial difficulty.

Additionally, many disabled veterans and some injured soldiers qualify for a waiver of home loan fees. Unfortunately, however, a different part of the law prevents an eligible servicemember or veteran from receiving a home loan funding fee waiver if the veteran is called up back to active duty service. This bill gets rid of this oversight in the law and allows all eligible servicemembers to receive the fee waiver, whether or not they have been called back to service.

Mr. Speaker, I simply think that it is wrong that someone who has served their country and been injured as a result of that service be penalized because they are returning to service.

This provision represents a common-sense solution to a problem that I do not think anyone anticipated. I believe that when the Congress established the VA Home loan program they had the best of intentions. This program has created an opportunity for thousands of veterans that simply want to be part of the American dream. With this bill we can correct an oversight that will help even more veterans along the way.

I would like to take this time to thank the staff members of the Economic Opportunity Subcommittee who lent their expertise during the drafting of this bill. I truly believe that this one measure can open up many doors of opportunity to our veterans and hope that my colleagues will support its passage.

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

The SPEAKER pro tempore. The question is on the motion offered by the gentleman from California (Mr. FILNER) that the House suspend the rules and pass the bill, H.R. 3219, as amended.

The question was taken; and (two-thirds being in the affirmative) the rules were suspended and the bill, as amended, was passed.

A motion to reconsider was laid on the table.

DISABLED VETERANS HOME IMPROVEMENT AND STRUCTURAL ALTERATION GRANT INCREASE ACT OF 2009

Mr. FILNER. Mr. Speaker, I move to suspend the rules and pass the bill (H.R. 1293) to amend title 38, United States Code, to provide for an increase in the amount payable by the Secretary of Veterans Affairs to veterans for improvements and structural alterations furnished as part of home health services.

The Clerk read the title of the bill.

The text of the bill is as follows:

H.R. 1293

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

SECTION 1. SHORT TITLE.

This Act may be cited as the "Disabled Veterans Home Improvement and Structural Alteration Grant Increase Act of 2009".

SEC. 2. INCREASE IN AMOUNT AVAILABLE TO DISABLED VETERANS FOR IMPROVEMENTS AND STRUCTURAL ALTERATIONS FURNISHED AS PART OF HOME HEALTH SERVICES.

(a) INCREASE.—Section 1717(a)(2) of title 38, United States Code, is amended—

(1) in subparagraph (A), by striking "$4,100" and inserting "$6,800"; and

(2) in subparagraph (B), by striking "$1,200" and inserting "$2,000".

(b) EFFECTIVE DATE.—The amendments made by subsection (a) shall apply with respect to a veteran who first applies for benefits under section 1717(a)(2) of title 38, United States Code, on or after the date of the enactment of this Act.

(c) APPLICABILITY.—A veteran who exhausts such veteran's eligibility for benefits under section 1717(a)(2) of title 38, United States Code, before the date of the enactment of this Act, is not entitled to additional benefits under such section by reason of the amendments made by subsection (a).

The SPEAKER pro tempore. Pursuant to the rule, the gentleman from California (Mr. FILNER) and the gentleman from Florida (Mr. STEARNS) each will control 20 minutes.

The Chair recognizes the gentleman from California.

Mr. FILNER. Mr. Speaker, I want to thank the ranking member of our committee, Mr. BUYER of Indiana, for introducing this bill.

In the past, many of our veterans have returned from combat with life-changing injuries and illnesses. Congress saw fit to provide special adaptive grants to help them improve their quality of life. Today, another generation of servicemembers is returning from the wars in Iraq and Afghanistan with even more egregious life-changing injuries and illnesses due to the development of better equipment and body armor that keeps them alive, albeit seriously injured.

The bill provides for a long overdue increase in the amount payable to veterans for improvements and structural alterations to their homes. This amount, Mr. Speaker, has not been increased for 17 years. The bill would increase the grant amounts from $4,100 to $6,800 for veterans with a service-connected disability and from $1,200 to $2,000 for veterans with nonservice-connected disability. Importantly, Home Improvement and Structural Alteration grants, called HISA, are the only grants available to nonservice-connected veterans and those conditions.

HISA grants can be used in conjunction with other adaptive housing grants offered through the Veterans Benefits Administration to help cover some of the additional costs a veteran may be facing when building or adapting a home to meet his or her unique needs. We owe it to our veterans to keep pace with the many different needs and challenges that they face on a daily basis. Seventeen years is a long time to wait.

I urge my colleagues to support H.R. 1293.

Mr. Speaker, I reserve the balance of my time.

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

Mr. Speaker, I rise in strong support of H.R. 1293, the Disabled Veterans Home Improvement and Structural Alteration Grant Increase Act of 2009.

H.R. 1293 is a bill that our ranking member, Mr. BUYER, introduced to increase the authorized amount of a Home Improvement and Structural Alteration, or, as commonly referred to as HISA, grant that VA provides as part of home health services. Mr. Speaker, it is an important benefit that is available to veterans with service-connected and nonservice-connected disabilities who simply require home adaptations to continue treatment for their disability in their home, and I am proud to be an original cosponsor of this bill.

The HISA grant is used for such things as widening doors—something simple that will have a great impact for these veterans—lowering kitchen and bathroom counters and sinks,

making simple handrails and wall switches and window controls easy and accessible to these folks so they can operate, and installing elevators and stair lifts, which will help many of the veterans who are in wheelchairs.

This grant is distinct from the specifically adapted housing grants that are also available to service-connected disabled veterans. The HISA grant can also be used in addition to these grants.

Unfortunately, the HISA grant ceiling has not been raised in 17 years; yet the cost of home modification, as we all know, has increased over the years.

In addition, there is a new generation of veterans from Operation Enduring Freedom and Operation Iraqi Freedom returning home with serious combat injuries.

VA reports that the number of service-connected veterans using the HISA grants grew by almost 20 percent from fiscal year 2000 to 2008, and VA expects that the trend will continue to increase at the average of 1½ percent per year.

□ 1430

Under current law the maximum HISA grant is $4,100 for service-connected veterans and $1,200 for nonservice-connected veterans. H.R. 1293 would simply raise the amounts to $6,800 for service-connected veterans and $2,000 for nonservice-connected veterans. The proposed increase would account for inflation and simply provide a reasonable amount for the type of home modifications Congress intended the program to provide for these service-connected veterans.

H.R. 1293 is a bipartisan bill that is supported by the VA and the Veterans Service Organizations, and I urge my colleagues to support the bill.

Mr. Speaker, I reserve the balance of my time.

Mr. FILNER. Mr. Speaker, I yield such time as he may consume to the gentleman from American Samoa (Mr. FALEOMAVAEGA), a great supporter of veterans in our Nation.

(Mr. FALEOMAVAEGA asked and was given permission to revise and extend his remarks.)

Mr. FALEOMAVAEGA. I certainly want to thank the chairman of our House Veterans' Affairs Committee, the gentleman from California, Chairman FILNER, and my good friend from Florida on the other side for aisle for their management. And I also commend the ranking member of the Veterans' Affairs Committee, the gentleman from Indiana (Mr. BUYER), for his sponsorship of this important bill.

Mr. Speaker, H.R. 1293 would increase the amount authorized by the Department of Veterans Affairs under the Health Improvement and Structural Alterations, HISA, from $4,100 to $6,800 for improvements and structural alterations for homes of veterans with service-related disabilities of 50 percent or more, and from $1,200 to $2,000 for veterans with service-connected disabilities less than 50 percent.

Mr. Speaker, HISA continues to provide for our veterans necessary funding for structural and home improvements such as widening doors; putting in handrails or special lighting; making kitchens, bathrooms, windows, electrical outlets and switches more accessible; and building ramps or improving entrance paths and driveways. These structural and home improvements are needed to meet the needs of our disabled veterans.

HISA was created in 1973 out of concern for disabled veterans returning to their homes without proper accommodations. In 1976 there was a ceiling placed, and veterans with service-connected disabilities were receiving $2,500 and veterans with nonservice-related disabilities received only $600. In 1992, public law increased the lifetime benefit limit from $2,500 to $4,100 for service-connected veterans and from $600 to $1,200 to nonservice-connected veterans.

Today the ceiling has been in the process for 17 years even though the costs for home modifications have increased tremendously. No one deserves to prolong their suffering. I believe that this must be addressed to show our continued appreciation for their service and all the accommodations to serve their disabilities should be made.

Mr. Speaker, with the new generation of soldiers returning from Operation Enduring Freedom and Operation Iraqi Freedom, this increase is significantly necessary. Our servicemembers have served our country at its time of greatest need and have protected our Nation's best interests, and I believe we should take care of their needs and interests when they return home.

This legislation is necessary, and I urge my colleagues to support this bill.

Mr. STEARNS. Mr. Speaker, in closing, I would like to take the opportunity to thank the chairman and ranking member of the Subcommittee on Health, MIKE MICHAUD of Maine and HENRY BROWN of South Carolina, for their quick consideration of this legislation. I would also like to express my gratitude to the chairman, Mr. FILNER, and Ranking Member BUYER for moving this bill to the floor so quickly.

I urge my colleagues to support H.R. 1293.

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

GENERAL LEAVE

Mr. FILNER. Mr. Speaker, I ask unanimous consent that all Members may have 5 legislative days in which to revise and extend their remarks and include extraneous material on H.R. 1293.

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

There was no objection.

Mr. BUYER. Mr. Speaker, I rise in support of H.R. 1293, the Disabled Veterans Home Improvement and Structural Alteration Grant Increase Act of 2009.

H.R. 1293 is a bill I introduced to increase the amount payable to a disabled veteran under the Department of Veterans Affairs, VA, Home Improvement and Structural Alteration Program.

Known as the HISA grant, this is a significant benefit that provides seriously disabled veterans the ability to make home alterations to receive in-home medical care.

Congress first authorized VA to establish the HISA program as part of outpatient care for home health services in 1973. The benefit is paid from the medical care appropriation and is available to both veterans with service-connected and non-service connected disabilities. A service-connected veteran can receive a HISA grant in addition to other home adaptations grants available through the Veterans Benefits Administration.

We have been engaged in the Global War on Terror for nearly eight years and are seeing an increasing number of servicemembers returning from Iraq and Afghanistan utilizing VA health care.

Last year, a joint Department of Defense, DOD, and VA Inspectors Generals review of the care transition process for injured OEF/OIF service members found that continuity of care was hindered by the inability of an injured active duty service member to obtain a HISA grant prior to discharge. Responding to this need, we enacted Public Law 110–289 to allow VA to provide such grants to eligible service members prior to their discharge from military service.

However, we did not raise the amount of the grant which is currently $4,100 for service-connected veterans and $1,200 for non-service connected veterans. In fact, the ceiling has not been raised since 1992.

H.R. 1293 would raise the maximum amount of a HISA grant to $6,800 for service-connected veterans and $2,000 for non-service connected veterans. The proposed increase reflects an additional 3 percent for each year since 1992 to account for inflation and the increased cost of making home improvements—a long overdue 66 percent increase.

It is important that we make sure that VA benefits, such as the HISA grant stay relevant and adequately meet the needs of today's veterans.

I urge my colleagues to support H.R. 1293. It is a good bill that shares bipartisan support.

Mr. FILNER. I urge my colleagues to unanimously support the bill, and I yield back the balance of my time.

The SPEAKER pro tempore. The question is on the motion offered by the gentleman from California (Mr. FILNER) that the House suspend the rules and pass the bill, H.R. 1293.

The question was taken.

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

Mr. STEARNS. 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.

VETERANS NONPROFIT RESEARCH AND EDUCATION CORPORATIONS ENHANCEMENT ACT OF 2009

Mr. FILNER. Mr. Speaker, I move to suspend the rules and pass the bill (H.R. 2770) to amend title 38, United States Code, to modify and update provisions of law relating to nonprofit research and education corporations, and for other purposes, as amended.

The Clerk read the title of the bill.

The text of the bill is as follows:

H.R. 2770

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

SECTION 1. SHORT TITLE.

This Act may be cited as the ''Veterans Nonprofit Research and Education Corporations Enhancement Act of 2009''.

SEC. 2. GENERAL AUTHORITIES ON ESTABLISHMENT OF CORPORATIONS.

(a) AUTHORIZATION OF MULTI-MEDICAL CENTER RESEARCH CORPORATIONS.—

(1) IN GENERAL.—Section 7361 of title 38, United States Code, is amended—

(A) by redesignating subsection (b) as subsection (e); and

(B) by inserting after subsection (a) the following new subsection (b):

''(b)(1) Subject to paragraph (2), a corporation established under this subchapter may facilitate the conduct of research, education, or both at more than one medical center. Such a corporation shall be known as a 'multi-medical center research corporation'.

''(2) The board of directors of a multi-medical center research corporation under this subsection shall include the official at each Department medical center concerned who is, or who carries out the responsibilities of, the medical center director of such center as specified in section 7363(a)(1)(A)(i) of this title.

''(3) In facilitating the conduct of research, education, or both at more than one Department medical center under this subchapter, a multi-medical center research corporation may administer receipts and expenditures relating to such research, education, or both, as applicable, performed at the Department medical centers concerned.''.

(2) EXPANSION OF EXISTING CORPORATIONS TO MULTI-MEDICAL CENTER RESEARCH CORPORATIONS.—Such section is further amended by adding at the end the following new subsection:

''(f) A corporation established under this subchapter may act as a multi-medical center research corporation under this subchapter in accordance with subsection (b) if—

''(1) the board of directors of the corporation approves a resolution permitting facilitation by the corporation of the conduct of research, education, or both at the other Department medical center or medical centers concerned; and

''(2) the Secretary approves the resolution of the corporation under paragraph (1).''.

(b) RESTATEMENT AND MODIFICATION OF AUTHORITIES ON APPLICABILITY OF STATE LAW.—

(1) IN GENERAL.—Section 7361 of such title, as amended by subsection (a) of this section, is further amended by inserting after subsection (b) the following new subsection (c):

''(c) Any corporation established under this subchapter shall be established in accordance with the nonprofit corporation laws of the State in which the applicable Department medical center is located and shall, to the extent not inconsistent with any Federal law, be subject to the laws of such State. In the case of any multi-medical center research corporation that facilitates the conduct of research, education, or both at Department medical centers located in different States, the corporation shall be established in accordance with the nonprofit corporation laws of the State in which one of such Department medical centers is located.''.

(2) CONFORMING AMENDMENT.—Section 7365 of such title is repealed.

(c) CLARIFICATION OF STATUS OF CORPORATIONS.—Section 7361 of such title, as amended by this section, is further amended—

(1) in subsection (a), by striking the second sentence; and

(2) by inserting after subsection (c) the following new subsection (d):

''(d)(1) Except as otherwise provided in this subchapter or under regulations prescribed by the Secretary, any corporation established under this subchapter, and its officers, directors, and employees, shall be required to comply only with those Federal laws, regulations, and executive orders and directives that apply generally to private nonprofit corporations.

''(2) A corporation under this subchapter is not—

''(A) owned or controlled by the United States; or

''(B) an agency or instrumentality of the United States.''.

(d) REINSTATEMENT OF REQUIREMENT FOR 501(c)(3) STATUS OF CORPORATIONS.—Subsection (e) of section 7361 of such title, as redesignated by subsection (a)(1) of this section, is further amended by inserting ''section 501(c)(3) of'' after ''exempt from taxation under''.

SEC. 3. CLARIFICATION OF PURPOSES OF CORPORATIONS.

(a) CLARIFICATION OF PURPOSES.—Subsection (a) of section 7362 of title 38, United States Code, is amended in the first sentence—

(1) by striking ''Any corporation'' and all that follows through ''facilitate'' and inserting ''A corporation established under this subchapter shall be established to provide a flexible funding mechanism for the conduct of approved research and education at one or more Department medical centers and to facilitate functions related to the conduct of''; and

(2) by inserting before the period at the end the following: ''or centers''.

(b) MODIFICATION OF DEFINED TERM RELATING TO EDUCATION AND TRAINING.—Subsection (b) of such section is amended in the matter preceding paragraph (1) by striking ''the term 'education and training' '' and inserting ''the term 'education' includes education and training and''.

(c) REPEAL OF ROLE OF CORPORATIONS WITH RESPECT TO FELLOWSHIPS.—Paragraph (1) of subsection (b) of such section is amended by striking the flush matter following subparagraph (C).

(d) AVAILABILITY OF EDUCATION FOR FAMILIES OF VETERAN PATIENTS.—Paragraph (2) of subsection (b) of such section is amended by striking ''to patients and to the families'' and inserting ''and includes education and training for patients and families''.

SEC. 4. MODIFICATION OF REQUIREMENTS FOR BOARDS OF DIRECTORS OF CORPORATIONS.

(a) REQUIREMENTS FOR DEPARTMENT BOARD MEMBERS.—Paragraph (1) of section 7363(a) of title 38, United States Code, is amended to read as follows:

''(1) with respect to the Department medical center—

''(A)(i) the director (or directors of each Department medical center, in the case of a multi-medical center research corporation);

''(ii) the chief of staff; and

''(iii) as appropriate for the activities of such corporation, the associate chief of staff for research and the associate chief of staff for education; or

''(B) in the case of a Department medical center at which one or more of the positions referred to in subparagraph (A) do not exist, the official or officials who are responsible for carrying out the responsibilities of such position or positions at the Department medical center; and''.

(b) REQUIREMENTS FOR NON-DEPARTMENT BOARD MEMBERS.—Paragraph (2) of such section is amended—

(1) by inserting ''not less than two'' before ''members''; and

(2) by striking ''and who'' and all that follows through the period at the end and inserting ''and who have backgrounds, or business, legal, financial, medical, or scientific expertise, of benefit to the operations of the corporation.''.

(c) CLARIFICATION THAT DEPARTMENT EMPLOYEES MAY SERVE AS EXECUTIVE DIRECTORS.—Subsection (b) of section 7363 of such title is amended in the first sentence, by inserting after ''executive director who'' the following: ''may be an employee of the Department and who''.

(d) CONFLICTS OF INTEREST.—Subsection (c) of section 7363 of such title is amended by striking '', employed by, or have any other financial relationship with'' and inserting ''or employed by''.

SEC. 5. CLARIFICATION OF POWERS OF CORPORATIONS.

(a) IN GENERAL.—Section 7364 of title 38, United States Code, is amended to read as follows:

''§ 7364. General powers

''(a) IN GENERAL.—(1) A corporation established under this subchapter may, solely to carry out the purposes of this subchapter—

''(A) accept, administer, retain, and spend funds derived from gifts, contributions, grants, fees, reimbursements, and bequests from individuals and public and private entities;

''(B) enter into contracts and agreements with individuals and public and private entities;

''(C) subject to paragraph (2), set fees for education and training facilitated under section 7362 of this title, and receive, retain, administer, and spend funds in furtherance of such education and training;

''(D) reimburse amounts to the applicable appropriation account of the Department for the Office of General Counsel for any expenses of that Office in providing legal services attributable to research and education agreements under this subchapter; and

''(E) employ such employees as the corporation considers necessary for such purposes and fix the compensation of such employees.

''(2) Fees charged pursuant to paragraph (1)(C) for education and training described in that paragraph to individuals who are officers or employees of the Department may not be paid for by any funds appropriated to the Department.

''(3) Amounts reimbursed to the Office of General Counsel under paragraph (1)(D) shall be available for use by the Office of the General Counsel only for staff and training, and related travel, for the provision of legal services described in that paragraph and shall remain available for such use without fiscal year limitation.

''(b) TRANSFER AND ADMINISTRATION OF FUNDS.—(1) Except as provided in paragraph (2), any funds received by the Secretary for the conduct of research or education at a Department medical center or centers, other than funds appropriated to the Department, may be transferred to and administered by a corporation established under this subchapter for such purposes.

''(2) A Department medical center may reimburse the corporation for all or a portion of the pay, benefits, or both of an employee of the corporation who is assigned to the Department medical center if the assignment is carried out pursuant to subchapter VI of chapter 33 of title 5.

''(3) A Department medical center may retain and use funds provided to it by a corporation established under this subchapter. Such funds shall be credited to the applicable appropriation account of the Department and shall be available, without fiscal year limitation, for the purposes of that account.

''(c) RESEARCH PROJECTS.—Except for reasonable and usual preliminary costs for project planning before its approval, a corporation established under this subchapter may not spend funds for a research project unless the project is approved in accordance with procedures prescribed by the Under Secretary for Health for research carried out with Department funds. Such procedures shall include a scientific review process.

''(d) EDUCATION ACTIVITIES.—Except for reasonable and usual preliminary costs for activity

planning before its approval, a corporation established under this subchapter may not spend funds for an education activity unless the activity is approved in accordance with procedures prescribed by the Under Secretary for Health.

''(e) POLICIES AND PROCEDURES.—The Under Secretary for Health may prescribe policies and procedures to guide the spending of funds by corporations established under this subchapter that are consistent with the purpose of such corporations as flexible funding mechanisms and with Federal and State laws and regulations, and executive orders, circulars, and directives that apply generally to the receipt and expenditure of funds by nonprofit organizations exempt from taxation under section 501(c)(3) of the Internal Revenue Code of 1986.''.

(b) CONFORMING AMENDMENT.—Section 7362(a) of such title, as amended by section 3(a)(1) of this Act, is further amended by striking the last sentence.

SEC. 6. REDESIGNATION OF SECTION 7364A OF TITLE 38, UNITED STATES CODE.

(a) REDESIGNATION.—Section 7364A of title 38, United States Code, is redesignated as section 7365 of such title.

(b) CLERICAL AMENDMENTS.—The table of sections at the beginning of chapter 73 of such title is amended—

(1) by striking the item relating to section 7364A; and

(2) by striking the item relating to section 7365 and inserting the following new item:

''7365. Coverage of employees under certain Federal tort claims laws.''.

SEC. 7. IMPROVED ACCOUNTABILITY AND OVERSIGHT OF CORPORATIONS.

(a) ADDITIONAL INFORMATION IN ANNUAL REPORTS.—Subsection (b) of section 7366 of title 38, United States Code, is amended to read as follows:

''(b)(1) Each corporation shall submit to the Secretary each year a report providing a detailed statement of the operations, activities, and accomplishments of the corporation during that year.

''(2)(A) A corporation with revenues in excess of $500,000 for any year shall obtain an audit of the corporation for that year.

''(B) A corporation with annual revenues between $100,000 and $500,000 shall obtain an audit of the corporation at least once every three years.

''(C) Any audit under this paragraph shall be performed by an independent auditor.

''(3) The corporation shall include in each report to the Secretary under paragraph (1) the following:

''(A) The most recent audit of the corporation under paragraph (2).

''(B) The most recent Internal Revenue Service Form 990 'Return of Organization Exempt from Income Tax' or equivalent and the applicable schedules under such form.''.

(b) CONFLICT OF INTEREST POLICIES.—Subsection (c) of such section is amended to read as follows:

''(c) Each director, officer, and employee of a corporation established under this subchapter shall be subject to a conflict of interest policy adopted by that corporation.''.

(c) ESTABLISHMENT OF APPROPRIATE PAYEE REPORTING THRESHOLD.—Subsection (d)(3)(C) of such section is amended by striking ''$35,000'' and inserting ''$50,000''.

The SPEAKER pro tempore. Pursuant to the rule, the gentleman from California (Mr. FILNER) and the gentleman from Florida (Mr. STEARNS) each will control 20 minutes.

The Chair recognizes the gentleman from California.

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

I rise in strong support of H.R. 2770. VA research is a very vital mission of the Department of Veterans Affairs. Focusing on research for the special health care of our veterans, VA's program has been recognized for excellence over many, many years. Boasting such developments as the cardiac pacemaker and the CAT scan, VA also lays claim to three Nobel Laureates and six Lasker Award winners.

In 1988 Congress allowed the Secretary of the Department of Veterans Affairs to authorize the establishment of nonprofit research corporations. Currently, 82 of these NPCs provide their affiliated VA health care systems and medical centers with a highly valued means of administering non-VA Federal research grants and private sector funds in support of VA research and education.

The fundamental purpose of these nonprofits is to serve veterans by supporting VA research and medical education to improve the quality of care that veterans receive. It has been 20 years now since the creation of the NPCs, and in that time the statute has never been updated. The purpose of this bill is to modernize and clarify that statute relating to nonprofit research education corporations so they can better support the research that is undertaken in the VA.

Specifically, the bill expands the general authorities on establishing nonprofit research corporations by authorizing the creation of multi-medical center research corporations where two or more VA medical centers share one corporation. It also clarifies the purposes of the corporations by allowing them to support functions related to research and education, such as travel to scientific conferences, improvements in laboratories with new equipment purchase, and support for the institutional review board.

Additionally, the bill modifies the requirements for the board of directors of the corporations so that they can acquire board members with legal and financial expertise for sound governance and financial management of the corporations. The legislation also provides clarification on reimbursements and other fee charges.

Finally, H.R. 2770 improves accountability and oversight of the corporations by detailing the audit requirements so that they are consistent with OMB Circular A–133, which provides guidance on audits, as well as clarifying that employees of the corporations are to be subject to a conflict of interest policy adopted by the corporation, instead of applying the Federal conflict of interest regulations to non-Federal employees.

I urge my colleagues to support H.R. 2770, as amended.

Mr. Speaker, I reserve the balance of my time.

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

Mr. Speaker, I rise in support of H.R. 2770, as amended, the Veterans Nonprofit Research and Education Corporations Enhancement Act of 2009. This bill would amend title 38, United States Code, to modify and update provisions of law relating to nonprofit research and education corporations, and for other purposes.

VA nonprofit research corporations, or NPCs as they are called, are independent entities that serve to provide a flexible funding mechanism for the use of non-VA funds to conduct VA-approved research. Last year, with $250 million in revenue, these organizations supported more than 4,000 research and education programs to benefit our veterans.

It has been 20 years, however, since we passed the law that established this public-private partnership, and it is important for us to ensure that the statute stays relevant for today's complex research and compliance requirements and provides VA with the necessary oversight authority to simply safeguard the management of these funds. This bill, H.R. 2770, as amended, would update and modernize the law to improve the operation and strengthen the oversight of these not-for-profit entities.

A key provision of the bill would allow an NPC to be shared among a number of VA medical centers to simply reduce administrative costs and to allow smaller NPCs to better achieve the potential to support VA research. So this bill would provide a number of new guidance and policy requirements to improve management of the NPCs and simply boost VA's oversight capability.

I want to thank the chairman, Mr. FILNER, and the ranking member, Mr. BUYER, for working in concert to jointly sponsor this bill and move it forward, as they have done. This bill is supported by the VA, the Friends of VA Medical Care and Health Research, and the National Association of VA Research and Education Foundations.

I would like to again offer my congratulations to the chairman and ranking member of the subcommittee, MIKE MICHAUD and HENRY BROWN, for their hard work on the bill, and obviously I appreciate Mr. FILNER and Mr. BUYER, the ranking member, for working together. I urge my colleagues to support the bill.

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

GENERAL LEAVE

Mr. FILNER. Mr. Speaker, I ask unanimous consent that all Members may have 5 legislative days in which to revise and extend their remarks and include extraneous material on H.R. 2770, as amended.

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

There was no objection.

Mr. BUYER. Mr. Speaker, I rise in support of H.R. 2770, as amended, the Veterans Nonprofit Research and Education Corporations Enhancement Act of 2009.

I am pleased to join with Chairman FILNER in introducing and supporting this legislation that would revise and improve the laws governing VA Nonprofit Research Corporations (NPCs).

These state chartered, private organizations are dedicated entirely to supporting approved research and education at affiliated VA medical centers. They rely solely on non appropriated funds to conduct their activities, but are subject to VA oversight and regulation. There are 86 NPCs located in forty-one states, Puerto Rico, and the District of Columbia.

However, the law that authorized and governs the operation of these organizations has not been updated since 1988. Last year, the VA Office of Inspector General (IG) conducted an audit and found that there is a need to strengthen VA oversight and control over NPC funds and administration.

H.R. 2770, as amended would address concerns raised by the IG and update other provisions of the law to improve the operation of the non-profits to better meet the needs of the VA.

The primary enhancements would include allowing VA to establish Multi-Medical Center Research Corporations, which is a voluntary sharing of one NPC among two or more VA Medical Centers, to increase research capabilities at smaller facilities.

The bill would change requirements for Board membership to include at least two non-federal employee members that have business, legal, financial, medical, or scientific expertise that would benefit the NPC.

It would clarify the circumstances in which an NPC could accept, administer, retain, and spend funds received; enter into contracts and agreements; charge and retain fees for educational programs; and provide certain reimbursements to VA for legal services.

The bill would also raise the threshold for requirements to conduct independent audits and require that all NPCs establish a comprehensive conflict of interest policy.

It is timely that we enact this legislation to strengthen VA's authority to guide expenditures and increase accountability and oversight of NPCs. It is important to enhancing VA's ability to capitalize on private research funds to improve the quality of care for our nation's veterans. I urge my colleagues to support H.R. 2770, as amended.

Mr. FILNER. Mr. Speaker, I urge my colleagues to unanimously support the bill, and I yield back the balance of my time.

The SPEAKER pro tempore. The question is on the motion offered by the gentleman from California (Mr. FILNER) that the House suspend the rules and pass the bill, H.R. 2770, as amended

The question was taken; and (two-thirds being in the affirmative) the rules were suspended and the bill, as amended, was passed.

A motion to reconsider was laid on the table.

CAREGIVER ASSISTANCE AND RESOURCE ENHANCEMENT ACT

Mr. FILNER. Mr. Speaker, I move to suspend the rules and pass the bill (H.R. 3155) to amend title 38, United States Code, to provide certain caregivers of veterans with training, support, and medical care, and for other purposes, as amended.

The Clerk read the title of the bill.

The text of the bill is as follows:

H.R. 3155

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

SECTION 1. SHORT TITLE.

This Act may be cited as the ''Caregiver Assistance and Resource Enhancement Act''.

SEC. 2. SUPPORT SERVICES FOR CAREGIVERS.

(a) DEFINITIONS.—Section 1701 of title 38, United States Code, is amended by adding at the end the following new paragraphs:

''(10) The term 'caregiver services' means non-institutional extended care (as used in paragraph (6)).

''(11) The term 'caregiver' means an individual who—

''(A) with respect to a disabled veteran who is enrolled in the health care system established under section 1705(a) of this title, provides caregiver services to such veteran for such disability; and

''(B) is not a member of the family (including parents, spouses, children, siblings, step-family members, and extended family members) of such veteran.

''(12) The term 'family caregiver' means an individual who—

''(A) with respect to a disabled veteran who is enrolled in the health care system established under section 1705(a) of this title, provides caregiver services to such veteran for such disability;

''(B) is a member of the family (including parents, spouses, children, siblings, step-family members, and extended family members) of such veteran; and

''(C) may or may not reside with such veteran.''.

(b) SUPPORT SERVICES.—

(1) IN GENERAL.—Subchapter II of chapter 17 of title 38, United States Code, is amended by adding at the end the following new section:

''§ 1720G. Support services for caregivers and family caregivers

''(a) ESTABLISHMENT OF PROGRAM.—The Secretary shall develop and carry out a program for caregivers and family caregivers that includes the following:

''(1) The educational sessions, stipends, and access to support services provided under this section.

''(2) Counseling and other services provided under section 1782 of this title.

''(3) Respite care provided under section 1720B of this title.

''(4) With respect to family caregivers, medical care provided under section 1781(e) of this title.

''(5) Travel expenses provided under section 111(e) of this title.

''(b) EDUCATIONAL SESSIONS.—(1) The Secretary shall make available educational sessions for caregivers, family caregivers, and individuals described in paragraph (2). Such educational sessions shall—

''(A) be made available both in person and on an Internet website;

''(B) incorporate available technology, including telehealth technology to the extent practicable; and

''(C) teach techniques, strategies, and skills for caring for a disabled veteran, including, at a minimum, a veteran who—

''(i) was deployed in support of Operation Enduring Freedom or Operation Iraqi Freedom; and

''(ii) has post-traumatic stress disorder, a traumatic brain injury, or other severe injury or illness.

''(2) Individuals described in this paragraph are individuals who provide caregivers and family caregivers with support under this chapter or through an aging network (as defined in section 102(5) of the Older Americans Act of 1965 (42 U.S.C. 3002(5)), including—

''(A) respite care providers;

''(B) nursing care providers; and

''(C) counselors.

''(c) STIPENDS.—(1) The Secretary shall provide monthly stipends to eligible family caregivers described in paragraph (2).

''(2) An eligible family caregiver described in this paragraph is a family caregiver who—

''(A) provides caregiver services to a veteran who—

''(i) was deployed in support of Operation Enduring Freedom or Operation Iraqi Freedom; and

''(ii) for purposes of this subsection, is determined by the Secretary—

''(I) to have a service-connected disability or illness that is severe;

''(II) to be in need of caregiver services, such that without such services, the veteran would require hospitalization, nursing home care, or other residential institutional care; and

''(III) based on an examination by a physician employed by the Department (or, in areas where no such physician is available, by a physician carrying out such function under a contract or fee arrangement), to be unable to carry out the activities (including instrumental activities) of daily living;

''(B) with respect to such veteran, meets the definition of the term 'family caregiver' under section 1701(12) of this title;

''(C) is designated by such veteran as the primary family caregiver for such veteran; and

''(D) is not—

''(i) employed by a home health care agency to provide such caregiver services; or

''(ii) otherwise receiving payment for such services.

''(3) The authority of the Secretary to provide a stipend to an eligible family caregiver under this subsection shall expire on October 1, 2012.

''(d) ACCESS TO SUPPORT SERVICES.—The Secretary shall provide caregivers and family caregivers with information concerning public, private, and non-profit agencies that offer support to caregivers. In providing such information, the Secretary shall—

''(1) collaborate with the Assistant Secretary for Aging of the Department of Health and Human Services in order to provide caregivers and family caregivers access to aging and disability resource centers under the Administration on Aging of the Department of Health and Human Services; and

''(2) include on an Internet website that is dedicated to caregivers and family caregivers—

''(A) a directory of services available for caregivers and family caregivers at the county level; and

''(B) tools that provide caregivers and family caregivers with the ability to interact with each other for the purpose of fostering peer support and creating support networks.

''(e) INFORMATION AND OUTREACH.—(1) The Secretary shall conduct outreach to inform disabled veterans and the families of such veterans of the following:

''(A) Medical care, educational sessions, stipends, and other services available for caregivers and family caregivers under this chapter.

''(B) The ability of a family caregiver to be trained and certified by a home health care agency in order to be paid by such agency for providing caregiver services.

''(2) Outreach under this subsection shall include, at a minimum, the following:

''(A) Public service announcements.

''(B) Brochures and pamphlets.

''(C) Full use of Internet-based outreach methods, including such methods designed specifically for veterans and the families of such veterans who reside in rural areas.

''(3) With respect to a Department employee providing case management services (as defined in section 1720C(b)(2) of this title) to a disabled veteran, the Secretary shall ensure that such employee provides a caregiver or family caregiver of such veteran with information on the services described in subparagraphs (A) and (B) of paragraph (1).''.

(2) CLERICAL AMENDMENT.—The table of sections at the beginning of chapter 17 of title 38,

United States Code, is amended by inserting after the item related to section 1720F the following new item:

''1720G. Support services for caregivers and family caregivers.''.

(c) PLAN.—Not later than 180 days after the date of the enactment of this Act, the Secretary shall submit to the Committee on Veterans' Affairs of the House of Representatives and the Committee on Veterans' Affairs of the Senate a plan for carrying out section 1720G of title 38, United States Code, as added by subsection (b) of this section.

(d) REPORTS.—Not later than 180 days after the date on which the plan is submitted under subsection (c), and annually thereafter for the following five years, the Secretary shall submit to the Committee on Veterans' Affairs of the House of Representatives and the Committee on Veterans' Affairs of the Senate a report describing the implementation of the plan.

SEC. 3. COUNSELING AND MENTAL HEALTH SERVICES FOR CAREGIVERS AND FAMILY CAREGIVERS.

(a) IN GENERAL.—Section 1782 of title 38, United States Code, is amended—

(1) in the section heading, by adding at the end the following: ***", caregivers, and family caregivers"****; and*

(2) in subsection (c)—

(A) in paragraph (1), by striking ''; or'' and inserting a semicolon;

(B) by redesignating paragraph (2) as paragraph (3); and

(C) by inserting after paragraph (1) the following new paragraph (2):

''(2) a caregiver or family caregiver of a veteran; or''.

(b) CLERICAL AMENDMENT.—The table of sections at the beginning of chapter 17 of title 38, United States Code, is amended by striking the item relating to section 1782 and inserting the following new item:

''1782. Counseling, training, and mental health services for immediate family members, caregivers, and family caregivers.''.

SEC. 4. RESPITE CARE TO ASSIST FAMILY CAREGIVERS.

Section 1720B of title 38, United States Code, is amended—

(1) in subsection (a), by striking ''title.'' and inserting ''title or who receives care from a family caregiver.''; and

(2) by adding at the end the following new subsection:

''(d) In furnishing respite care services under this section, the Secretary shall ensure that such services—

''(1) fulfill the needs of the veteran receiving care (including 24-hour in-home respite care); and

''(2) are appropriate for the veteran with respect to the age of the veteran.''.

SEC. 5. MEDICAL CARE FOR FAMILY CAREGIVERS.

Section 1781 of title 38, United States Code, is amended—

(1) in subsection (a)—

(A) in paragraph (2), by striking ''and'' at the end;

(B) in paragraph (3), by inserting ''and'' at the end; and

(C) by inserting after paragraph (3) the following new paragraph:

''(4) in accordance with subsection (e), a family caregiver,'';

(2) in the third sentence of subsection (b), by striking ''dependent or survivor'' and inserting ''dependent, survivor, or family caregiver''; and

(3) by adding at the end the following new subsection:

''(e)(1) The Secretary shall provide medical care to a family caregiver under this section if the Secretary determines that the family caregiver is not entitled to care or services under a health-plan contract as defined under section 1725(f)(2) of this title (determined, in the case of a health-plan contract as defined in subsection (f)(2)(B) or (f)(2)(C) of such section, without regard to any requirement or limitation relating to eligibility for care or services from any department or agency of the United States).

''(2) In this subsection, a family caregiver is an individual who—

''(A) provides caregiver services to a veteran who—

''(i) was deployed in support of Operation Enduring Freedom or Operation Iraqi Freedom; and

''(ii) for purposes of this subsection, is determined by the Secretary—

''(I) to have a service-connected disability or illness that is severe;

''(II) to be in need of caregiver services, such that without such services, the veteran would require hospitalization, nursing home care, or other residential institutional care; and

''(III) based on an examination by a physician employed by the Department (or, in areas where no such physician is available, by a physician carrying out such function under a contract or fee arrangement), to be unable to carry out the activities (including instrumental activities) of daily living;

''(B) with respect to such veteran, meets the definition of the term 'family caregiver' under section 1701(12) of this title; and

''(C) is designated by such veteran as the primary family caregiver for such veteran.

''(3) The authority of the Secretary to provide medical care to a family caregiver under this section shall expire on October 1, 2012.''.

SEC. 6. LODGING AND SUBSISTENCE FOR FAMILY CAREGIVERS.

Section 111(e) of title 38, United States Code, is amended—

(1) by striking ''When'' and inserting the following: ''(1) Except as provided in paragraph (2), when''; and

(2) by adding at the end the following new paragraphs:

''(2) Without regard to whether a covered veteran entitled to mileage under this section requires an attendant in order to perform such travel, an attendant of such covered veteran may be allowed expenses of travel (including lodging and subsistence) upon the same basis as such veteran during—

''(A) the period of time in which such veteran is traveling to and from a treatment facility; and

''(B) the duration of the treatment episode for such veteran.

''(3) The Secretary may prescribe regulations to carry out this subsection. Such regulations may include provisions—

''(A) to limit the number of attendants that may receive expenses of travel under paragraph (2) for a single treatment episode of a covered veteran; and

''(B) to require such attendants to use certain travel services.

''(4) In this subsection, the term 'covered veteran' means a veteran who—

''(A) was deployed in support of Operation Enduring Freedom or Operation Iraqi Freedom; and

''(B) for purposes of this subsection, is determined by the Secretary—

''(i) to have a service-connected disability or illness that is severe;

''(ii) to be in need of caregiver services, such that without such services, the veteran would require hospitalization, nursing home care, or other residential institutional care; and

''(iii) based on an examination by a physician employed by the Department (or, in areas where no such physician is available, by a physician carrying out such function under a contract or fee arrangement), to be unable to carry out the activities (including instrumental activities) of daily living.''.

SEC. 7. SURVEY ON CAREGIVERS AND FAMILY CAREGIVERS.

(a) IN GENERAL.—Not later than 270 days after the date of the enactment of this Act, and not less than once in each three-year period thereafter, the Secretary of Veterans Affairs shall design and conduct a survey of caregivers and family caregivers. In carrying out the survey, the Secretary shall collect the following information:

(1) The number of caregivers.

(2) The number of family caregivers.

(3) The number of veterans receiving caregiver services from caregivers and family caregivers, including the era in which each veteran served in the Armed Forces.

(4) The range of caregiver services provided by caregivers and family caregivers, including—

(A) the average schedule of such services; and

(B) the average amount of time a caregiver and family caregiver has spent providing such services.

(5) The average age of a caregiver and family caregiver.

(6) The health care coverage of caregivers and family caregivers, including the sources of such coverage.

(7) The employment status of caregivers and family caregivers.

(8) Incidents of significant life changes related to being a caregiver or family caregiver, including unemployment and disenrollment from a course of education.

(9) The number of family caregivers trained and certified through a home health care agency.

(10) Other information the Secretary considers appropriate.

(b) SURVEY SAMPLE.—In carrying out the survey required by subsection (a), the Secretary shall ensure that—

(1) a statistically representative sample of caregivers and family caregivers is included in the survey; and

(2) such sample covers veterans in each Veterans Integrated Service Network.

(c) FINDINGS.—The Secretary shall consider the findings of the survey when carrying out programs related to caregivers and family caregivers.

(d) REPORTS.—Not later than 180 days after the date on which each survey is completed, the Secretary shall submit to the Committee on Veterans' Affairs of the House of Representatives and the Committee on Veterans' Affairs of the Senate a report on caregivers and family caregivers. Each such report shall include—

(1) the findings of the survey required by subsection (a);

(2) a summary of the services made available to caregivers and family caregivers by the Secretary;

(3) the number of caregivers and family caregivers who receive such services;

(4) the cost to the Department of Veterans Affairs of providing each such service; and

(5) other information the Secretary considers appropriate.

(e) DEFINITIONS.—In this section:

(1) The term ''caregiver'' has the meaning given such term in section 1701(11) of title 38, United States Code, as added by section 2(a) of this Act.

(2) The term ''family caregiver'' has the meaning given such term in section 1701(12) of title 38, United States Code, as added by section 2(a) of this Act.

The SPEAKER pro tempore. Pursuant to the rule, the gentleman from California (Mr. FILNER) and the gentleman from Florida (Mr. STEARNS) each will control 20 minutes.

The Chair recognizes the gentleman from California.

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

I want to thank the chairman of the Health Subcommittee, Mr. MICHAUD of Maine, for introducing this bill.

I yield to him such time as he may consume to explain the bill since he

spent so much time in doing this, and we really thank him so much for his work.

Mr. MICHAUD. I thank the chairman for yielding time to me. I also want to thank Ranking Member BUYER and the chairman for bringing this bill so quickly so we can take care of our caregivers. But I want also want to thank the staff on both the majority and minority sides. A lot of work went into this legislation to move it forward at the rapid pace that it was moved forward.

When our wounded heroes return home, there are many family members who step up to the role of a caregiver. In this effort these family caregivers often make great sacrifices, including giving up their job, delaying their education, or making other significant life-changing sacrifices in order to be by their loved one's side.

On June 4 of this year, the Health Subcommittee, with Ranking Member HENRY BROWN, we had a hearing to explore the needs of family caregivers of veterans. And based upon the findings of this hearing, I introduced H.R. 3155, the Caregiver Assistance and Resource Enhancement Act, otherwise known as the CARE Act.

The CARE Act requires the VA to train existing case managers of veterans so that they can inform caregivers of the benefits and assistance available to them.

Next, the CARE Act provides support services to family and nonfamily caregivers of veterans of all eras who are enrolled in the VA health care system.

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Such services include educational sessions on how to better give caregivers the education and resources they need; a one-stop shop to support services through a dedicated caregivers Web site; and information and outreach. In addition, this bill provides caregivers with the counseling and mental health services to help cope with the stress of caregivers. The CARE Act also provides veterans with the respite care that meets their specific needs.

The CARE Act also provides a number of important benefits for caregivers of severely injured Iraq and Afghanistan veterans. Medical care and monthly financial stipends will be available to primary family caregivers. Lodging and sustenance payments will also be provided for those caregivers as well.

Finally, the CARE Act requires the VA to conduct a survey of caregivers so that we can better understand this population for future improvements in the program. It is one thing to pass legislation. It is the next thing to make sure that the legislation is implemented properly and that we revise that legislation to make it work smoothly.

I also would like to take a moment to recognize the leadership of Mrs. HALVORSON, Mr. TEAGUE and Mr. PERRIELLO. They are true advocates of caregivers, and their efforts are reflected in this bill. I want to thank my ranking member, Mr. BROWN, for all the hard work that Mr. BROWN and his staff did to make this bill a better bill and move it forward so we can vote on this here today.

I would urge my colleagues to join me in supporting H.R. 3155, so that we can begin to address the needs of the caregivers who are everyday heroes of our veterans.

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

I think Mr. MICHAUD was correct in applauding the staff. I think on all these four bills that we should be applauding the staff for their timely efforts and their hard work to get this accomplished.

I rise in support of H.R. 3155, as amended, the Caregivers Assistance and Resource Enhancement Act of 2009. A family member or friend who serves as a caregiver in many cases drives the successful treatment and recovery of a severely wounded veteran or soldier. Yet those who care for their loved ones make sacrifices and can face difficulties in simply caring for their personal physical and mental health needs and financial well-being. So it is important that we reach out and make education, counseling and other support services available so the family caregiver can meet their own daily needs as well as the needs of the wounded warrior for whom they care.

H.R. 3155, as amended, would establish new programs, enhance services and coordinate services system-wide. Key components of the legislation would require the VA to provide more and better education using new technologies, expand mental health and respite care services and travel benefits for family caregivers.

Mr. Speaker, it also provides certain primary caregivers of very severely injured returning veterans from Iraq and Afghanistan with health insurance if they lost or don't have it, and a monthly personal allowance to mitigate financial problems that may occur.

The bill would also require the VA to conduct a national survey of veterans' family caregivers. This survey would be vital to helping us gain a better understanding of the needs and develop additional good policies to support family caregivers.

I want to commend the subcommittee chairman, MIKE MICHAUD, and subcommittee ranking member, HENRY BROWN, for their leadership and hard work in developing this bipartisan piece of legislation. This bill, as amended, would provide veterans' family caregivers with a strong, system-wide array of support to depend upon.

I urge my colleagues to support the bill, as amended.

Mr. Speaker, I reserve the balance of my time.

Mr. FILNER. Mr. Speaker, I yield such time as she may consume to the gentlewoman from Illinois (Mrs. HALVORSON), one of the movers of this legislation.

Mrs. HALVORSON. Thank you, Mr. FILNER, for yielding. I also want to thank the chairman of the subcommittee, Mr. MICHAUD, for his leadership on this issue.

As an original cosponsor, I rise in strong support of this CARE Act, which, among other things, will provide the caregivers of our injured heroes access to a wide range of services. H.R. 3155 includes language from my bill, H.R. 2898, the Wounded Warrior Caregiver Assistance Act, which authorizes the VA to make supportive services available to our caregivers.

Specifically, the CARE Act provides counseling, better training and respite care for family caregivers. It makes sure that the VA conducts community outreach through PSAs and brochures and informational pamphlets. Finally, it helps caregivers locate resources for additional support from public, private and nonprofit agencies.

Having a stepson that was severely injured in Afghanistan, I have firsthand understanding of how important these support services are. H.R. 3155 will give family caregivers the tools and resources they need to provide the highest quality care to an injured son, daughter or spouse.

I would also like to take a moment to say thank you to caregivers across this Nation. Mothers, fathers, spouses and other family members are sacrificing their time, their energy and, in many cases, their futures to provide 24/7 health care for those who have fought to defend our Nation. For far too long, we have not provided them with the resources that they need to properly protect and care for our wounded warriors.

This bill will allow the VA to care for our caregivers, something that is long overdue. For these reasons, I strongly urge my colleagues to support the CARE Act.

Mr. STEARNS. Mr. Speaker, in closing, I would like to thank the chairman, as I have done earlier, Mr. FILNER, and STEVE BUYER, the ranking member, for their hard work in bringing this bill to the floor. I urge my colleagues to support it.

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

Mr. FILNER. Mr. Speaker, I yield such time as he may consume to the gentleman from American Samoa (Mr. FALEOMAVAEGA).

(Mr. FALEOMAVAEGA asked and was given permission to revise and extend his remarks.)

Mr. FALEOMAVAEGA. Mr. Speaker, I certainly want to commend my colleague, the chief sponsor of this legislation, the gentleman from Maine, Mr. MICHAUD, for his leadership and sponsorship of this bill. I also want to thank the chairman of our Veterans Affairs Committee, the gentleman from California, Chairman FILNER, Ranking Member BUYER, and also my friend from Florida, Mr. STEARNS, who is managing the other side of the aisle.

Mr. Speaker, this bill addresses the important question of who will provide

continuing care for injured servicemen and servicewomen once they transition to veteran status.

Today, more servicemembers are surviving the wounds of war than those injured in previous conflicts. For example, the ratio of wounded to killed averaged approximately 1.7 wounded for every fatality for the first world wars. In Korea and Vietnam, the ratio improved to three wounded per fatality, largely due to air medical evacuation. In Operation Enduring Freedom and Operation Iraqi Freedom, improved body armor and superior battlefield medicine techniques have resulted in seven wounded per fatality.

The fact of the matter is, Mr. Speaker, there is a growing need to provide continuing care to those injured and wounded from recent conflicts once they reach veteran status. As a result, providing support and resources to those giving care to these wounded and injured veterans is of real concern.

Unfortunately, the Veterans Administration currently does not collect data that would enable us to assess the number of veterans currently under continuing care. More significantly, there is no data available to assess the number of caregivers, whether they be family members or other individuals. I believe this legislation provides for that right approach, and again thank the gentleman from Maine for his initiative in doing this bill.

This bill would require the VA to conduct a caregivers survey at least once every 3 years of individuals caring for veterans enrolled in the VA health care system and report back to Congress no later than 180 days after the date of which the survey has been completed.

Mr. Speaker, in essence this bill would improve the quality of treatment and care of our veterans. Specifically, this bill would create a new caregiver program in order to provide coordinated support services to those that are giving care to our veterans. Training would be made available to caregivers through the Veterans Administration. Pertinent information would be disseminated to make sure that the caregivers are aware and well informed of services and resources available to them. As a result, the bottom line, Mr. Speaker: Our veterans are provided the necessary care for their needs.

Again, I support the legislation. I urge my colleagues to support this bill.

Mr. FILNER. Mr. Speaker, again I thank the gentleman, Mr. FALEOMAVAEGA, for his support of these bills.

GENERAL LEAVE

Mr. FILNER. Mr. Speaker, I ask unanimous consent that all Members may have 5 legislative days to revise and extend their remarks and include extraneous material on H.R. 3155, as amended.

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

There was no objection.

Mr. RODRIGUEZ. Mr. Speaker, I speak today on behalf of H.R. 3155, the Caregiver Assistance and Resource Enhancement Act—the CARE Act.

The nature of warfare is changing as is the economic requirements of American families. Thanks to advances in medical technology and our outstanding service men and women, more and more of our wounded warriors are surviving their injuries than ever before. At the same time more and more of our families must rely on dual incomes just to get by.

Some of our wounded, though they survived, must now receive full time care due to the extent of their injuries. That second income earner ends up having to quit their job or limit their hours in order to provide care for their loved one. The potential loss in earnings for these families, even with military medical retirement pensions and VA disability pensions, is often catastrophic. And on top of that, the families must navigate the system largely on their own, putting pieces together and connecting the dots by figuring out the right questions to ask.

This bill is a vital piece of legislation that will provide resources in a comprehensive program to engage those wounded warriors who require caregiver assistance and the family and friends who often serve as the caregiver.

This bill provides for mental health and counseling services for those caregivers and ensures health care coverage for those caregivers who may have lost their health care coverage when they gave up their job to care for their loved one.

This bill ensures that respite care is provided that is appropriate to the specific veteran's needs, including, if necessary, 24-hour in home respite care.

And this bill provides the authorization for the VA to provide a stipend to the caregivers to help compensate for their loss of income.

We owe it to our wounded warriors to ensure their care, and to ensure the care of those that sacrifice to care for them. We must pass this bill.

Mr. TEAGUE. Mr. Speaker, during the upcoming August recess, many of my colleagues and I will travel home to visit with constituents and speak with them about their problems and find ways in which we can help them. As is often the case, my constituents continue to inspire me with their willingness to take on hard challenges themselves and help their neighbors in need. Many veterans throughout my district often volunteer their time to drive fellow veterans to medical appointments even though the drive can last over 3 or 4 hours. It is a hardship that too many face and should be made easier.

That was why I introduced H.R. 2738, a bill that would direct the Secretary of the VA to reimburse family caregivers of disabled veterans for travel expenses, including lodging and food, in connection with authorized VA treatment. Rural veteran face too many obstacles when seeking medical treatment, and I believe this legislation will make their lives a little easier while they seek the care that they were promised. I am very happy to note that the language contained in H.R. 2738 was included in H.R. 3155. H.R. 3155 includes many provisions that are necessary to assist not only veterans, but those that are caring for our wounded warriors. We made a lot of promises to our veterans, and it's about time we began to honor them. I hope that my colleagues will support this very important piece of legislation, and I urge its passage.

Mr. FILNER. Mr. Speaker, I would urge my colleagues' total support of the bill, and I yield back the balance of my time.

The SPEAKER pro tempore. The question is on the motion offered by the gentleman from California (Mr. FILNER) that the House suspend the rules and pass the bill, H.R. 3155, as amended.

The question was taken; and (two-thirds being in the affirmative) the rules were suspended and the bill, as amended, was passed.

A motion to reconsider was laid on the table.

NATIONAL PARK AND RECREATION MONTH

Ms. BORDALLO. Mr. Speaker, I move to suspend the rules and agree to the resolution (H. Res. 288) recognizing the importance of park and recreation facilities and expressing support for the designation of the month of July as ''National Park and Recreation Month''.

The Clerk read the title of the resolution.

The text of the resolution is as follows:

H. RES. 288

Whereas public parks and recreation systems are dedicated to enhancing the quality of life for residents in communities around the country through recreation programming, leisure activities, and conservation efforts;

Whereas parks, recreation activities, and leisure experiences provide opportunities for young people to live, grow, and develop into contributing members of society; create lifelines and continuous life experience for older members of the community; generate opportunities for people to come together and experience a sense of community; and pay dividends to communities by attracting businesses, jobs, and increasing housing value;

Whereas parks and recreation services play a vital role in creating active and healthy communities, and the majority of older adults who visit parks report moderate or high levels of physical activity during their visit and 50 percent of older adults who participated in light to moderate aerobic park activity report being in a better mood after visiting parks;

Whereas parks and recreation facilities foster a variety of activities that contribute to a healthier United States, such as introducing injured military veterans and those with physical disabilities to physical activity, mobilizing urban communities to use chronic disease prevention practices, working with local school systems to develop science-based curricula to educate children on nutrition and activity, connecting children with nature, and combating obesity in youth;

Whereas the creation of places for physical activity, combined with information outreach, produced a 48.4 percent increase in the frequency of physical activity;

Whereas more than 75 percent of United States citizens use park and recreation facilities to maintain fitness and to remain socially interactive, which are critical to maintaining community cohesion and pride;

Whereas community recreation programs at park and recreation facilities provide children with a safe refuge and a place to play, which helps to reduce at-risk behavior such as drug use and gang involvement;

Whereas 69 percent of the United States population believes in local park and recreation services, which supports the idea that such parks and services should be funded by taxes and user fees;

Whereas public parks and recreation facilities create enormous economic value through increased partnership, which improves the job base and the economic viability of the local economy, including business relocation and expansion in the community and increased tourism; and

Whereas parks and recreation facilities reduce fuel costs and commute times by providing a place close to home to relax, exercise, and reduce stress: Now, therefore, be it

Resolved, That the House of Representatives—

(1) recognizes the great societal value of parks and recreation facilities and their importance in local communities across the United States;

(2) recognizes and honors the vital contributions of employees and volunteers in park and recreation facilities; and

(3) supports the designation of a ''National Park and Recreation Month''.

The SPEAKER pro tempore. Pursuant to the rule, the gentlewoman from Guam (Ms. BORDALLO) and the gentleman from Washington (Mr. HASTINGS) each will control 20 minutes.

The Chair recognizes the gentlewoman from Guam.

GENERAL LEAVE

Ms. BORDALLO. Mr. Speaker, I ask unanimous consent that all Members may have 5 legislative days in which to revise and extend their remarks and include extraneous material on the resolution under consideration.

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

There was no objection.

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

Mr. Speaker, House Resolution 288 was introduced by our colleague from Georgia, Representative JOHN BARROW, and would recognize July as National Park and Recreation Month. Federal, State, territorial, and local parks and recreation facilities across our Nation play a vital role in creating healthy communities. They improve our quality of life, they keep our children active and safe and connected with nature, and they create economic opportunities by attracting businesses and jobs and increasing home values.

House Resolution 288 recognizes the importance of our valued parks and recreation facilities by encouraging the designation of a National Park and Recreation Month. I commend my colleague, Representative BARROW, for his diligent work on this resolution, and I ask my colleagues to support the passage of this measure.

Mr. Speaker, I reserve the balance of my time.

Mr. HASTINGS of Washington. Mr. Speaker, I yield myself such time as I may consume.

Mr. Speaker, this resolution has been adequately explained by the gentlewoman from Guam. I would like to add that it is my hope that this resolution reminds the American people that public lands are theirs to fully enjoy.

Mr. BARROW. Mr. Speaker, I rise in support of H. Res. 288 designating the month of July as "National Park and Recreation Month".

State and local parks and recreation facilities play a vital role in stimulating our nation's economy, improving community health and wellness, enhancing quality of life, and safeguarding our nation's natural resources. The value of state and local parks and recreation facilities and their employees is undeniable, and I have no doubt that we're all enriched by the wonderful experiences they offer.

Park and recreation facilities aid in combating obesity and chronic disease epidemics; connect children with nature; provide opportunities for increased physical activities; and enhance the quality of life for injured military servicemembers and those with physical disabilities through therapeutic recreation.

As American families enjoy our summer season, I offer H. Res. 288 as a tribute to our state and local parks and their employees and I urge my colleagues to support it.

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

Ms. BORDALLO. Mr. Speaker, I again urge Members to support this resolution, and I yield back the balance of my time.

The SPEAKER pro tempore. The question is on the motion offered by the gentlewoman from Guam (Ms. BORDALLO) that the House suspend the rules and agree to the resolution, H. Res. 288.

The question was taken; and (two-thirds being in the affirmative) the rules were suspended and the resolution was agreed to.

A motion to reconsider was laid on the table.

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WACO MAMMOTH NATIONAL MONUMENT ESTABLISHMENT ACT OF 2009

Ms. BORDALLO. Mr. Speaker, I move to suspend the rules and pass the bill (H.R. 1376) to authorize the Secretary of the Interior to establish the Waco Mammoth National Monument in the State of Texas, as amended.

The Clerk read the title of the bill.

The text of the bill is as follows:

H.R. 1376

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

SECTION 1. SHORT TITLE.

This Act may be cited as the ''Waco Mammoth National Monument Establishment Act of 2009''.

SEC. 2. FINDINGS.

Congress finds as follows:

(1) The Waco Mammoth Site area is located near the confluence of the Brazos and the Bosque rivers in Central Texas, near the City of Waco.

(2) Baylor University has been investigating the site since 1978 after the discovery of bones emerging from eroding creek banks leading to the uncovering of portions of five mammoths.

(3) Several additional mammoth remains have been uncovered making this the largest known concentration of mammoths dying from the same event.

(4) The discoveries have received international attention.

(5) The University and the City of Waco have been working together to protect the site and to develop further research and educational opportunities.

SEC. 3. DEFINITIONS.

In this Act the following definitions apply:

(1) NATIONAL MONUMENT.—The term ''national monument'' means the Waco Mammoth National Monument, established in section 4.

(2) SECRETARY.—The term ''Secretary'' means the Secretary of the Interior.

(3) MAP.—The term ''map'' means the map titled ''Proposed Boundary Waco-Mammoth National Monument'', numbered T21/80,000, and dated April, 2009.

SEC. 4. WACO MAMMOTH NATIONAL MONUMENT, TEXAS.

(a) ESTABLISHMENT.—There is established the Waco Mammoth National Monument in the State of Texas, as a unit of the National Park System, as generally depicted on the map.

(b) AVAILABILITY OF MAP.—The map shall be on file and available for public inspection in the appropriate offices of the National Park Service.

SEC. 5. ADMINISTRATION OF NATIONAL MONUMENT.

(a) IN GENERAL.—The Secretary shall administer the national monument in accordance with this Act, the cooperative agreements described in this section, and laws and regulations generally applicable to units of the National Park System, including the National Park Service Organic Act (39 Stat. 535, 16 U.S.C. 1).

(b) COOPERATIVE AGREEMENTS.—The Secretary may enter into cooperative agreements for the management of the national monument with Baylor University and City of Waco, pursuant to the National Park Service General Authorities Act (16 U.S.C. 1a–2(1)).

SEC. 6. ACQUISITION OF PROPERTY AND BOUNDARY MANAGEMENT.

(a) ACQUISITION OF PROPERTY.—The Secretary is authorized to acquire from willing sellers lands, or interests in lands, within the proposed boundary of the national monument necessary for effective management.

(b) CONDITIONS.—Lands identified in subsection (a) may be acquired—

(1) by donation, purchase with donated or appropriated funds, transfer from another Federal agency, or by exchange; and

(2) in the case of lands owned by the State of Texas, or a political subdivision thereof, or Baylor University only by donation or exchange.

SEC. 7. CONSTRUCTION OF FACILITIES ON NON-FEDERAL LANDS.

(a) IN GENERAL.—The Secretary is authorized, subject to the appropriation of necessary funds, to construct essential administrative or visitor use facilities on non-Federal lands within the national monument.

(b) OTHER FUNDING.—In addition to the use of Federal funds authorized in subsection (a), the Secretary may use donated funds, property, and services to carry out this section.

SEC. 8. GENERAL MANAGEMENT PLAN.

(a) IN GENERAL.—Not later than three years after the date on which funds are made available to carry out this Act, the Secretary, in consultation with Baylor University and City of Waco, shall prepare a management plan for the national monument.

(b) INCLUSIONS.—The management plan shall include, at a minimum—

(1) measures for the preservation of the resources of the national monument;

(2) requirements for the type and extent of development and use of the national monument;

(3) identification of visitor carrying capacities for national monument; and

(4) opportunities for involvement by Baylor University, the City of Waco, the State of Texas,

and other local and national entities in the formulation of educational programs for the national monument and for developing and supporting the national monument.

The SPEAKER pro tempore. Pursuant to the rule, the gentlewoman from Guam (Ms. BORDALLO) and the gentleman from Washington (Mr. HASTINGS) each will control 20 minutes.

The Chair recognizes the gentlewoman from Guam.

GENERAL LEAVE

Ms. BORDALLO. Mr. Speaker, I ask unanimous consent that all Members may have 5 legislative days in which to revise and extend their remarks and include extraneous material on the bill under consideration.

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

There was no objection.

Ms. BORDALLO. Mr. Speaker, H.R. 1376, introduced by our colleague CHET EDWARDS, will establish a new national monument to protect the burial site near Waco, Texas, of several herds of mammoths that appear to have died in one or more floods some 68,000 years ago. The 107th Congress authorized a study of the site, and H.R. 1376 implements the results of that study. Specifically, the bill provides that the 109-acre site be managed under a cooperative agreement among the National Park Service, Baylor University and the City of Waco. Representative EDWARDS has been a tireless advocate on behalf of the preservation and interpretation of this invaluable historic site. He is to be commended for his tireless efforts. I ask my colleagues to support the passage of this measure.

I reserve the balance of my time.

Mr. HASTINGS of Washington. Mr. Speaker, I yield myself as much time as I may consume.

Mr. Speaker, H.R. 1376 would designate a national monument in the middle of the city of Waco in Texas. I do not necessarily oppose the designation, but I do oppose the legislation as it is written because it lacks language protecting the property rights on lands adjacent to the monument. The National Park Service has a history of interfering with the use of lands it does not own. During the committee markup, Congressman ROB BISHOP of Utah offered a commonsense amendment that limited the Park Service's control to the boundaries of the proposed monument and prohibited the Park Service from designating buffer zones on private lands. The chairman of the subcommittee opposed the amendment, stating that the concept of buffer zones did not exist and was nowhere to be found in law. However, a quick search of the Park Service's own Web site finds 78 references to buffer zones, including references in Federal law. The amendment that was offered by Mr. BISHOP was narrowly defeated by a 22–20 vote, largely along party lines. So without language protecting private landowners adjacent to the monument, which includes homeowners, farmers and, for that matter, even Baylor University, passing this legislation would be, in my view, irresponsible. This is not just a vague hypothetical concern. In the Park Service's own study, recommending the designation of the Waco monument, the issue of controlling neighboring lands through local zoning is specifically mentioned; and the door is left open for the Park Service to push for restrictions on adjacent private property. That's the part that concerns me with this legislation.

Mr. Speaker, I urge a ''no'' vote on H.R. 1376 until language is added protecting property rights in the buffer zone.

With that, I reserve the balance of my time.

Ms. BORDALLO. Mr. Speaker, I yield such time as he may consume to the sponsor of the bill, the gentleman from Texas (Mr. EDWARDS).

Mr. EDWARDS of Texas. I thank the gentlewoman from Guam.

Mr. Speaker, for over 60,000 years Mother Nature preserved a unique site in the world known as the Waco Mammoth Site. Now it is our responsibility to be good stewards of this historic site. Located in my hometown of Waco, Texas, the site represents the only recorded instance of a nursery herd of Pleistocene-era mammoths in the United States. It is the largest known concentration in North America and possibly the world of Pleistocene-era Columbian mammoths, dying from possibly the same event some 68,000 years ago.

According to the Department of the Interior, the Waco Mammoth Site is a national treasure. That is why, after an extensive study, it recommended that the site be designated a national monument and made a part of the National Park System. My bill, H.R. 1376, would put into effect the Department of Interior recommendations. Specifically, the Waco Mammoth National Monument Establishment Act of 2009 will establish in Texas the Waco Mammoth National Monument as a unit within the National Park System. It would authorize the construction of administration and visitor use facilities on the site and instruct the Secretary of the Interior to prepare a management plan for the monument in consultation with Baylor University and the City of Waco. The National Park Service recommended that the most effective and efficient approach for ensuring the long-term protection of the site and maximizing opportunities for public enjoyment and education would be for the National Park Service to lead a partnership with the City of Waco and Baylor University. Under this arrangement, the National Park Service would take the lead responsibility for the protection, scientific study, and visitor enjoyment of the site while enlisting partners in this effort. The partners would take the responsibility for initiating additional recreational and educational opportunities at the site.

First discovered in 1978, the Waco Mammoth Site is a unique find of national and international importance. To date, 24 Columbian mammoths, including articulated skeletons, a giant tortoise and a camel, have been discovered; and the potential for future mammoth discoveries is high with research activities ongoing at the 109-acre site. It has become an area of significant study within the archaeological community and, as living history, has the capacity to serve as an educational resource for people of all ages for generations to come.

For nearly a decade, I have been proud to join with and support the efforts of the City of Waco, Baylor University and the Waco Mammoth Foundation to fulfill our dream of having the Waco Mammoth Site become a national monument, enjoying the ranks of American national monuments such as the Statue of Liberty. As with all positive accomplishments in life, this project has been a team effort. I especially want to salute the citizens of Waco for their vision, their dedication and generosity in supporting this project.

I can still remember, Mr. Speaker, my friend Sam Jack McGlasson standing in my driveway in the 1990s, telling me about this site for the very first time. While he and Liz are no longer with us, their vision and donation of land started us down this path over a decade ago, a path envisioned by them and former Baylor professor Calvin Smith. I remember Buddy Bostick, an early contributor to this project, telling me that we had a moral obligation to preserve for future generations what Mother Nature had protected for thousands of years. That led to my passing legislation in 2002 to have a resource study done by the Department of Interior and to later passing $400,000 in seed money for the project. When this project was bogged down a few years ago, I remember Pastor John Wood, my father-in-law, holding a meeting at his home which resulted in a renewed focus to get things moving forward. With the incredible leadership of Gloria Young, Waco's citizens raised over $3 million of their own money to start building a permanent protective structure so that rains and floods would not ruin this site forever. Citizens such as Gloria and F.M. Young, Paul and Jane Meyer, Gayle Lacy, Tommye Lou Davis, Karla Leeper, Don Moes and others have given generously of their own time and their resources to protect this unique, historic site for the citizens of our country and the world. That is the kind of spirit of giving that makes me proud to call Waco my home.

This bill would not be on the House floor today were it not for the tremendous bipartisan efforts of so many. With apologies to anyone whose name I do not mention, I must especially thank and congratulate Waco Mayor Virginia DuPuy, City Manager Larry Groth and his staff, and Ellie Caston at Baylor University and everyone at Baylor who worked with her. Their efforts have been tireless over many

years and instrumental to the project's success. Hardworking Federal employees, who often do not get thanked, deserve our gratitude for the role they have played in doing the Federal resource study. So thanks go to those at the National Park Service and the Department of the Interior for whom protecting special national resources is not a job but a labor of love. Last, but certainly not least, I want to express my appreciation to Natural Resources Committee Chairman NICK RAHALL and his ranking member, DOC HASTINGS, notwithstanding the legitimate principled question that he raised a minute ago, which I will address in just a moment. I also want to thank RAÚL GRIJALVA and ROB BISHOP, the chairman and ranking member of the National Parks, Forests and Public Lands Subcommittee. Without their support, this bill's passage would not be possible; and I thank them for protecting America's natural resources.

Mr. Speaker, what excites me the most is knowing that generations of school children will learn firsthand at the Waco Mammoth Site about science and natural history. It will be an outdoor classroom where children can discover the richness of God's world in which we all live. At this unique site in the world, they can find that learning can be fun and a life-long adventure. When children and parents of all ages visit Waco and see the bull mammoth desperately trying to push its calf above the raging storm waters 68,000 years ago, we will all be touched by knowing that the power of parental instinct is a common bond of mankind and Mother Nature. For the benefit of future generations, I ask that my colleagues join with me in supporting H.R. 1376.

Mr. Speaker, since I was not fully aware of Mr. HASTINGS' principled questions about this, I would just add a comment or two about that. I have been a long-standing supporter of private property rights. That's why I think that the question he has raised is a very principled one. What I can say to the gentleman is that this has been supported by Democrats and Republicans; and to my knowledge, over a period of 10 years, along with the support of Baylor University and the City of Waco and our community leaders, there has not been a controversy about private property being encroached upon by this project. I would just say to the gentleman, if there is any way he could bring himself to support this bill, I would, in good faith before we move forward in the Senate, sit down with him and discuss how we could address this issue.

Mr. HASTINGS of Washington. Will the gentleman yield?

Mr. EDWARDS of Texas. I would be glad to yield to the gentleman.

Mr. HASTINGS of Washington. I appreciate the gentleman yielding. As I mentioned in my opening remarks, I have no problem with the designation. I thought you described it very, very well. You've heard those of us from the West talk about private property rights, like these things only happen in the western part of the United States. But examples like these where these buffer zones have infringed on priority property rights, as a matter of fact, have happened all over the United States, in Michigan, obviously in the West, and even in the Smoky Mountains here in the eastern part of the United States. I know the gentleman is sensitive to that. I was disappointed that the amendment failed by a very close margin. But the reason that was offered for why it didn't pass was because there is no precedence in law. In fact, there is precedence in law.

I suspect your legislation is going to pass on its merits, notwithstanding my opposition to it. But I would certainly advise the gentleman as this process moves forward to look at this very closely because this is not an isolated example. And I know that that would be an unintended consequence of what you intended with this, especially as I understand this legislation sitting in Waco.

Mr. EDWARDS of Texas. To respond, if I could say to the gentleman, again, I have worked consistently. I may not be from the West. I am from the Southwest, though, and private property rights are a fundamental value in my district. Again, I can assure the gentleman, I have worked for 10 years on this project, again, with leading community leaders, elected officials at the city and county level, Judge Lewis and County Commissioners' Court even contributed $100,000 of public money to this project along with the $3 million in private money we raised. It's been on the front wages of the Waco newspaper for years. This is the first time I have heard about any potential controversy regarding a buffer zone.

I do respect and understand the gentleman's concern about national policy. Can I ask, have you heard from individuals from Waco in terms of specific concerns about this bill?

Mr. HASTINGS of Washington. If the gentleman would yield.

Mr. EDWARDS of Texas. I would be glad to.

Mr. HASTINGS of Washington. No. I have to say, I have not. Now having said that, there may be somebody on the staff that has. I can tell the gentleman that I have not heard specifically on this. But I just want to point out, there are examples of this in other parts of the country. Again, something that was not anticipated but, in fact, there was an infringement on those private property rights.

Mr. EDWARDS of Texas. I will just say, Mr. Speaker, I respect the gentleman's questions. I certainly respect his concerns about protecting private property rights. I would just urge my colleagues—with respect to the questions he has raised—I would urge them because of the decade-long support and in my community—and this site is in my district—the broad bipartisan support for this bill, the many reasons I have mentioned in my floor statement why this bill needs to become law, and the sooner the better. Mother Nature has protected this for over 60,000 years. There is risk of rains and—well, we're in the middle of a drought right now. Sometimes we have counties with drought and flood relief requests in at the same time. A massive flood in this area could put the entire project and all of its treasures at risk. I would plead with the gentleman, to either himself or his colleagues, to find a way to support this bill and let's find a way to work together, which I would be glad to do as this bill goes to the Senate.

□ 1515

Mr. HASTINGS of Washington. I just want to make the point that this bill was marked up in July and, as I mentioned in my opening statement, there was an amendment that was offered, so the issue has been known. But like I say, this Member has not heard directly from people in Waco, but maybe others have. But again, I was talking in a larger sense, because we've seen examples of this in other parts of the country.

So I thank the gentleman for yielding.

Mr. EDWARDS of Texas. I thank the gentleman again for his principled questions raised. I look forward to working with him. I would just ask my colleagues, both Republican and Democratic alike, since this bill is on the suspension calendar today and requires a super majority to pass, I'd ask my colleagues to respect the wishes of the citizens of my hometown of Waco who've worked on a completely bipartisan and nonpartisan basis for over a decade and been looking forward to this bill passing today.

And my commitment to the gentleman will be to work in good faith as this bill goes to the Senate to try to address, if there are local concerns in our areas about buffer zones and protecting private property rights, I'd welcome partnering with the gentleman for that purpose.

Mr. HASTINGS of Washington. Mr. Speaker, again, I yield myself as much time as I may consume.

I've talked about this and it is a legitimate concern.

And so I would inquire of the gentlelady from Guam if she has anymore speakers.

Ms. BORDALLO. Mr. Speaker, I have no additional requests for time, and I would inquire of the minority whether they have any additional speakers.

Mr. HASTINGS of Washington. If there are no more requests for time, Mr. Speaker, I yield back the balance of my time.

Ms. BORDALLO. Mr. Speaker, I again urge Members to support the bill, and I yield back the balance of my time.

The SPEAKER pro tempore. The question is on the motion offered by

the gentlewoman from Guam (Ms. BORDALLO) that the House suspend the rules and pass the bill, H.R. 1376, as amended.

The question was taken.

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

Mr. HASTINGS of Washington. Mr. Speaker, I object to the vote on the ground that a quorum is not present and make the point of order that a quorum is not present.

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.

The point of no quorum is considered withdrawn.

BLUE RIDGE PARKWAY AND TOWN OF BLOWING ROCK LAND EXCHANGE ACT OF 2009

Ms. BORDALLO. Mr. Speaker, I move to suspend the rules and pass the bill (H.R. 1121) to authorize a land exchange to acquire lands for the Blue Ridge Parkway from the Town of Blowing Rock, North Carolina, and for other purposes, as amended.

The Clerk read the title of the bill.

The text of the bill is as follows:

H.R. 1121

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

SECTION 1. SHORT TITLE.

This Act may be cited as the ''Blue Ridge Parkway and Town of Blowing Rock Land Exchange Act of 2009''.

SEC. 2. DEFINITIONS.

In this Act:

(1) SECRETARY.—The term ''Secretary'' means the Secretary of the Interior.

(2) TOWN.—The term ''Town'' means the Town of Blowing Rock in the State of North Carolina.

(3) MAP.—The term ''map'' means the National Park Service map titled ''Blue Ridge Parkway, Proposed Land Exchange with Town of Blowing Rock'', numbered ''601/90,000A'', and dated ''April, 2008''.

(4) EXCHANGE.—The term ''exchange'' means the exchange of land authorized by section 3(a).

SEC. 3. LAND EXCHANGE.

(a) IN GENERAL.—Subject to subsection (d), the Secretary may exchange approximately 20 acres of land within the boundary of the Blue Ridge Parkway that are generally depicted on the map as ''Blowing Rock Reservoir'', for approximately 192 acres of land owned by the Town that are generally depicted on the map as ''Town of Blowing Rock Exchange Lands''.

(b) MAP AVAILABILITY.—The map shall be on file and available for public inspection in the appropriate offices of the National Park Service.

(c) TIMING.—The Secretary shall seek to complete the land exchange not later than three years after the date of the enactment of this Act.

(d) APPLICABLE LAWS; TERMS AND CONDITIONS.—The exchange shall be subject to—

(1) laws, regulations, and policies applicable to exchanges of land administered by the National Park Service, including those concerning land appraisals, equalization of values, and environmental compliance; and

(2) such terms and conditions as the Secretary considers appropriate.

(e) EQUALIZATION OF VALUES.—If the lands proposed for exchange are found to be not equal in value, the equalization of values may be achieved by adjusting the acreage amounts identified in subsection (a).

(f) BOUNDARY ADJUSTMENT.—Upon completion of the exchange, the Secretary shall adjust the boundary of the Blue Ridge Parkway to reflect the exchanged lands.

(g) ADMINISTRATION.—Lands acquired by the Secretary through the exchange shall be administered as part of the Blue Ridge Parkway in accordance with all applicable laws and regulations.

(h) FUTURE DISPOSITION OF PROPERTY.—If the Town desires to dispose of the reservoir property that is the subject of the exchange, the Secretary shall have the right of first refusal to acquire the property for the Blue Ridge Parkway.

The SPEAKER pro tempore. Pursuant to the rule, the gentlewoman from Guam (Ms. BORDALLO) and the gentleman from Washington (Mr. HASTINGS) each will control 20 minutes.

The Chair recognizes the gentlewoman from Guam.

GENERAL LEAVE

Ms. BORDALLO. Mr. Speaker, I ask unanimous consent that all Members may have 5 legislative days in which to revise and extend their remarks and include extraneous material on the bill under consideration.

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

There was no objection.

Ms. BORDALLO. Mr. Speaker, H.R. 1121 is sponsored by our colleague Representative VIRGINIA FOXX of North Carolina. The bill authorizes the exchange of approximately 192 acres of land owned by the Town of Blowing Rock, North Carolina, for roughly 20 acres of land within the Blue Ridge Parkway, a unit of the National Park System. Both the town and the National Park Service support this exchange. All applicable laws and policy regarding environmental compliance and equalization of values will be followed.

This is a good bill, Mr. Speaker, that resolves a longstanding management issue for both parties, so I ask my colleagues to support the passage of this measure.

I reserve the balance of my time.

Mr. HASTINGS of Washington. Mr. Speaker, I yield myself as much time as I may consume.

Mr. Speaker, the reservoir that supplies the water to Blowing Rock, North Carolina, is on land that was donated to the Blue Ridge Parkway over 50 years ago. After the Park Service acquired the land, the reservoir continued to operate under an informal agreement until recently when the National Park Service decided to require an annual special use permit for the site and imposed water rights fees. The Park Service pronouncement means that the town faced the prospect of renting its longstanding sole source of water 1 year at a time and being charged for the water.

So I want to compliment Dr. Foxx for this legislative solution to the problem. Her bill will allow Blowing Rock to own and manage its 20-acre municipal water supply, rather than accessing it through the Park Service permitting process.

I must say, though, that I am dismayed because of the price extracted by the National Park Service because it forced the town to come up with 192 acres in exchange for 20. I think that is a bad ratio. Nevertheless, I support this legislation. I think it's a good piece of legislation.

I reserve the balance of my time.

Ms. BORDALLO. Mr. Speaker, I reserve the balance of my time.

Mr. HASTINGS of Washington. Mr. Speaker, I yield as much time as she may consume to the author of this legislation, the gentlelady from North Carolina (Ms. FOXX).

Ms. FOXX. Mr. Speaker, I want to thank my colleague from Washington and my colleague from Guam for bringing my bill forward, and I especially want to thank the committee for bringing H.R. 1121, the Blue Ridge Parkway and Town of Blowing Rock Land Exchange Act forward for consideration.

This is noncontroversial, bipartisan legislation, which is recognized by the North Carolina delegation as essential to the Blue Ridge Parkway's vital tourism industry and the town of Blowing Rock's access to public drinking water. My two colleagues have done a phenomenal job of explaining the need for this legislation and the fact that it is noncontroversial and very, very positive legislation.

In recent years, the North Carolina mountain region has experienced remarkable population growth and increased tourism, increasing the need for a reliable water supply in the towns like Blowing Rock. A testament to its importance in the region, this legislation is cosponsored by the entire North Carolina delegation.

I urge my colleagues to support this important legislation and again thank the committee for bringing it to the floor for consideration.

This land exchange will ensure an adequate public drinking water supply for the Town's citizens, guests and Parkway travelers. The Town's economy is heavily based on tourism generated primarily by the Blue Ridge Parkway. With thousands of annual visitors, the transfer will benefit the town's residents and the many North Carolinians who visit Blowing Rock each year.

The Blue Ridge Parkway and the Town of Blowing Rock have had a long, successful relationship and history of working together in order to serve their constituencies. This land exchange will continue to provide demonstrable benefits to both parties and the region.

Ms. BORDALLO. Mr. Speaker, I have no additional requests for time and would inquire of the minority whether they have any additional speakers.

Mr. HASTINGS of Washington. Mr. Speaker, I have no more requests for time, and so I'll yield back my time.

Ms. BORDALLO. Mr. Speaker, I again urge Members to support this bill, and I yield back the balance of my time.

The SPEAKER pro tempore. The question is on the motion offered by the gentlewoman from Guam (Ms. BORDALLO) that the House suspend the rules and pass the bill, H.R. 1121, as amended.

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. BORDALLO. Mr. Speaker, I object to the vote on the ground that a quorum is not present and make the point of order that a quorum is not present.

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.

The point of no quorum is considered withdrawn.

SOUTHERN SEA OTTER RECOVERY AND RESEARCH ACT

Ms. BORDALLO. Mr. Speaker, I move to suspend the rules and pass the bill (H.R. 556) to establish a program of research, recovery, and other activities to provide for the recovery of the southern sea otter, as amended.

The Clerk read the title of the bill.

The text of the bill is as follows:

H.R. 556

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

SECTION 1. SHORT TITLE.

This Act may be cited as the ''Southern Sea Otter Recovery and Research Act''.

SEC. 2. SOUTHERN SEA OTTER RECOVERY AND RESEARCH PROGRAM.

(a) IN GENERAL.—The Secretary of the Interior, acting through the United States Fish and Wildlife Service and the United States Geological Survey, shall carry out a recovery and research program for southern sea otter populations along the coast of California, informed by the prioritized research recommendations of the Final Revised Recovery Plan for the southern sea otter (Enhydra lutris nereis) published by the United States Fish and Wildlife Service and dated February 24, 2003, the Research Plan for California Sea Otter Recovery issued by the United States Fish and Wildlife Service Southern Sea Otter Recovery Implementation Team and dated March 2, 2007, and any other recovery, research, or conservation plan adopted by the United States Fish and Wildlife Service after the date of enactment of this Act in accordance with otherwise applicable law. The Recovery and Research Program shall include the following:

(1) Monitoring, analysis, and assessment of southern sea otter population demographics, health, causes of mortality, and life history parameters, including range-wide population surveys.

(2) Development and implementation of measures to reduce or eliminate potential factors limiting southern sea otter populations that are related to marine ecosystem health or human activities.

(b) REAPPOINTMENT OF RECOVERY IMPLEMENTATION TEAM.—Not later than one year after the date of enactment of this Act, the Secretary shall appoint persons to a southern sea otter recovery implementation team as authorized under section 4(f)(2) of the Endangered Species Act of 1973 (16 U.S.C. 1533(f)(2)).

(c) SOUTHERN SEA OTTER RESEARCH AND RECOVERY GRANTS.—

(1) GRANT AUTHORITY.—The Secretary shall establish a peer-reviewed, merit-based process to award competitive grants for research regarding southern sea otters and for projects assisting the recovery of southern sea otter populations.

(2) PEER REVIEW PANEL.—The Secretary shall establish as necessary a peer review panel to provide scientific advice and guidance to prioritize proposals for grants under this subsection.

(3) RESEARCH GRANT SUBJECTS.—Research funded with grants under this subsection shall be in accordance with the research recommendations of any plan referred to in subsection (a), and may include the following topics:

(A) Causes of sea otter mortality.

(B) Southern sea otter demographics and natural history.

(C) Effects and sources of pollutants, nutrients, and toxicants on southern sea otters and sequestration of contaminants.

(D) Effects and sources of infectious diseases and parasites affecting southern sea otters.

(E) Limitations on the availability of food resources for southern sea otters and the impacts of food limitation on southern sea otter carrying capacity.

(F) Interactions between southern sea otters and coastal fisheries and other human activities in the marine environment.

(G) Assessment of the keystone ecological role of sea otters in southern and central California's coastal marine ecosystems, including both the direct and indirect effects of sea otter predation, especially as these effects influence human welfare, resource utilization, and ecosystem services.

(H) Assessment of the adequacy of emergency response and contingency plans.

(4) RECOVERY PROJECT SUBJECTS.—Recovery projects funded with grants under this subsection shall be conducted in accordance with recovery recommendations of any plan referred to in subsection (a), and may include projects to—

(A) protect and recover southern sea otters;

(B) reduce, mitigate, or eliminate potential factors limiting southern sea otter populations that are related to human activities, including projects to—

(i) reduce, mitigate, or eliminate factors contributing to mortality, adversely affecting health, or restricting distribution and abundance; and

(ii) reduce, mitigate, or eliminate factors that harm or reduce the quality of southern sea otter habitat or the health of coastal marine ecosystems; and

(C) implement emergency response and contingency plans.

(d) REPORT.—The Secretary shall—

(1) within 12 months after the date of enactment of this Act, report to Congress on—

(A) the status of southern sea otter populations;

(B) implementation of the Recovery and Research Program and the grant program; and

(C) any relevant formal consultations conducted under section 7 of the Endangered Species Act of 1973 (16 U.S.C. 1536) with respect to the southern sea otter; and

(2) within 24 months after the date of enactment of this Act and every 5 years thereafter, and in consultation with a southern sea otter recovery implementation team (if any) that is otherwise being utilized by the Secretary under section 4(f) of the Endangered Species Act of 1973 (16 U.S.C. 1533(f)), report to Congress and the public on—

(A) an evaluation of southern sea otter health, causes of southern sea otter mortality, and the interactions of southern sea otters with California's coastal marine ecosystems;

(B) an evaluation of actions taken to improve southern sea otter health, reduce southern sea otter mortality, and improve southern sea otter habitat;

(C) recommendation for actions, pursuant to current law, to improve southern sea otter health, reduce the occurrence of human-related mortality, and improve the health of such coastal marine ecosystems; and

(D) recommendations for funding to carry out this Act.

SEC. 3. DEFINITIONS.

In this Act:

(1) RECOVERY AND RESEARCH PROGRAM.—The term ''Recovery and Research Program'' means the recovery and research program under section 2(a).

(2) SECRETARY.—The term ''Secretary'' means the Secretary of the Interior, acting through the United States Fish and Wildlife Service and the United States Geological Survey.

SEC. 4. AUTHORIZATION OF APPROPRIATIONS.

(a) IN GENERAL.—There is authorized to be appropriated to the Secretary to carry out this Act $5,000,000 for each of fiscal years 2010 through 2015 of which—

(1) no less than 30 percent shall be for research grants under section 2(c)(3); and

(2) no less than 30 percent shall be for recovery projects under section 2(c)(4).

(b) ADMINISTRATIVE EXPENSES.—Of amounts available each fiscal year to carry out this Act, the Secretary may expend not more than 7 percent to pay the administrative expenses necessary to carry out this Act.

SEC. 5. TERMINATION.

This Act shall have no force or effect on and after the date the Secretary (as that term is used in section 4(c)(2) of the Endangered Species Act of 1973 (16 U.S.C. 1533(c)(2)) publishes a determination that the southern sea otter should be removed from the lists published under section 4(c) of the Endangered Species Act of 1973 (16 U.S.C. 1533(c)).

The SPEAKER pro tempore. Pursuant to the rule, the gentlewoman from Guam (Ms. BORDALLO) and the gentleman from Washington (Mr. HASTINGS) each will control 20 minutes.

The Chair recognizes the gentlewoman from Guam.

GENERAL LEAVE

Ms. BORDALLO. Mr. Speaker, I ask unanimous consent that all Members may have 5 legislative days in which to revise and extend their remarks and include extraneous material on the bill under consideration.

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

There was no objection.

Ms. BORDALLO. Mr. Speaker, growth of the southern sea otter population has been slow over the last decade because of high mortality rates. Otters die from many causes, including disease and parasites, malnutrition and entanglement in fishing gear. Additional action is needed to ensure the recovery of these animals is a success.

H.R. 556, introduced by our colleague Congressman SAM FARR of California, would direct the U.S. Fish and Wildlife Service to implement a program that would address the decline of the southern sea otter by looking at health, mortality, and life history parameters, develop measures to reduce factors impacting marine ecosystems, health and human activities that limit sea otter populations, and to do so in accordance with consensus recommendations made by the Service's published Southern Sea Otter Recovery Plan.

H.R. 556 has been substantially revised since it was introduced, largely

to address concerns of coastal fishing interests. The bill also benefited from further changes to streamline the recovery and research grant program and clarify its scope as it advanced through the committee process.

H.R. 556 is necessary to provide a stable and reliable source of funding for critically needed research, monitoring, and implementation of recovery actions. Its provisions would apply directly to southern sea otters, but because these otters are a keystone and a sentinel species, H.R. 556 would also benefit the California coastal ecosystem as a whole.

So I urge Members, Mr. Speaker, to support the bill and reserve the balance of my time.

Mr. HASTINGS of Washington. Mr. Speaker, I yield myself as much time as I may consume.

Mr. Speaker, I rise in opposition to H.R. 556, a bill which will take a threatened species and place its management needs above others, even if those species are in danger of becoming extinct.

The U.S. Fish and Wildlife Service is the agency with management over the southern sea otter and most other animals listed as endangered or threatened under the Endangered Species Act. The Service should be afforded the opportunity to make its own determination on how best to use Endangered Species Act recovery funds.

Mr. Speaker, I don't believe Congress should get into the habit of promoting one species' needs over other more endangered species. We should let the management agency do its job, guided by the Endangered Species Act.

I reserve the balance of my time.

Ms. BORDALLO. Mr. Speaker, I yield such time as he may consume to the gentleman from California (Mr. FARR).

Mr. FARR. Mr. Speaker, the southern sea otters are a keystone species, as the chairwoman pointed out. That means that if they break the chain, the whole ecological system falls apart. And essentially, what you find in the oceans are the sea urchins are kind of like the snails of the ocean. They eat the seaweed. And if the sea urchins go unchecked, you'll clearcut the oceans and have no habitat for all the fish and other things that live in the kelp beds.

So the sea otters, by eating urchins—and frankly, we have a big urchin industry in California as well—have been compatible for years and years. The problem we have with the southern sea otters is that it's a remarkable recovery, and it's a tribute to Federal law that listed them, because they were less than 100 animals, and now they're up to about 2,000.

But guess what? They're not growing and there are less than there were a few years ago. So there is something happening to this species that nobody can understand. And that's why you need specific legislation to try to get—as the bill points out, it's a research bill.

And I want to point out to the ranking member, Mr. HASTINGS, that where he pointed out that we shouldn't have these management sort of by single caveat, although we have done, in law, the African Elephant, the Bald and the Golden Eagle—and I know those are important to you in your district—the Tule Elk Preservation Act, the Fur Seal Act, the Crown of Thorns Starfish Act, the North Pacific Halibut Act, the Salmon Conservation Act, and the Atlantic Striped Bass Conservation; those are just 8 which I could quickly find, and I'm sure there's a lot more.

I think that the crisis here of the sea otter, and, frankly, it's a big economic issue, too, because those of us who live along the central coast of California, it is a big draw for tourism, and that's why the Monterey Bay Aquarium, their single-most looked at and visited exhibit is the sea otters.

So this bill came about with a lot of work from a lot of organizations. There's 13 organizations that have gone in support of this bill and brought these issues to us, including the Defenders of Wildlife, Friends of the Sea Otter, The Humane Society of the United States, the Marine Conservation Biology Institute, the Natural Resources Defense Counsel, Oceana, and many others, and they represent about 14 million members.

So I'm pleased that we were able to work out this bill with the committee and bring it to the floor and hopefully get it adopted so that we can figure out why this canary species, if the sea otters are dying, then something else is happening that is very keen to the coastal and near-shore environment that affects the well-being of mankind.

□ 1530

So I would appreciate your support on this bill. It is important to good science and to the preservation of our marine ecosystem.

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

Ms. BORDALLO. Mr. Speaker, I again urge Members to support the bill, and I yield back the balance of my time.

The SPEAKER pro tempore. The question is on the motion offered by the gentlewoman from Guam (Ms. BORDALLO) that the House suspend the rules and pass the bill, H.R. 556, as amended.

The question was taken.

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

Mr. HASTINGS of Washington. Mr. Speaker, I object to the vote on the ground that a quorum is not present and make the point of order that a quorum is not present.

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.

The point of no quorum is considered withdrawn.

MARINE TURTLE CONSERVATION REAUTHORIZATION ACT OF 2009

Ms. BORDALLO. Mr. Speaker, I move to suspend the rules and pass the bill (H.R. 509) to reauthorize the Marine Turtle Conservation Act of 2004, as amended.

The Clerk read the title of the bill.

The text of the bill is as follows:

H.R. 509

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

SECTION 1. SHORT TITLE.

This Act may be cited as the ''Marine Turtle Conservation Reauthorization Act of 2009''.

SEC. 2. AMENDMENTS TO PROVISIONS PREVENTING FUNDING OF PROJECTS IN THE UNITED STATES.

(a) IN GENERAL.—The Marine Turtle Conservation Act of 2004 is amended—

(1) in section 2(b) (16 U.S.C. 6601(b)), by striking ''in foreign countries'';

(2) in section 3(2) (16 U.S.C. 6602(2))—

(A) in the matter preceding subparagraph (A), by striking ''in foreign countries''; and

(B) in subparagraph (D), by striking ''of foreign countries''; and

(3) in section 4 (16 U.S.C. 6603)—

(A) in subsection (b)(1)(A), by inserting ''State or'' before ''foreign country''; and

(B) in subsection (d), by striking ''in foreign countries''.

(b) STATE DEFINED.—Section 3 of such Act (16 U.S.C. 6602) is amended by adding at the end the following new paragraph:

''(7) STATE.—The term 'State' means each of the several States of the United States, the District of Columbia, the Commonwealth of Puerto Rico, the Virgin Islands, Guam, American Samoa, the Commonwealth of the Northern Mariana Islands, any other territory or possession of the United States, and any Indian tribe.''.

SEC. 3. LIMITATIONS ON EXPENDITURES.

Section 5(b) of the Marine Turtle Conservation Act of 2004 (16 U.S.C. 6604(b)) is amended—

(1) in paragraph (2), by striking ''$80,000'' and inserting ''$150,000''; and

(2) by adding at the end the following new paragraph:

''(3) LIMITATION ON PROJECTS IN THE UNITED STATES.—Not more than 20 percent of the amounts made available from the Fund for any fiscal year may be used for projects relating to the conservation of marine turtles in the United States.''.

SEC. 4. REAUTHORIZATION OF THE MARINE TURTLE CONSERVATION ACT OF 2004.

Section 7 of the Marine Turtle Conservation Act of 2004 (16 U. S. C. 6606) is amended by striking ''each of fiscal years 2005 through 2009'' and inserting ''each of fiscal years 2009 through 2014''.

The SPEAKER pro tempore. Pursuant to the rule, the gentlewoman from Guam (Ms. BORDALLO) and the gentleman from Washington (Mr. HASTINGS) each will control 20 minutes.

The Chair recognizes the gentlewoman from Guam.

GENERAL LEAVE

Ms. BORDALLO. Mr. Speaker, I ask unanimous consent that all Members may have 5 legislative days in which to revise and extend their remarks and to include extraneous material on the bill under consideration.

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

There was no objection.

Ms. BORDALLO. Mr. Speaker, marine sea turtles are threatened by intentional and accidental capture in fisheries, by the destruction of essential nesting habitat through coastal development, by the poaching of eggs, meat and shells, by the entanglement in marine debris, by ship strikes, and by ocean pollution.

The Marine Turtle Conservation Reauthorization Act of 2009, introduced by my friend and ranking member, Mr. BROWN of South Carolina, provides a simple extension of an existing program which helps enhance our conservation of marine turtle species. While progress has been made, the status of these turtle species remains tenuous, justifying the need to reauthorize this act.

So I ask my colleagues, Members on both sides of the aisle, to support its passage.

I reserve the balance of my time.

Mr. HASTINGS of Washington. I yield myself as much time as I may consume.

Mr. Speaker, H.R. 509, which was introduced by the gentleman from South Carolina (Mr. BROWN), a member of the resources committee, will extend the authority of the Secretary of the Interior to issue conservation grants to assist highly endangered marine sea turtles.

Under this measure, the authorization of appropriations is extended an additional 5 years at existing funding levels. Since 2004, 78 conservation projects have been approved to assist the imperiled green, hawksbill, leatherback, loggerhead, and Olive Ridley marine sea turtles. These projects are making a real difference in the ongoing struggle to save these species.

I urge an ''aye'' vote on H.R. 509. Again, I want to compliment my friend and colleague from South Carolina, Mr. BROWN.

I yield back the balance of my time.

Ms. BORDALLO. Mr. Speaker, in closing, I support this bill to restore and to protect marine sea turtles, and I urge Members to support both the turtles and the otters.

I yield back the balance of my time.

The SPEAKER pro tempore. The question is on the motion offered by the gentlewoman from Guam (Ms. BORDALLO) that the House suspend the rules and pass the bill, H.R. 509, as amended.

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. BORDALLO. Mr. Speaker, I object to the vote on the ground that a quorum is not present and make the point of order that a quorum is not present.

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.

The point of no quorum is considered withdrawn.

CONGRATULATING LOUISIANA STATE UNIVERSITY BASEBALL TEAM

Mr. GRIJALVA. Mr. Speaker, I move to suspend the rules and agree to the resolution (H. Res. 616) congratulating the Louisiana State University baseball team for winning the 2009 National Collegiate Athletic Association Division I College World Series.

The Clerk read the title of the resolution.

The text of the resolution is as follows:

H. RES. 616

Whereas, on June 24, 2009, the Louisiana State University Tigers baseball team completed a remarkable season, winning the 2009 National Collegiate Athletic Association Division I College World Series Championship at the Rosenblatt Stadium in Omaha, Nebraska, by defeating the top ranked University of Texas Longhorns, 11–4;

Whereas the success of the team was a direct result of the talent and resolve of every player on the Louisiana State University Tigers baseball team, including Buzzy Haydel, Jared Mitchell, Chad Jones, Derek Helenihi, Leon Landry, Grant Dozar, Mikie Mahtook, Wet Delatte, Ryan Byrd, Tyler Hanover, Austin Ross, Sean Ochinko, Ryan Schimpf, DJ LeMahieu, Nicholas Pontiff, Shane Riedie, Johnny Dishon, Matty Ott, Anthony Ranaudo, Daniel Bradshaw, Randy Zeigler, Beau Didier, Louis Coleman, Chris Matulis, Chris McGhee, Micah Gibbs, Blake Dean, Austin Nola, Jordan Nicholson, Nolan Cain, Paul Bertuccini, Ben Alsup, Kevin Farnsworth, and Spencer Mathews;

Whereas the Louisiana State University Tigers baseball team's title run included winning 15 of the final 16 games and hitting 13 home runs in 6 College World Series games while averaging more than 8 runs throughout the postseason;

Whereas the Louisiana State University baseball team completed the year with a 56–17 record, including a 5–1 record in the Southeastern Conference tournament, a 3–0 record in the Regional tournament, a 2–0 record in the Super Regional contest, and a 5–1 record in the College World Series;

Whereas the 2009 College World Series Championship represents the sixth National Championship for the Louisiana State University Tigers baseball team;

Whereas the Louisiana State University Tigers baseball team is 6–0 in winner-take-all national championship games;

Whereas this victory marks the second time the Louisiana State University Tigers baseball team has won the Southeastern Conference regular season title, the SEC tournament title, and the national title in the same year;

Whereas coach Paul Mainieri successfully led the Louisiana State University Tigers baseball team back to national prominence in only his third year as head coach;

Whereas Jared Mitchell was named Most Outstanding Player of the College World Series, after hitting .347 with 2 home runs, 7 RBI, two doubles, and a triple;

Whereas Chad Jones and Jared Mitchell became the first 2 players to win a BCS football championship and a College World Series; and

Whereas Louisiana State University's national championship spotlights one of the Nation's premier State universities, which is committed to academic and athletic excellence: Now, therefore, be it

Resolved, That the House of Representatives—

(1) commends the Louisiana State University Tigers baseball team for winning the 2009 College World Series;

(2) recognizes the achievements of all the players, coaches, and support staff who were instrumental in helping the Louisiana State University baseball team during the 2009 baseball season;

(3) congratulates the citizens of Louisiana, the Louisiana State University community, and fans of Tiger baseball; and

(4) directs the Clerk of the House of Representatives to make available enrolled copies of this resolution to Louisiana State University for appropriate display and distribution to the coaches and members of the 2009 Louisiana State University baseball team.

The SPEAKER pro tempore. Pursuant to the rule, the gentleman from Arizona (Mr. GRIJALVA) and the gentleman from Louisiana (Mr. CASSIDY) each will control 20 minutes.

The Chair recognizes the gentleman from Arizona.

GENERAL LEAVE

Mr. GRIJALVA. Mr. Speaker, I ask unanimous consent that all Members may have 5 legislative days during which to revise and extend their remarks and to insert extraneous material on H. Res. 616 into the RECORD.

The SPEAKER pro tempore. Is there objection to the request of the gentleman from Arizona?

There was no objection.

Mr. GRIJALVA. I yield myself such time as I may consume.

Mr. Speaker, I rise today to congratulate the Louisiana State University baseball team for their victory in the 2009 NCAA Division I tournament.

On June 24, the LSU Tigers captured the university's sixth national baseball championship with an impressive 11–4 victory over the talented University of Texas Longhorns. This decisive victory over the Texas Longhorns in the third game of a three-game series marked the first baseball championship for the Tigers since 2000.

We want to congratulate the coaches, the fans and the supporters of the LSU Tigers in this dramatic victory. They were rated number one going into the season, third when the tournament began; and they pulled a dramatic victory.

I must emphasize that LSU is not only an athletic powerhouse, but this university is also a premiere academic institution. They offer bachelor's, master's, doctoral, and professional degrees. The school enrolls over 26,000 students, including more than 1,400 international students and over 4,000 graduate students. LSU graduates elite athletes, renowned scholars, and famous elected officials who are changing the world as we know it.

Mr. Speaker, once again, I congratulate Louisiana State University. I want to thank Representative CASSIDY for bringing the resolution forward. I urge my colleagues to support this resolution.

I reserve the balance of my time.

Mr. CASSIDY. I thank my colleague from Arizona.

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

I rise today in support of House Resolution 616, congratulating the Louisiana State University baseball team for winning the 2009 National Collegiate Athletic Association Division I College World Series.

Louisiana State University, LSU, was founded in 1853. Its first academic session began in 1860. As of the spring of 2009, LSU's enrollment is more than 26,000 students, including more than 1,400 international students and over 4,000 graduate students. LSU includes 10 senior colleges and schools; and since its first commencement in 1869, the university has awarded nearly 200,000 degrees. LSU has more than 300 student organizations on campus and is widely known for its successful athletic program.

The Louisiana State University Tigers have won 45 national sports championships, including five in baseball, three in football, and 25 in women's track and field. Since 1986, LSU's baseball has been considered an elite program in college baseball, making 15 College World Series appearances and winning six national championships. The team was founded in 1895, and it played a total of four games that first season. The Tigers won their first national championship in 1991; and most recently, they were crowned national champions for the sixth time.

The 2009 LSU Tigers baseball team was led to national victory by Coach Paul Mainieri. The team traveled to Omaha, Nebraska, for the NCAA College World Series after sweeping Southern University, Baylor University, and the University of Minnesota in the regional championship and Rice University in the Super Regional Championship.

In the NCAA Division I College World Series, the LSU Tigers faced the Texas Longhorns in the finals after winning victories over the Virginia Cavaliers and the Arkansas Razorbacks. The LSU Tigers took the national title after a grueling three-game series against the Texas Longhorns. LSU finished their season 56–17. The team's athletic ability, determination, and Coach Paul Mainieri's leadership led the LSU Tigers baseball team to their first national championship victory since the year 2000.

As a graduate of both LSU and of the LSU Medical School, I am honored to stand before the House today to congratulate and to recognize the significant achievements of the players, coaches and students, whose dedication and hard work have led to the success of the LSU baseball program as the 2009 NCAA Division I College World Series national champions.

I ask my colleagues to support the resolution.

Geaux (go) Tigers.

I reserve the balance of my time.

Mr. GRIJALVA. Mr. Speaker, I would inquire of my colleague, Mr. CASSIDY, if he has any additional speakers.

Mr. CASSIDY. I do.

Mr. GRIJALVA. Mr. Speaker, I continue to reserve the balance of my time.

Mr. CASSIDY. I yield to the gentleman from Louisiana, my colleague, Dr. Boustany.

Mr. BOUSTANY. Mr. Speaker, I rise today in support of House Resolution 616, congratulating the Louisiana State University baseball team for winning the 2009 National Collegiate Athletic Association Division I baseball national championship.

I want to thank my friend, Congressman BILL CASSIDY, for sponsoring this resolution and for yielding time to me as well. I also want to thank the Education and Labor Committee for bringing it to the floor.

On June 24, the LSU Tigers defeated the top-seeded University of Texas Longhorns 11–4 in the third and final game of the College World Series to achieve their sixth national championship in baseball.

In only his third year as head coach, Paul Mainieri led the Tigers back into the national spotlight. The series was sealed by an amazing performance from Jared Mitchell, who was named Most Outstanding Player of the series and who was a first-round pick in the 2009 Major League Baseball draft. Mitchell and fan favorite, pitcher Chad Jones, became the first two athletes to win both a College World Series and a BCS football national championship.

Mr. Speaker, I am especially proud of two players from my district. First of all, there is my cousin Mikie Mahtook. Mikie lost his dad when he was about 6 years old. His dad was also a very well-known college athlete at LSU, and Mikie has turned out to be a great young man. He was SEC All-Freshman outfielder. He is from Lafayette, my hometown.

I also want to congratulate Spencer Matthews from Lake Charles, also in my district.

This season, Mikie Mahtook gave an excellent performance in the outfield in addition to batting .450 with 13 home runs, 45 RBIs, 25 stolen bases, and multiple clutch hits, most notably in game 1 of the championship series.

Spencer recently represented the Thomasville Hi-Toms in the Coastal Plain League All-Star game, a wooden bat summer league for college players in Wilmington, North Carolina. He pitched a scoreless fifth inning in the game, allowing no hits and striking out two batters. Both student athletes are tremendous assets to the team and to southwest Louisiana.

Mr. Speaker, we must not forget that, foremost, these student athletes perform just as hard in the classroom as they do on the baseball field. I am proud to announce that 11 members of this national championship team were placed on the 2009 Southeastern Conference Spring Academic Honor Roll. Each student athlete must have at least a 3.0 grade point average to be recognized.

This championship is very special to the Louisiana State University system and to my great State of Louisiana. It is my honor to recognize Coach Paul Mainieri and the 2009 LSU Tigers baseball team for all of its accomplishments this season and for bringing home the College World Series title.

I also want to commend the families of these players, coaches and support staff and the very loyal, very vocal LSU baseball fans who have come to recognize Omaha as a home away from home.

I now ask my colleagues to support this resolution.

Geaux (go) Tigers.

Mr. CASSIDY. I reserve the balance of my time.

Mr. GRIJALVA. We have, I believe, no further speakers. I reserve the balance of my time.

Mr. CASSIDY. I yield 2 minutes to my colleague, the gentleman from Louisiana, Congressman SCALISE.

□ 1545

Mr. SCALISE. I thank my colleague from Baton Rouge for yielding me 2 minutes, and it's also good to follow up my colleague from Lafayette rising in support of this resolution commending the 2009 LSU Tigers for their national championship winning the College World Series.

As a proud alumnus of LSU, I was very excited to see them regain the prominence that they had under Skip Burtman, who won five national championship College World Series during his tenure as the head coach, probably one of the greatest baseball coaches in the history of college baseball. And now to have turned the program over to Paul Maneri, who just in his third year won the national title, winning this College World Series in Omaha, a place that many people from Baton Rouge and fans of LSU all throughout the country enjoy going to, and enjoy celebrating national championships like now. They did with the sixth national championship, making them number two behind all college teams in the history of college baseball.

So there were a number of notable achievements. Of course, you've got to congratulate the coaches and the players, and the entire LSU community for what they've done, but there were some distinctions. Chad Jones and Jared Mitchell became the first two teammates who actually won a BCS national championship being on the 2007 football national championship team and also being on the team that won the College World Series. So some notable achievements there. And the entire LSU faculty, of course. The LSU program generates hundreds of thousands of dollars that go back to the academic programs and the great academics at LSU as well.

So, again, I thank my colleague. I'm proud to cosponsor this resolution, and I urge all of my colleagues to support it.

Geaux (go) Tigers.

Mr. CASSIDY. I yield back the balance of my time.

Mr. GRIJALVA. I yield back the balance of our time, Mr. Speaker.

The SPEAKER pro tempore. The question is on the motion offered by the gentleman from Arizona (Mr. GRIJALVA) that the House suspend the rules and agree to the resolution, H. Res. 616.

The question was taken.

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

Mr. CASSIDY. Mr. Speaker, I object to the vote on the ground that a quorum is not present and make the point of order that a quorum is not present.

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.

The point of no quorum is considered withdrawn.

MORRIS K. UDALL SCHOLARSHIP AND EXCELLENCE IN NATIONAL ENVIRONMENTAL POLICY AMENDMENTS ACT OF 2009

Mr. GRIJALVA. Mr. Speaker, I move to suspend the rules and pass the bill (H.R. 1035) to amend the Morris K. Udall Scholarship and Excellence in National Environmental and Native American Public Policy Act of 1992 to honor the legacy of Stewart L. Udall, and for other purposes.

The Clerk read the title of the bill.

The text of the bill is as follows:

H.R. 1035

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

SECTION 1. SHORT TITLE.

This Act may be cited as the ''Morris K. Udall Scholarship and Excellence in National Environmental Policy Amendments Act of 2009''.

SEC. 2. SHORT TITLE.

Section 1 of the Morris K. Udall Scholarship and Excellence in National Environmental and Native American Public Policy Act of 1992 (20 U.S.C. 5601 note; Public Law 102–259) is amended to read as follows:

''SEC. 1. SHORT TITLE.

''This Act may be cited as the 'Morris K. Udall and Stewart L. Udall Foundation Act'.''.

SEC. 3. FINDINGS.

Section 3 of the Morris K. Udall and Stewart L. Udall Foundation Act (20 U.S.C. 5601) is amended—

(1) in paragraph (3), by striking ''and'' at the end;

(2) in paragraph (4), by striking the period at the end and inserting a semicolon; and

(3) by adding at the end the following:

''(5) the Foundation—

''(A) since 1995, has operated exceptional scholarship, internship, and fellowship programs for areas of study related to the environment and Native American tribal policy and health care;

''(B) since 1999, has provided valuable environmental conflict resolution services and leadership through the United States Institute for Environmental Conflict Resolution; and

''(C) is committed to continue making a substantial contribution toward public policy in the future by—

''(i) playing a significant role in developing the next generation of environmental and Native American leaders; and

''(ii) working with current leaders to improve decisionmaking on—

''(I) challenging environmental, energy, and related economic problems; and

''(II) tribal governance and economic issues;

''(6) Stewart L. Udall, as a member of Congress, Secretary of the Interior, environmental lawyer, and author, has provided distinguished national leadership in environmental and Native American policy for more than 50 years;

''(7) as Secretary of the Interior from 1961 to 1969, Stewart L. Udall oversaw the creation of 4 national parks, 6 national monuments, 8 national seashores and lakeshores, 9 recreation areas, 20 historic sites, and 56 wildlife refuges; and

''(8) it is fitting that the leadership and vision of Stewart L. Udall in the areas of environmental and Native American policy be jointly honored with that of Morris K. Udall through the foundation bearing the Udall name.''.

SEC. 4. DEFINITIONS.

Section 4 of the Morris K. Udall and Stewart L. Udall Foundation Act (20 U.S.C. 5602) is amended—

(1) in paragraph (1), by striking ''Morris K. Udall Scholarship and Excellence in National Environmental Policy'';

(2) in paragraph (5), by striking ''Scholarship and Excellence in National Environmental Policy'' and inserting ''and Stewart L. Udall''; and

(3) in paragraph (9), by striking ''Scholarship and Excellence in National Environmental Policy'' and inserting ''and Stewart L. Udall''.

SEC. 5. ESTABLISHMENT OF FOUNDATION.

Section 5 of the Morris K. Udall and Stewart L. Udall Foundation Act (20 U.S.C. 5603) is amended—

(1) in the section heading, by striking ''**SCHOLARSHIP AND EXCELLENCE IN NATIONAL ENVIRONMENTAL POLICY**'' and inserting ''**AND STEWART L. UDALL**'';

(2) in subsection (a), by striking ''Scholarship and Excellence in National Environmental Policy'' and inserting ''and Stewart L. Udall''; and

(3) in subsection (f)(2), by striking ''the rate specified for employees in level IV of the Executive Schedule under section 5315 of title 5, United States Code'' and inserting ''a rate determined by the Board in accordance with section 5383 of title 5, United States Code''.

SEC. 6. AUTHORITY OF FOUNDATION.

Section 7 of the Morris K. Udall and Stewart L. Udall Foundation Act (20 U.S.C. 5605) is amended—

(1) in subsection (a)(5)—

(A) in subparagraph (C), by striking ''and'' at the end;

(B) in subparagraph (D), by striking the period at the end and inserting ''; and''; and

(C) by adding at the end the following:

''(E) to conduct training, research, and other activities under section 6(7).''; and

(2) by striking subsection (b) and inserting the following:

''(b) UDALL SCHOLARS.—Recipients of scholarships, fellowships, and internships under this Act shall be known as 'Udall Scholars', 'Udall Fellows', and 'Udall Interns', respectively.''.

SEC. 7. ESTABLISHMENT OF TRUST FUND.

Section 8 of the Morris K. Udall and Stewart L. Udall Foundation Act (20 U.S.C. 5606) is amended—

(1) in the section heading, by striking ''**SCHOLARSHIP AND EXCELLENCE IN NATIONAL ENVIRONMENTAL POLICY**'' and inserting ''**AND STEWART L. UDALL**''; and

(2) in subsection (a), by striking ''Scholarship and Excellence in National Environmental Policy'' and inserting ''and Stewart L. Udall''.

SEC. 8. EXPENDITURES AND AUDIT OF TRUST FUND.

Section 9(a) of the Morris K. Udall and Stewart L. Udall Foundation Act (20 U.S.C. 5607(a)) is amended by inserting before the period at the end the following: '', including a reasonable amount for official reception and representation expenses, as determined by the Board, not to exceed $5,000 for a fiscal year''.

SEC. 9. USE OF INSTITUTE BY FEDERAL AGENCY OR OTHER ENTITY.

Section 11 of the Morris K. Udall and Stewart L. Udall Foundation Act (20 U.S.C. 5607b) is amended by adding at the end the following:

''(f) AGENCY MANAGEMENT OR CONTROL.—Use of the Foundation or Institute to provide independent and impartial assessment, mediation, or other dispute or conflict resolution under this section shall not be considered to be the establishment or use of an advisory committee within the meaning of the Federal Advisory Committee Act (5 U.S.C. App.).''.

SEC. 10. ADMINISTRATIVE PROVISIONS.

Section 12(a) of the Morris K. Udall and Stewart L. Udall Foundation Act (20 U.S.C. 5608(a)) is amended—

(1) by striking paragraph (1) and inserting the following:

''(1)(A) appoint such personnel as may be necessary to carry out the provisions of this Act, without regard to the provisions of title 5, United States Code, governing appointments in the competitive service; and

''(B) fix the compensation of the personnel appointed under subparagraph (A) at a rate not to exceed the maximum rate for employees in grade GS–15 of the General Schedule under section 5332 of title 5, United States Code, except that up to 4 employees (in addition to the Executive Director under section 5(f)(2)) may be paid at a rate determined by the Board in accordance with section 5383 of that title.'';

(2) in paragraph (6), by striking ''and'' at the end;

(3) by redesignating paragraph (7) as paragraph (8); and

(4) by inserting after paragraph (6) the following:

''(7) to rent office space in the District of Columbia or its environs; and''.

SEC. 11. AUTHORIZATION OF APPROPRIATIONS.

Section 13 of the Morris K. Udall and Stewart L. Udall Foundation Act (20 U.S.C. 5609) is amended—

(1) in subsection (a), by striking ''is authorized to be appropriated to the Trust Fund $40,000,000'' and inserting ''are authorized to be appropriated to the Trust Fund such sums as are necessary''; and

(2) by striking subsection (b) and inserting the following:

''(b) ENVIRONMENTAL DISPUTE RESOLUTION FUND.—There are authorized to be appropriated to the Environmental Dispute Resolution Fund established under section 10(a) such sums as are necessary for the operating costs of the Institute.''.

The SPEAKER pro tempore. Pursuant to the rule, the gentleman from Arizona (Mr. GRIJALVA) and the gentleman from Louisiana (Mr. CASSIDY) each will control 20 minutes.

The Chair recognizes the gentleman from Arizona.

GENERAL LEAVE

Mr. GRIJALVA. Mr. Speaker, I request 5 legislative days during which Members may revise and extend and insert extraneous material on H.R. 1035 into the RECORD.

The SPEAKER pro tempore. Is there objection to the request of the gentleman from Arizona?

There was no objection.

Mr. GRIJALVA. I rise in support of H.R. 1035, a bill that enhances the Morris K. Udall Foundation and honors the life of Stewart Udall.

The Morris K. Udall Foundation is an independent Federal agency based in Tucson, Arizona, which operates exceptional educational programs focused on developing leadership on environmental and Native American issues. It also includes the U.S. Institute for Environmental Conflict Resolution, the only program within the Federal Government focused entirely on preventing, managing, and resolving Federal environmental conflicts.

The legislation today will enhance the foundation's programs and operations and at the same time honor one of the greatest public servants and conservationists in history, Stewart L. Udall, by adding his name to the foundation with that of his late brother, Morris K. Udall.

The Udall Foundation was established by Congress in 1992. Initially the foundation's mission was to provide educational opportunities for studies related to the environment and Native American tribal policy and health care. In 1998, Congress amended the Udall Foundation in enabling legislation to add a new mission: resolving conflicts related to environment, natural resources and public lands through services including mediation, facilitation and training.

The work of the Udall Foundation has become even more important today as the Nation seeks long-term responses to climate change, sustainable energy supplies, and a sustainable economy for all Americans.

Through the education programs, the Udall Foundation identifies and educates tomorrow's leaders that are critical to the energy, climate change, and economic issues facing this country.

The programs include a premier scholarship and doctoral fellowship program for studies related to the environment; a scholarship for Native Americans studying tribal policy and health care; the Native American Congressional Internship program, which brings gifted undergraduate and graduate students to Congress to work in our office and with agencies throughout the Federal Government; the Native American Nation's Institute for Leadership and Management, which trains and educates tribal leaders on the changing role and how to apply research and how indigenous people can meet the practical challenges of nation building; and the Park and Focus Program, which connects underserved youth to nature through the art of photography, instilling a new and lasting long-term understanding and appreciation of our public lands.

It's appropriate for Congress to provide solid support for the Udall Foundation's important programs through this legislation, while simultaneously recognizing the unsurpassed contributions of Stewart L. Udall by adding his name to the foundation's title.

Stewart Udall served in this House of Congress with distinction from 1955, representing an area that included what is now my district, until he was appointed Secretary of the Interior in 1961 by President John F. Kennedy. As Secretary of Interior, Stewart Udall had an unmatched record of environmental leadership overseeing the creation of four national parks, six national monuments, eight national seashores and lakeshores, nine recreation areas, 20 historic sites, and 56 wildlife refuges. He continued to make substantial contributions to environmental and Native American policy as a lawyer and author following his tenure.

I urge passage of H.R. 1035.

I reserve the balance of my time.

Mr. CASSIDY. Mr. Speaker, I yield myself as much time as I may consume.

I rise today in support of H.R. 1035, a bill that amends the Morris K. Udall Scholarship and Excellence in National and Environmental Policy Act.

The Morris K. Udall Foundation was created by Congress in 1992 to honor Mr. Udall's 30 years in public service. The Foundation was created to help educate new generations to protect the environment. The Foundation works to increase the awareness of our Nation's natural resources, foster a greater recognition and understanding of the role of the environment in the development of our Nation, and through the U.S. Institute for Environmental Conflict Resolution provide mediation and other services to resolve environmental disputes involving Federal agencies.

The Foundation operates several educational programs. The Morris K. Udall scholarship program awards approximately 80 merit-based scholarships at about $5,000 each year. It also supports about 12 Native Americans or Alaskan Natives every summer for a 10-week, bipartisan congressional internship program. Finally, the Foundation supports two fellows every year in a doctoral program whose research focuses on environmental policy.

The bill before us today continues the work of the Foundation by making some administrative changes, and more importantly, adding another member of the Udall family to the name of the Foundation by changing the name of the Foundation to the Morris K. Udall and Stewart L. Udall Foundation.

Like his brother Morris, Stewart also spent his life serving the Nation. He was elected to Congress in 1954 and served from 1955 to 1961, when he left to serve as President John F. Kennedy's Secretary of the Interior. He continued in that post until 1969, when he returned to the private sector, always working to protect the environment and our Nation's heritage.

Mr. Stewart Udall is almost 90 years old, and adding his name to the Foundation is a fitting tribute to him and his family's services to the Nation. I urge my colleagues to support this bill.

I reserve the balance of my time.

Mr. GRIJALVA. Mr. Speaker, I am pleased to recognize the chairman of the Education and Labor Committee, the gentleman from California (Mr. GEORGE MILLER) for as much time as he may consume.

(Mr. GEORGE MILLER of California asked and was given permission to revise and extend his remarks.)

Mr. GEORGE MILLER of California. I thank the gentleman from Arizona for yielding this time, and I rise in very strong support of H.R. 1035, which honors the life of Stewart L. Udall, a selfless public servant, by making improvements to the Morris K. Udall Foundation's programs and operations, and also adds his name to that of the name of his brother, Morris Udall, on the Foundation.

Stewart Udall was born and raised in St. John's, Arizona, along with his brother Morris, and as a young man, Stewart left his studies at the University of Arizona to pursue 2 years of work as a Mormon missionary in both New York and Pennsylvania. He also served his country in World War II as a gunner in Europe, and he traveled back to Tucson to acquire a law degree and open a successful law firm with his brother.

As was recounted already by my colleagues, he was elected to Congress in 1954 and served both on the Interior Committee and on the Committee on Education and Labor. During the 85th Congress, Stewart also served on the Joint Committee on the Navajo-Hopi Indian Administration, a conflict that lasted much longer than his term in the Congress of the United States.

I don't want to recount all of the things that my colleagues have said, but clearly during his time in Congress he was very active on these committees, and President Kennedy recognized his leadership on the issues of the environment and stewardship of our public lands and nominated him to be Secretary of the Interior, as Mr. GRIJALVA pointed out. He was one of our most successful Secretaries of the Interior, not just in leadership, but also in what he was able to accomplish in working with the Congress in the establishment of seashores and national monuments and lakeshores and recreational areas across our country that are so valuable to our local communities and to our local economies.

And after leaving Congress, he continued and continues today to be actively involved in public policy around environmental issues and working very hard, as does the Foundation, on environmental conflict resolution.

This is an effort by the Congress, and I think a wonderful effort by the Congress, to recognize the contributions of Stewart Udall and his brother, Morris Udall—who I served with in the Congress, was my chairman on the Resources Committee. And really, the recognition of a family that has contributed so much to public service.

And I would hope that my colleagues would give this resolution resounding support on behalf of Mo Udall, Stewart Udall, and the Udall family—and what public service means to all of us in this country.

I thank the gentleman (Mr. GRIJALVA) for yielding me this time.

Mr. CASSIDY. I continue to reserve the balance of my time.

Mr. GRIJALVA. Mr. Speaker, I am pleased to recognize the gentleman from American Samoa (Mr. FALEOMAVAEGA) for 3 minutes.

(Mr. FALEOMAVAEGA asked and was given permission to revise and extend his remarks.)

Mr. FALEOMAVAEGA. Mr. Speaker, I certainly want to thank the gentleman from Arizona, the chairman of our National Parks Subcommittee, for his leadership and sponsorship of this bill. And I certainly want to associate myself with the comments made earlier by our colleague and former chairman of our House Resources Committee, and currently chairman of the Education and Labor Committee, Congressman MILLER, for his comments and commending this legislation to the extent that when you mentioned the name ''Udall,'' it resonates very well in the State of Arizona, which I'm sure my good chairman will always realize that.

I say this with a sense of a tremendous feeling about the Udall family as an early Mormon pioneer family who settled what is now Arizona and the tremendous contributions that these brothers have made to our Nation's environmental issues. How ironic it is from a Western State that you have two dynamic leaders that have shown real leadership in protecting our Nation's environment and all of this, and you think that it comes only from those who want to develop our resources, rather than also looking at the environmental issues as just as important.

Ironically, too, the fact that Stewart Udall's son currently serves as U.S. Senator from the State of Colorado—and I think I'm getting myself mixed up here. There are so many Udalls going around here that even I get confused. Stewart Udall's son, who is TOM, is currently the U.S. Senator from New Mexico, and Mo Udall's son, MARK, is currently the U.S. Senator from Colorado.

□ 1600

But again, Mr. Speaker, I do want to commend my good friend, the gentleman from Arizona, for his sponsorship of this bill, and I urge my colleagues to pass this legislation, especially the tremendous help that it gives to students of the Native American community in our country.

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

Mr. GRIJALVA. Mr. Speaker, I am pleased to recognize my good friend, the gentleman from Arizona (Mr. MITCHELL), for 3 minutes.

Mr. MITCHELL. Mr. Speaker, I rise in support of the Morris K. Udall Scholarship and Excellence in National Environmental Policy Amendments Act, H.R. 1035.

Congress established the Morris K. Udall Foundation in 1992 to focus on critical environmental issues, provide resources to train Native American professionals in health care and public policy, and resolve environmental disputes involving Federal agencies to the U.S. Institute of Environmental Conflict Resolution.

Under this measure, the Morris K. Udall Scholarship will also honor Stewart Udall. We can all certainly learn a lot from both Mo and Stu Udall. The Udall brothers were not only prominent U.S. politicians from the great State of Arizona, they were also dedicated public servants.

As a teacher for 29 years, I used to tell my students, when you name something after someone significant, whether it's a park, a school, or a scholarship, this not only honors that person, but it also is meant to set an example. Stu Udall has served the local communities in Arizona, as well as the entire Nation.

From serving in the United States Army Air Corps, to representing the local education community as the school board president of Amphitheater Public Schools, to representing his constituents as a United States Congressman, to serving as Secretary of the Interior under Presidents Kennedy and Johnson, Stu Udall has truly set an example for all of what public service means.

It is my hope that recipients of this scholarship will honor Stu Udall and his legacy by also engaging in a life of public service.

I urge my colleagues to support this measure.

Mr. GRIJALVA. Mr. Speaker, I have no further speakers, and I continue to reserve.

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

Mr. GRIJALVA. Mr. Speaker, in closing, let me urge my colleagues to support H.R. 1035. It is a solid acknowledgement of two great Americans that contributed much to this country, and their public policy legacy is obvious and known to all. But I think one thing that they contributed—and I think it is important in our times to remember that as political figures and as public figures they contributed civility to the discourse and they contributed humor to the discourse.

They brought integrity into their decisionmaking, and they were about bridging political differences and not exploiting them. I think that is the kind of legacy that bodes well for all of us that are in public service, and something that not all of us, including myself, mirror all the time.

I come from a region in which the Udall family is part and parcel of the history, the accomplishments, and the legacy of that region. And so with great pride and with sincere hopes that the House will support this, I urge passage of H.R. 1035.

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

The SPEAKER pro tempore. The question is on the motion offered by the gentleman from Arizona (Mr. GRIJALVA) that the House suspend the rules and pass the bill, H.R. 1035.

The question was taken.

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

Mr. CASSIDY. Mr. Speaker, I object to the vote on the ground that a quorum is not present and make the point of order that a quorum is not present.

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.

The point of no quorum is considered withdrawn.

RECOGNIZING NONCOMMISSIONED OFFICERS OF THE U.S. ARMY

Mr. MARSHALL. Mr. Speaker, I move to suspend the rules and pass the joint resolution (H.J. Res. 44) recognizing the service, sacrifice, honor, and professionalism of the Noncommissioned Officers of the United States Army.

The Clerk read the title of the resolution.

The text of the resolution is as follows:

H.J. RES. 44

Whereas the Noncommissioned Officer ranks, namely corporals and sergeants, date back more than 230 years in United States Army history, beginning with the birth of the Continental Army in 1775 and highlighted in the westward expansion of the United States, the Civil War, World War I, World War II, the Korean Conflict, the Vietnam Conflict, the liberation of Kuwait, and the current Global War on Terror;

Whereas Noncommissioned Officers are accomplished military professionals who have combined civilian and military education opportunities to become the Army's preeminent body of leadership;

Whereas Noncommissioned Officers are the ''backbone of the American Army'' and are the standard keepers for the Army in the training, leading, coaching, and mentoring of soldiers;

Whereas Noncommissioned Officers have provided invaluable service and have made great sacrifices in the line of duty, a virtue held most high, and they have continually proven their dedication and a willingness to make great sacrifices on behalf of the United States;

Whereas Noncommissioned Officers recognize their role in training young soldiers to become future leaders, and they also recognize that an important part of their job is caring and looking out for the welfare of junior enlisted members and their families;

Whereas Noncommissioned Officers are the ''eyes and ears'' of the commander, and have a well-earned reputation for having operational and strategic awareness to interpret and issue orders as necessary within their duties and in the absence of commissioned officers; and

Whereas the United States Army is an institution rich in cultural, ethnic, and gender diversity, and Noncommissioned Officers are outstanding role models for all Americans and are exemplary representatives of the moral character and strength of the United States: Now, therefore, be it

Resolved by the Senate and House of Representatives of the United States of America in Congress assembled, That Congress—

(1) recognizes the service, sacrifice, honor, and professionalism of the Noncommissioned Officers of the United States Army;

(2) expresses its deepest appreciation to the Noncommissioned Officers of the Army who serve or have served in defense of the United States; and

(3) encourages the people of the United States to recognize, commemorate, and honor the role and contribution of Noncommissioned Officers, past and present, in defense of the United States.

The SPEAKER pro tempore. Pursuant to the rule, the gentleman from Georgia (Mr. MARSHALL) and the gentleman from South Carolina (Mr. WILSON) each will control 20 minutes.

The Chair recognizes the gentleman from Georgia.

GENERAL LEAVE

Mr. MARSHALL. Mr. Speaker, let me first ask that all Members have 5 legislative days within which to revise and extend their remarks on the resolution under consideration.

The SPEAKER pro tempore. Is there objection to the request of the gentleman from Georgia?

There was no objection.

Mr. MARSHALL. Mr. Speaker, earlier this year, the Chief and the Secretary of the Army declared this year to be the ''Year of the NCO'' within the United States Army. Chairman SKELTON would be here today to handle this motion but for the fact that he is at Walter Reed Hospital visiting a constituent who has been injured in service to the country in Iraq or Afghanistan.

Mr. Speaker, the NCO, the noncommissioned officer, is often described as the backbone of the Army. The NCO is also described as the eyes and ears of the commander. I was an NCO in Vietnam myself, a little bit young compared to the NCOs we have today, too wet behind the ears to really be a good NCO because a really good NCO is not just backbone and eyes and ears, a really good NCO is a teacher, a leader, almost a father or a mother to the young soldiers that work in the unit that that NCO is in charge of.

NCOs not only train those soldiers, guide those soldiers, try and instill in those soldiers a real spirit of what it is like to be a soldier, what it is like to be a good human being, instilling values, courage, teaching, training, techniques, you name it, but in addition to that, good NCOs do the same thing for young officers, instilling in young officers the kind of experience and wisdom that young officers need to gain as they mature.

NCOs are essentially foremen. They are superintendents. Without NCOs—and we have had them for over 230 years—this Army would not be what it is today. There is no question about that. They serve with honor. In today's Army, they sacrifice a great deal, both themselves and their families.

There are many examples of courage under fire by NCOs. Over 100 Medal of Honor winners are NCOs in the United States from the United States Army. And I can't think of a more fitting tribute, in light of the fact that the Secretary and Chief have declared this to be the Year of the NCO, than that all of us vote in favor of this motion which honors our NCOs in the United States Army.

With that, Mr. Speaker, I reserve the balance of my time.

Mr. WILSON of South Carolina. Mr. Speaker, I yield myself so much time as I may consume.

Mr. Speaker, I rise in strong support of House Joint Resolution 44, honoring the noncommissioned officers in the United States Army. I thank Congressman Ike Skelton, the chairman of the House Armed Services Committee, for introducing this legislation.

No one has better expressed the reason for this resolution than the current Sergeant Major of the Army, Kenneth Preston. In his view, ''Today's NCO Corps is a standard bearer of one of the Army's greatest success stories, the All-Volunteer Force, and serves as a role model for armies of the world to emulate.''

I fully agree with the Sergeant Major's statement. Along with my colleague, Mr. MARSHALL of Georgia, I, too, am an Army veteran, and in my own 31-year experience in the Army National Guard and Reserve, noncommissioned officers were indispensable to the accomplishment of the missions we undertook. This is true of NCOs across all branches of the military.

One of my four sons serving today in the military, a Navy doctor, has been so impressed by the leadership and professionalism exhibited by the NCOs with whom he serves that he recommended that I invite one of their children to work as an intern in our office, who is present with us today. Todd O'Brien is the son of Master Chief Petty Officer Tadeo O'Brien. Master Chief O'Brien supports the U.S. Navy SEALs as an independent duty corpsman in the Naval Special Warfare Logistical Support Medical Group 2 at Naval Amphibious Base Little Creek, Virginia.

While he serves in a different military branch, he shares the values of service, honor, integrity, and courage common to all professional noncommissioned officers.

The Army is adaptable and successful on the battlefield because the corporals and sergeants have the training, education, professionalism, and operational and strategic awareness to interpret and issue orders as necessary within their duties and in the absence of commissioned officers.

The all-volunteer Army has been able to sustain itself through 8 years of war in two fronts because of corporals and sergeants who have made great personal sacrifices in the global war against terrorism.

Moreover, the noncommissioned officers of the Army have not only trained future leaders, both officer and enlisted, but they have also gone to extraordinary lengths to ensure the welfare of junior enlisted personnel and their families.

In recognition of the current and historical contributions, sacrifices, leadership, and professionalism of its noncommissioned officers, the Army has designated 2009 as the ''Year of the NCO.'' This resolution is part of that effort to honor the corporals and sergeants who are the backbone of the Army.

I would urge all Members to vote ''yes'' on this resolution as one way of expressing their deepest appreciation for the NCOs who are serving and have served.

I would also urge that each one of us, as we go home to our districts and meet with our constituents, take the time to explain what a magnificent Army this Nation has, especially because of the men and women who call themselves NCOs.

Madam Speaker, I reserve the balance of my time.

Mr. MARSHALL. Madam Speaker, I appreciate the words of my friend from South Carolina (Mr. WILSON). As he noted, he was an officer, a commissioned officer, and who better than a commissioned officer to testify to the importance of noncommissioned officers to the proper functioning of the Army. Frankly, the Army could not function with commissioned officers alone. Noncommissioned officers are more than just the backbone of the Army.

Madam Speaker, I would like to yield such time as he may consume to a fellow NCO from Vietnam, the gentleman from American Samoa (Mr. FALEOMAVAEGA).

Mr. FALEOMAVAEGA. Madam Speaker, as a fellow NCO, my colleague, the gentleman from Georgia, and also my good friend, Mr. WILSON from South Carolina, I rise today to draw my colleagues' attention to House Joint Resolution 44, an act that would recognize the valiant efforts and heroism of the noncommissioned officers of the United States Army.

I would like to commend Chairman SKELTON for his introduction and leadership and sponsorship of this bill, a token of appreciation for those who serve to protect our Nation and our ideals of freedom.

The noncommissioned officer rank has a long and rich history in the United States Army, originating with the Continental Army in 1775. The most visible leaders of the service, the noncommissioned officers have been the backbone of the Army for more than 230 years.

Often referred to as the ''eyes and ears'' of a commander, noncommissioned officers are not only sought

after for their advice and guidance, but they are the standard keepers of the service, dedicated to the upholding of the Army's and our country's values. Responsible for the training of the Army's future leaders, the noncommissioned officer is integral in executing any given mission of the service.

Madam Speaker, from my own little district of American Samoa, and as a fellow American Samoan, I am very proud to share this little bit of news with my colleagues here in the House today.

Just a few weeks ago, a fellow Samoan, Command Sergeant Major Iuniasolua Savusa, a ranger in the 101st Airborne, was recently selected by Admiral Timothy Keating as the Senior Enlisted Leader of the U.S. Army Pacific Command, or PACOM. In other words, the Command Sergeant Major of all the U.S.; not just Army, but the entire unified military command under the Pacific Command currently in Hawaii led by Admiral Keating.

This command was established in 1947 by President Truman and is considered the largest of the United States' unified commands and consists of approximately 250,000 military personnel. Command Sergeant Major Savusa has a long and substantial career in the U.S. Army. He has served overseas all throughout Europe and was instrumental in the initial incursion of Baghdad in Operation Iraqi Freedom, former Command Sergeant Major U.S. Army Europe, and also Former Command Sergeant Major U.S. Army Central Command.

Command Sergeant Major Savusa is an example of the Toa o Samoa, or many of the Samoan soldiers who are enlisted and have served in the many branches of the Armed Forces.

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I would like to take this opportunity to recognize Command Sergeant Major Ace Vimoto; Command Sergeant Major Charles Tobin; Chief Warrant Officer 5 Kokolua Yandall; Command Sergeant Major Falaniko, retired; and Chief Warrant Officer 5 Save Liuato Tuitele for their contributions to our military.

I must pay a special tribute to Command Sergeant Majors Vimoto and Falaniko for they both had sons who enlisted in the Army and have given the ultimate sacrifice to our country. The son of Command Sergeant Major Falaniko, Private First Class Jonathan Falaniko, was killed in Iraq; while the son of Command Sergeant Major Vimoto, Private First Class Timothy Ray Vimoto, was killed in Afghanistan. We must honor these fathers and sons for their selfless sacrifice and the sacrifice they have made in the protection of our freedoms.

I cannot express the immense pride I have in those who persevere daily to protect the freedom and integrity of the United States. Noncommissioned officers of the United States Army are perhaps the most visible embodiment of the moral character and strength of the U.S. Army.

I would like to remind my colleagues that this recognition by Congress is the least that can be done to express a deserved gratitude of those who have served and those who continue to serve in our Army today.

With that, Madam Speaker, I again commend my good friends for their management of this legislation, and I urge my colleagues to support this bill.

Mr. WILSON of South Carolina. Madam Speaker, I reserve the balance of my time.

Mr. MARSHALL. Madam Speaker, as I think about the significance of this resolution, I am reminded of Sergeant First Class Victor Anderson. Sergeant First Class Victor Anderson from Andersonville, Georgia, was a Sumter County Sheriff's deputy when called to duty as part of the 48th Brigade of the Georgia Army National Guard in Iraq. He was disqualified because of diabetes; nonetheless, he fought his disqualification because he knew he needed to be with his soldiers. He knew that if he was with his soldiers, they were more likely to be successful. They were more likely to be safe.

About 1 week before he was killed by an IED, some of his men were killed by an IED right in front of him, and he sent an email back to his family; and in that email he essentially said this: I do not fight for some ideology. I fight for that man to my left and that man to my right. They are men of their word. When called, they did not run. They came and did their duty. I had to also. Don't worry about me.

Victor Anderson represents the kind of quality that we have in our Armed Forces in sergeants, and I just bless every one of them and thank them for their service.

Madam Speaker, at this point I have no further requests for time, and I continue to reserve the balance of my time.

Mr. WILSON of South Carolina. Madam Speaker, it is an honor for me to be on the floor today with Congressman MARSHALL, with Delegate FALEOMAVAEGA, two veterans themselves who could tell firsthand heartfelt indication of their appreciation of NCOs.

I come from the State of South Carolina. The State flag of South Carolina is a recognition of the significance of the NCOs to our independence and freedom. This flag of South Carolina has a palmetto tree on the flag. It recognizes the Battle of Fort Moultrie on Sullivan's Island. The British fleet attacked the fort. The soft palmetto logs, the cannonballs hit the logs and bounced off or absorbed. At the same time, they did knock down the American flag. And at that time Sergeant William Jasper had the courage to raise the flag back up, indicating to the British that they were not going to be successful. The British fleet withdrew.

The flag of South Carolina has a palmetto tree. It also has a crescent. The crescent indicated the rank of a sergeant during the American Revolution on the helmet. So we, the State of South Carolina, are forever grateful for what NCOs have meant, and forever in perpetuity we appreciate what H.J. Res. 44 means.

Mr. SKELTON. Madam Speaker, I rise to support of House Joint Resolution 44, which I introduced on April 29, 2009. This resolution honors the service and sacrifice of our Army's Noncommissioned Officers.

As the chairman of the House Armed Services Committee, I am privileged to be joined here today by a number of my colleagues in the House to recognize the service, sacrifice, professionalism and commitment of all those who serve and have served our Nation as Noncommissioned Officers in the United States Army.

Our Nation's Noncommissioned Officers are unlike any other in the world. While many consider them the backbone of the force, I believe they are really the soul of the force. Not only do they provide the leadership, training and mentoring of junior enlisted personnel, but they also are responsible for the development and guidance of our junior officers as well. The responsibilities that an Army Noncommissioned Officer carries are vast, but they often carry out their responsibilities with little fanfare and official recognition. This resolution seeks to acknowledge their contributions, particularly over the last eight years of conflict.

The history of the Army Noncommissioned Officer began with the birth of the Continental Army in 1775. The first Sergeant Major of the Army was Sergeant Major Willion O. Wooldridge. Since then, there have been 13 Sergeant Majors of the Army, and the currently serving Sergeant Major is Kenneth 0. Preston. He is the highest ranking Noncommissioned Officer in the United States Army.

Army Noncommissioned Officers live by the NCO Creed, which was written in 1974, and adopted officially by the Army in 1985. The Creed reads:

No one is more professional than I. I am a Noncommissioned Officer, a leader of soldiers. As a Noncommissioned Officer, I realize that I am a member of a time honored corps, which is known as ''The Backbone of the Army.'' I am proud of the Corps of Noncommissioned Officers and will at all times conduct myself so as to bring credit upon the Corps, the Military Service and my country regardless of the situation in which I find myself. I will not use my grade or position to attain pleasure, profit or personal safety.

Competence is my watchword. My two basic responsibilities will always be uppermost in my mind—accomplishment of my mission and the welfare of my soldiers. I will strive to remain technically and tactically proficient. I am aware of my role as a Noncommissioned Officer. I will fulfill my responsibilities inherent in that role. All soldiers are entitled to outstanding leadership; I will provide that leadership. I know my soldiers and I will always place their needs above my own. I will communicate consistently with my soldiers and never leave them uninformed. I will be fair and impartial when recommending both rewards and punishments.

Officers of my unit will have maximum time to accomplish their duties; they will not have to accomplish mine. I will earn their respect and confidence as well as that of my soldiers. I will be loyal to those with

whom I serve; seniors, peers and subordinates alike. I will exercise initiatives by taking appropriate action in absence of orders. I will not compromise my integrity, nor my moral courage. I will not forget, nor will I allow my comrades to forget that we are professionals, Noncommissioned Officers, leaders!

The creed of the Noncommissioned Officer of the United States Army captures the essence of how these individuals live their daily lives. I am honored to have introduced this resolution and I urge my colleagues to join me in support of House Joint Resolution 44 to commend the service of the Army's Noncommissioned Officers.

Mr. WILSON of South Carolina. Madam Speaker, I yield back the balance of my time.

Mr. MARSHALL. Madam Speaker, I yield back the balance of my time, urging all of my colleagues to vote in favor of this resolution.

The SPEAKER pro tempore (Ms. MARKEY of Colorado). The question is on the motion offered by the gentleman from Georgia (Mr. MARSHALL) that the House suspend the rules and agree to the joint resolution, H.J. Res. 44.

The question was taken.

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

Mr. WILSON of South Carolina. Madam Speaker, I object to the vote on the ground that a quorum is not present and make the point of order that a quorum is not present.

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.

The point of no quorum is considered withdrawn.

RECOGNIZING 50TH ANNIVERSARY OF HAWAII STATEHOOD

Mr. CLAY. Madam Speaker, I move to suspend the rules and agree to the resolution (H. Res. 593) recognizing and celebrating the 50th Anniversary of the entry of Hawaii into the Union as the 50th State, as amended.

The Clerk read the title of the resolution.

The text of the resolution is as follows:

H. RES. 593

Whereas August 21, 2009, marks the 50th Anniversary of President Dwight D. Eisenhower's signing of Proclamation 3309, which admitted Hawaii into the Union in compliance with the Hawaii Admission Act, enacted by the United States Congress on March 18, 1959;

Whereas Hawaii is ''a place like no other, with a people like no other'' and bridges the mainland United States to the Asia-Pacific region;

Whereas the 44th President of the United States, Barack Obama, was born in Hawaii on August 4, 1961;

Whereas Hawaii has contributed to the diversity of Congress in electing—

(1) the first Native Hawaiian to serve in Congress, Prince Jonah Kuhio Kalaniana'ole;

(2) the first Asian-American to serve in the Senate, Hiram Fong;

(3) the first woman of color to serve in Congress, Patsy T. Mink;

(4) the first Native Hawaiian to serve in the Senate, Daniel Kahikina Akaka; and

(5) the first Japanese-American to serve in the Senate, Daniel Ken Inouye;

Whereas Hawaii is an example to the rest of the world of unity and positive race relations;

Whereas Pearl Harbor is a strategic military base for the U.S. in the Pacific and also a historical site for the Nation, being the location of the December 7, 1941, surprise Japanese aerial attack that thrust the Nation into World War II;

Whereas Hawaii is home to ¼ of the endangered species in the United States;

Whereas Hawaii has 8 national parks, which preserve volcanoes, complex ecosystems, a Hansen's disease colony, and other sites of historical and cultural significance;

Whereas Kilauea ranks among the most active volcanoes on Earth;

Whereas President Bush nominated the Papahanaumokuakea Marine National Monument to the United Nations Educational, Scientific and Cultural Organization World Heritage Centre for consideration to the World Heritage List;

Whereas Hawaii has produced musical legends ranging from traditional favorites such as Alfred Apaka, Don Ho, and Genoa Keawe, to Hawaii renaissance performers such as Eddie Kamae, Raymond Kane, Gabby Pahinui, Israel Kamakawiwo'ole, the Brothers Cazimero, and the Beamer Brothers, and continuing on to contemporary stars such as Keali'i Reichel, Ledward Kaapana, Jake Shimabukuro, and Raiatea Helm;

Whereas Hawaii is culturally rich, as the Hawaiian culture has been protected through Hawaiian language immersion schools, hula competitions such as the Merrie Monarch Festival, canoeing voyages undertaken by vessels like the Hokule'a, and the continuing historic preservation of Hawaiian traditions;

Whereas the Hawaii Statehood Commission has held a Joint Session of the Hawaii State Legislature in honor of statehood and will be celebrating this milestone with a public discussion and with the arrival of the USS Hawaii; and

Whereas for all of these reasons Hawaii is a truly unique State: Now, therefore, be it

Resolved, That the House of Representatives recognizes and celebrates the 50th Anniversary of the entry of Hawaii into the Union as the 50th State.

The SPEAKER pro tempore. Pursuant to the rule, the gentleman from Missouri (Mr. CLAY) and the gentlewoman from Minnesota (Mrs. BACHMANN) each will control 20 minutes.

The Chair recognizes the gentleman from Missouri.

GENERAL LEAVE

Mr. CLAY. Madam Speaker, I ask unanimous consent that 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 gentleman from Missouri?

There was no objection.

Mr. CLAY. Madam Speaker, I yield myself such time as I may consume.

I rise in support of House Resolution 593, a resolution recognizing and celebrating the 50th anniversary of the entry of Hawaii into the Union as our 50th State.

The gentleman from Hawaii, Mr. NEAL ABERCROMBIE, introduced this measure on June 26, 2009; and having met all of the Committee on Oversight and Government Reform requirements and criteria, the bill is now being considered today on the House floor. I should add that the measure comes to the floor with bipartisan support from over 56 cosponsors, demonstrating this body's eagerness to celebrate the admittance of our 50th State, the Aloha State.

Hawaii is one of our country's great treasures. Its cultural heritage is rooted in centuries of precolonial history, and the State continues to protect it with efforts such as Hawaiian language immersion schools and cultural centers. It is home to Pearl Harbor, the headquarters of the U.S. Navy's Pacific Fleet and the site of the surprise attack that led the U.S. to enter the Second World War. Its eight national parks preserve rich natural beauty and intricate ecosystems that support one-fourth of the endangered species in the United States.

Hawaii also contributes to the racial and ethnic diversity of our Nation and of this Congress. It elected this body's first woman of color, Patsy T. Mink; as well as its first Asian American, Hiram Fong. It has also elected Native Hawaiians to Congress, including Senator DANIEL AKAKA. The State also enjoys being the childhood home State of our current Commander in Chief, President Barack Obama.

Madam Speaker, I urge my colleagues to join me in celebrating the 50th anniversary of the State of Hawaii by supporting this measure.

Madam Speaker, I reserve the balance of my time.

Mrs. BACHMANN. Madam Speaker, I yield myself such time as I may consume.

I rise today in support of House Resolution 593.

This summer, on August 21, our Nation will celebrate the 50th anniversary of the entry of the beautiful island of Hawaii into the United States. It was in 1959, Madam Speaker, that then-President Dwight David Eisenhower signed Proclamation 3309 proclaiming the beautiful State of Hawaii as our 50th State.

Hawaii is one of four United States that were independent prior to statehood. The Kingdom of Hawaii existed from 1810 through 1893, and it was an independent republic between 1894 and 1898, when it became a United States territory. It was in 1900 that Hawaii was granted self-governance; and though many attempts were made to achieve statehood, Hawaii remained a territory for nearly 60 years.

The road to statehood for Hawaii was not without its challenges. One of the most devastating times in the history of not only Hawaii but of the Nation as well was the attack on Pearl Harbor and the outbreak of World War II, which interrupted the drive for statehood. But, finally, on August 21 victory was achieved in 1959 when Hawaii was admitted to the Union.

During the last 50 years, Hawaii has contributed immeasurably to the richness of our way of life here in the United States. The contributions of Asian Pacific Americans have enhanced and benefited our rich cultural heritage in so many ways, not the least of which include the arts, sciences, mathematics, sports, commerce, and many other aspects of American culture, not the least of which is great American tourism.

Hawaii has also contributed to the diversity of our Congress by electing, as my colleague said, the Native Hawaiian Members of Congress: Prince Jonah Kalaniana'ole; the first Asian American Member as well, as my colleague mentioned, Mr. Hiram Fong; the first woman of color, and we are so pleased, Patsy Mink; and the first Native Hawaiian to serve in the Senate, DANIEL AKAKA.

It is well known that Hawaii is home to some of the country's most beautiful landmarks and landscapes and some of the most diverse weather as well in the United States, including eight national parks, which preserve volcanoes, our Nation's fragile ecosystem, and the sites of historical national significance.

Hawaiians are also known to be a people with a great sense of pride in their history, their tradition, which can be found in their traditional music, dance, and sporting events.

Our Nation is so grateful to the contributions of Native Hawaiians. But most of all it is the stunning beauty of these tropical islands that leave many residents and visitors with a desire to share in the experiences of our 50th State and return again and again and again for Hawaii's wonderful, not-to-be-repeated hospitality.

Hawaii truly is a place like no other with a people like no other. And this August we all gather to recognize and celebrate the 50th anniversary of the entry of Hawaii into the Union as the 50th State.

Madam Speaker, I reserve the balance of my time.

Mr. CLAY. Madam Speaker, at this time I would like to yield 5 minutes to my good friend and proud native of Hawaii (Mr. ABERCROMBIE).

Mr. ABERCROMBIE. Madam Speaker, mahalo nui. Thank you very much.

I thank Representative CLAY very much for his gracious introduction to this resolution.

Madam Speaker, I am filled with great emotion today. There are a lot of dates being celebrated. Representative CLAY's birthday is today, and, of course, we want to wish him a very happy birthday.

I introduced this resolution on my birthday, June 26. It was about that time 50 years ago that I understood that I would be able to go to Hawaii. Just before that I had been informed that I had received a teaching assistantship at the University of Hawaii and that I would be soon on my way at the end of the summer to begin what became 50 years in Hawaii. So I have that same anniversary.

The statehood, of course, came August 21, and the first week in September, NEIL ABERCROMBIE arrived in Honolulu and knew almost immediately that I would never leave if given the opportunity to stay.

□ 1630

It is also going to be the birthday, of course, in a week or so, of President Obama, born in Kapiolani Hospital, just down the road from where I lived.

As I said, it is great emotion for me, a great time of nostalgia. I arrived in Hawaii at the same time as President Obama's father. We met those first days in our matriculation at the University of Hawaii. Of course, I could not possibly conceive at that time that the young man who was to be born out of the union of Ann Dunham and Barak, Sr., would become President of the United States. So there is a great confluence of history taking place over the next month or so with the entry of the 50th State, the last State of the Union.

As Mr. CLAY indicated, there are also some very, very interesting firsts, if you will. We were maybe the last State to come into the Union, but we had some very, very interesting firsts, and I want to congratulate Representative BACHMANN on her superb pronunciation of Prince Kuhio's last name, Kalanianaole. You said it perfectly. Thank you very much indeed.

I know you must have struggled with that, because I remember my first day in the classroom, the first Saturday, 8 o'clock in the morning, teaching the lab course in sociology, determined to say the Hawaiian names right, and I remember the first one was Samson Poomahealani, a center on the football team. He became my good friend, and we celebrated the 50th anniversary of our friendship just the past month when we got together. Samson went on to do great things with the labor movement in this country.

It is that kind of occasion. You can see it on my face, you can hear it in my voice. This is a time of great joy for us.

Yes, the first Asian American Senator, Republican Senator Hiram Fong, lived almost a century. He was the first Asian American, Chinese American, Senator. And, of course, Patsy Mink, our beloved Patsy Mink, whom we miss every day. And DANNY AKAKA, perhaps the best-loved person in the Congress, of whom never a bad word has been said. Don't we all wish the same could be said of us? And, of course, the Congressional Medal of Honor winner, the third longest-serving Senator in the United States, DANIEL K. INOUYE, serves now as the chairman of the Appropriations Committee, the first Japanese American to serve in the Senate.

There are some other dates I think of interest to all of us; 1778, James Cook comes to Waimea Bay near Kauai. Then in 1795, Kamehameha I, whose statue is very prominent in the Visitors Center right now, establishing the Hawaiian monarchy.

On February 24, 1954, Mr. Speaker, a 250-pound petition containing 120,000 signatures in favor of statehood was delivered to the Congress, and then in March of 1959, this House of Representatives passed the Hawaii statehood bill, 323–89. I am sure the 89 all had a chance to visit and regretted their votes against it. Of course, then President Eisenhower signed the proclamation, making us the 50th State on August 24.

So, Mr. Speaker, I can say from the bottom of my heart that Hawaii has given everything to me. I never conceived, as I indicated earlier, that I would ever have a chance to represent Hawaii in Congress. It is more than an honor and a privilege to do so.

The SPEAKER pro tempore. The gentleman's time has expired.

Mr. CLAY. I yield an additional 1 minute to the gentleman.

Mr. ABERCROMBIE. So I now ask all then to join with us in this joyous occasion where we have the opportunity to celebrate friendships and relationships of decades' standing to celebrate the transition of Hawaii from the time of a pre-feudal kingdom, a kingdom, a shotgun republic, a territory, and now a State of the Union, the last State of the Union to this time.

We are filled with a great sense of gratitude for that which has been given to us over these past 50 years, and, of course, pledge at this time that even though we were last to join the Union, we are first among those who appreciate, understand and take great pride in being a State of the United States of America.

Mrs. BACHMANN. Mr. Speaker, I, too, would like to extend my congratulations to my colleague, the distinguished gentleman Mr. CLAY, on his birthday today. It is also my brother's birthday today, and we are so thrilled for this anniversary.

I come from a State which has recently celebrated its sesquicentennial, 150 years, and we know Hawaii will be even more beautiful when Hawaii celebrates its sesquicentennial.

We send a lot of Minnesota dollars to Hawaii with all the tourists that we send. Our climate, you may not have noticed, is a little different from that of Hawaii. Minnesotans love to visit, and we extend the invitation to come back and enjoy our hospitality.

We have a lot of shoreline, too. We have about 15,000 lakes, and our fish are about this big, our muskies. So please come and fish in Minnesota, and we will return the favor and often come to visit the beautiful State of Hawaii.

Mr. Speaker, with that, I yield back.

Mr. CLAY of Missouri. Mr. Speaker, I thank the gentlewoman, first for the happy birthday wish, and I fish a lot, too, so I will try to make it to Minnesota also to catch some of those big, whopping fish.

Mr. Speaker, I yield 3 minutes to the gentlewoman from Hawaii (Ms. HIRONO).

Ms. HIRONO. Mr. Speaker, I join my colleagues in wishing Mr. CLAY a happy birthday.

I rise in strong support of H. Res. 593, recognizing the 50th anniversary of Hawaii's admission as the 50th State of the Union on August 21, 1959.

As my colleagues have mentioned, Hawaii brings a lot to this Nation. Our strategic location in the Pacific, our example of tolerance with our multicultural population and mix of cultures, our special relationship with and understanding of the Asia-Pacific region, and the physical beauty and ecological diversity of our islands are just a few of the assets we bring to this Nation.

I have very personal memories about the day Hawaii became a State. I was in elementary school at Koko Head Elementary in Honolulu and was given the honor of pinning the 50th star on our school flag at a special school assembly before sending the flag up the flagpole.

All Hawaii celebrated that day. To many, statehood represented recognition of a State whose multiethnic, multicultural base was different from that of any other State, but whose sons and daughters were just as American as the people of the other 49 States.

1959 was also the year I became a naturalized U.S. citizen, and apparently was also the year that my colleague, NEIL ABERCROMBIE, came to Hawaii. And things haven't been the same there since. Hawaii is a great State, and it has given me opportunities that I never would have had had my mother not brought me to this wonderful, beautiful State.

But we must always remember that the 50th State is also the native land of Hawaii's indigenous population, the Native Hawaiians. I am hopeful that this year we will be able to move forward to a reconciliation with the Native Hawaiian people, who lost their country and queen, by passing the Native Hawaii Government Reorganization Act. This act will provide the Native Hawaiians with the same rights of self-determination enjoyed by American Indians and Alaskan Natives.

Hawaii's population is made up of persons of Native Hawaiian, Japanese, Chinese, Irish, German, Portuguese, Puerto Rican, Filipino, French, Scottish, Korean, Samoan, Dutch, Tongan, Vietnamese, and African descent and more, plus combinations of these various ethnicities. It is not unusual, for example, for someone to identify themselves as Hawaiian, German, Chinese and Filipino. Although we have not eliminated prejudice, the people of Hawaii have learned to live together and to enjoy the richness that the mix of cultures has brought to our home.

Today we also celebrate the achievements of people from Hawaii whose notable efforts have paved the way for other Americans, such as Olympic champion and cultural ambassador Duke Kahanamoku, astronaut Ellison Onizuka, as mentioned previously Congresswoman Patsy Mink and President Barack Obama, to name a few.

I urge my colleagues to vote for H. Res. 593.

Mr. CLAY. Mr. Speaker, I yield 5 minutes to my friend, the delegate from American Samoa (Mr. FALEOMAVAEGA).

(Mr. FALEOMAVAEGA asked and was given permission to revise and extend his remarks.)

Mr. FALEOMAVAEGA. Mr. Speaker, I thank my good friend, the gentleman from Missouri, for his management of this important bill, and also the gentlelady from Minnesota for her support. I didn't realize there were fish in Minnesota that big. Maybe if she would catch a 1,000-pound marlin, she would see how big a 1,000-pound marlin would be. But, at any rate, I thank her for her support.

Mr. Speaker, I rise in support of H. Res. 593, recognizing and celebrating the 50th anniversary of the entry of Hawaii into the Union as the 50th State. I commend my colleagues, Congressman ABERCROMBIE and MAZIE HIRONO, for their introduction of this resolution.

My strong interest in this legislation, Mr. Speaker, is that half of my life was spent in Hawaii during my youth that I spent there. The eight main islands of Hawaii, Maui, Lanai, Kahoolawe, Oahu, Molokai, Kauai and Niihau span over 1,500 miles in the Pacific Ocean, and Hawaii is the only State comprised of islands. It is home to one-fourth of the endangered species list, as well as eight national parks, which serve to protect volcanoes, rain forest, coral reefs and other complex ecosystems.

In addition to being visually astounding, Hawaii was one of the first States to significantly contribute to the diversity of Congress. The first Native Hawaiian, the first Asian American, the first woman of color, the first Native Hawaiian to serve in the Senate, all hailed from the great State of Hawaii.

A favorite of Elvis Presley, whom I had the privilege of meeting when I was working as a youth performer at the Polynesian Cultural Center, Hawaii is also legendary for some of the most famous singers in Don Ho, Melveen Leed, the late Alfred Apaka and Genoa Keawe.

The State also has made great efforts to preserve its culture with Hawaiian language immersion schools, hula competitions and traditional canoe voyages. And what a great thing to remember that it was Duke Kahanamoku, the father of surfing, which now has become an international sport. And a byproduct of surfing, by the way, happens to be the skateboard, which originated from the great State of Hawaii.

I also want to note, Mr. Speaker, Hawaii is proud to give to our Nation her first native son, who is currently the 44th president of the United States, President Barack Obama. At the height of the presidential campaign last year, Mr. Speaker, I remember there was a national blogger going around saying that I was working as a special agent of Barack Obama, and the reason for my travel to Indonesia and to also visit the school in Jakarta, where Barack Obama had attended, was to destroy any records that would indicate that President Obama was born in Indonesia, which would obviously have him disqualified to run as a candidate for President.

Well, Mr. Speaker, this blog continues today, giving such gross misinformation to the American people. I just want to say it is absolute nonsense, and those responsible for this blog should stop it, as I am sure there are better things that they can do than to discredit our President. President Obama was born in Kapiolani Hospital, Honolulu, Hawaii, period.

Mr. Speaker, the State of Hawaii is also remembered for Pearl Harbor. Yes, it has its consequences, reminiscent also of the tremendous disservice and the problem that we did in mistreatment of over 100,000 Japanese Americans. They are Americans who happened to be of Japanese ancestry.

□ 1645

It has also produced the 100th Battalion 442nd Infantry, the most decorated unit ever in the history of the United States Army, with 18,000 individual decorations for heroism and bravery in the field of battle, over 9,000 Purple Hearts, 52 Distinguished Service Crosses, and, ironically, only one Medal of Honor, but we corrected that mistake. We now have 19 Japanese Americans who were awarded the Medal of Honor, which, as my colleague from Hawaii (Mr. ABERCROMBIE) said, Senator INOUYE was one of those recipients to receive the Medal of Honor. For 50 years, members of the unit in Hawaii have brought unique and diverse elements to the culture of the United States. I think it was Michelle Obama who said, ''If you want to understand more about the President, go to Hawaii, and you will understand his sense of philosophy, his sense of caring, his sense of wanting to share and to make sure that we have proper treatment and how we should be treating our fellow human beings.''

To strive to support the endeavors of the islands of the Pacific and to not hesitate to offer any resounding support, I urge my colleagues to support this resolution. I think it is worthwhile, and we ought to give due recognition to the great State of Hawaii. Again, I thank my good friend from Missouri.

Mr. CLAY. Mr. Speaker, I want to thank my good friend from American Samoa for that interesting history and perspective on Hawaii. I want to urge my colleagues to join me in celebrating the 50th anniversary of Hawaii's entrance into the Union as our 50th State by supporting this measure.

I yield back the balance of my time.

The SPEAKER pro tempore (Mr. CUMMINGS). The question is on the motion offered by the gentleman from Missouri (Mr. CLAY) that the House suspend the rules and agree to the resolution, H. Res. 593, as amended.

The question was taken.

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

Mrs. BACHMANN. Mr. Speaker, I object to the vote on the ground that a quorum is not present and make the point of order that a quorum is not present.

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.

The point of no quorum is considered withdrawn.

SUPPORTING NATIONAL HYDROCEPHALUS AWARENESS MONTH

Mr. CLAY. Mr. Speaker, I move to suspend the rules and agree to the resolution (H. Res. 373) expressing support for designation of the month of September as ''National Hydrocephalus Awareness Month''.

The Clerk read the title of the resolution.

The text of the resolution is as follows:

H. RES. 373

Whereas Hydrocephalus is a serious neurological condition, characterized by the abnormal buildup of cerebrospinal fluids in the ventricles of the brain;

Whereas Hydrocephalus may cause head enlargement, blurred vision or blindness, seizures, impaired physical development, learning disabilities, progressive irreversible damage to the nerve cells in the brain, and even death;

Whereas this serious neurological condition may occur at any age, and affects an estimated 1,000,000 people in the United States;

Whereas 1 out of every 500 children in the United States are born with hydrocephalus, and the condition is the leading cause of brain surgery in children;

Whereas more than 375,000 older adults in the United States suffer from hydrocephalus, the condition often goes undetected for years in older adults, causing such problems as difficulty walking and urinary incontinence, and may be misdiagnosed as dementia, Alzheimer's disease, or Parkinson's disease;

Whereas the standard treatment for hydrocephalus, insertion of a shunt to drain excess cerebral fluid, is a 50-year-old technology that carries multiple risks, including shunt failure, infection, and overdrainage;

Whereas each year cerebral spinal fluid shunting procedures account for approximately $1,000,000,000 in health care spending in the United Sates alone, with half that amount spent on shunt revisions;

Whereas more than 40,000 operations for hydrocephalus occur annually in the United States, yet there are fewer than 10 centers in the Nation specializing in the treatment of adults with hydrocephalus;

Whereas although there is no single known cause of hydrocephalus or ways to prevent and cure the condition, with the appropriate diagnosis and proper treatment, individuals with hydrocephalus are able to lead full and productive lives;

Whereas proper prenatal nutrition during the first weeks of conception can also help reduce the risk of children developing hydrocephalus;

Whereas a September 2005 conference sponsored by the National Institutes of Health, entitled ''Hydrocephalus: Myths, New Facts, Clear Directions'', resulted in efforts to initiate new, collaborative research and treatment efforts;

Whereas further research into the epidemiology, pathophysiology, disease burden, and improved treatment of hydrocephalus should be conducted and supported, including the collection and analysis of statistics and data concerning the seriousness of hydrocephalus and its impact on families in the United States;

Whereas public awareness, professional education, and scientific research regarding hydrocephalus should increase through partnerships between the Federal Government, health care professionals, and patient advocacy groups, such as the Pediatric Hydrocephalus Foundation;

Whereas these public-private partnerships would ensure that individuals suffering with hydrocephalus and their families are empowered with educational materials, informed about the latest research, have access to quality health care, and are able to advocate for increased research and funding in order advance the public's understanding of the condition, improve the diagnosis and treatment of hydrocephalus, and one day, find a cure; and

Whereas September would be an appropriate month to designate as ''National Hydrocephalus Awareness Month'': Now, therefore, be it

Resolved, That the House of Representatives supports the designation of ''National Hydrocephalus Awareness Month''.

The SPEAKER pro tempore. Pursuant to the rule, the gentleman from Missouri (Mr. CLAY) and the gentlewoman from Minnesota (Mrs. BACHMANN) each will control 20 minutes.

The Chair recognizes the gentleman from Missouri.

GENERAL LEAVE

Mr. CLAY. Mr. 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 gentleman from Missouri?

There was no objection.

Mr. CLAY. I now yield myself as much time as I may consume.

Mr. Speaker, I rise in strong support of House Resolution 373 which expresses the support of Congress for the designation of the month of September as National Hydrocephalus Awareness Month. It is important for us to recognize the severity of this neurological condition that is estimated to affect 1 million Americans. The resolution was introduced on April 28 by my colleague from Minnesota (Mrs. BACHMANN) and has secured more than 80 cosponsors while meeting all requisite criteria for approval by the Committee on Oversight and Government Reform.

Hydrocephalus is defined as ''excessive accumulation of cerebrospinal fluid in the brain.'' The National Institute of Neurological Disorders and Stroke estimates that 1 in every 500 children are afflicted with this condition. Additionally, hydrocephalus is the leading cause of brain surgery in children. Since 2005, the National Institutes of Health has increased its focus on improving hydrocephalus care, but more needs to be accomplished. The NIH currently provides less than $1 million in annual funding for hydrocephalus research, but hopefully National Hydrocephalus Awareness Month can spur renewed efforts in this area of study.

Mr. Speaker, during our efforts to overhaul the health care system, it is critical that we remember to support important public health initiatives like National Hydrocephalus Awareness Month. I urge my colleagues to support House Resolution 373.

I reserve the balance of my time.

Mrs. BACHMANN. Mr. Speaker, I yield myself as much time as I may consume.

I rise today in support of House Resolution 373, which I authored in order to raise awareness of hydrocephalus, a devastating neurological disorder which often leaves individuals and their families in constant fear of sudden, irreversible damage or even death. Hydrocephalus, or water on the brain, as most people refer to it, is a medical condition that results in abnormal accumulation of cerebrospinal fluid, otherwise called CSF, in the ventricles or cavities of the brain. Sadly, the prognosis for individuals afflicted with hydrocephalus is difficult to predict and is often fatal. Moreover, while this condition affects approximately 1 in every 500 births, as my colleague Mr. CLAY said, very few people are even aware of this devastating condition.

The National Institute of Neurological Disorders and Stroke is currently conducting research related to hydrocephalus prevention and treatment. However, more must be done at the community level to educate individual Americans about this surprisingly prevalent disorder. Recognizing the month of September as National Hydrocephalus Awareness Month will bring this disease to the public's attention and, I believe, will encourage the discussions necessary to more effectively address the devastating effects of this disease and provide support to families who live with it every day.

For example, currently the most common form of treatment for hydrocephalus involves the insertion of a shunt in order to maintain the flow of fluid from the brain. This outdated practice has been around now for almost 50 years and often results in complications that can jeopardize the life of the often very young child who is the patient. As one parent summarized for me, ''My son and all the other children who suffer from hydrocephalus are literally 12 to 15 hours away from irreversible damage, if not death, if a shunt failure was to go undetected or left untreated. This sometimes paralyzes parents, and there has got to be a better treatment out there, if not an

outright cure, we just have to find it.'' Mr. Speaker, I know you would agree we just have to find it.

That being said, I would like to share the thoughts of a mother whose daughter Ally developed hydrocephalus at 1 year of age. She sent this letter to my office in hopes that sharing it with our great Nation will develop greater awareness of the disease among the general public. And with greater research, she's confident that it could be diagnosed more accurately and treated more efficiently. We certainly hope so. This is her letter, Mr. Speaker:

''My name is Michelle Janson. We have a 9-year-old daughter Ally who developed hydrocephalus at 1 year of age. The cause of her congenital hydrocephalus allowed her to be eligible for a fairly new procedure called a third ventriculostomy. Although there was a lot of information at the time about shunts, very little was known about the third ventriculostomy. After we researched our options and interviewed several neurosurgeons, Ally underwent a third ventriculostomy on July 9, 2001.

''This year Ally has reached 8 years as one of the lucky few who have not encountered infections, revisions or malfunctions, as frequently seen with shunts. Although she does have other rare medical conditions to complicate things, she is leading a fairly normal childhood. She was the only one in her third grade class to be chosen to participate in the Young Authors Club and maintained straight A's throughout the school year, something many thought would be impossible.

''Several years ago we searched for a support group close to home that would provide our family with support and education about the condition. That's when we became involved with the Pediatric Hydrocephalus Foundation. The visions of those involved have encouraged us to actively participate in educating, providing support and to raise funds for local communities and families in need. The founders, Michael and Kim Illions, have also been active with government officials such as you to initiate a resolution known as H.R. 373 to declare September National Hydrocephalus Awareness Month.''

Mr. Speaker, before I close, I want to echo the comments that Michelle Janson makes about the vision that Michael and Kim Illions have for children and families living with hydrocephalus. I have had the privilege of getting to know this lovely couple and their beautiful baby boy named Cole through my work on this resolution. They have such optimism and faith, it just permeates everything they do and say. It's hard not to feel more hopeful when you are with great people like the Illions, and that's the kind of support that they provide other families who live with hydrocephalus and the kind of support that we all hope will be spread by this resolution today. I want to urge all of our colleagues, Mr. Speaker, to start spreading this hope today by taking a moment to learn more about hydrocephalus by visiting the Web site hydrocephaluskids.org. It's the Web site for the Pediatric Hydrocephalus Foundation. Through increased awareness and education, we will take the steps that are needed to modernize the treatment of hydrocephalus and move toward a cure. I urge my colleagues to join myself and the 89 bipartisan cosponsors of House Resolution 373 in supporting the recognition of September as National Hydrocephalus Awareness Month.

I reserve the balance of my time.

Mr. CLAY. Mr. Speaker, I have no other speakers, and I will continue to reserve.

Mrs. BACHMANN. Mr. Speaker, I yield as much time as he may consume to my distinguished colleague from the State of New Jersey, Mr. LEONARD LANCE.

Mr. LANCE. Mr. Speaker, I rise in support of House Resolution 373 in an effort to raise awareness of the disease hydrocephalus. For too long, little attention has been paid to hydrocephalus. Together with Congressman CLAY and Congresswoman BACHMANN, I have put forth this resolution, recognizing September as National Hydrocephalus Awareness Month. I want to thank my distinguished colleagues in this regard.

I also want to thank Michael Illions, his wife Kim and their brave son Cole for their steadfast advocacy on this issue. The Illions are constituents of mine in the Seventh Congressional District of New Jersey. Most of the best ideas in Washington come from our constituents back home. Michael, Kim and Cole Illions are together a shining example of this.

Today's action by the House of Representatives will bring much-needed attention to hydrocephalus. It will encourage more research into its diagnosis and treatment. I am certain that with Federal support for additional research, we can develop a better treatment, if not a cure, for those suffering from hydrocephalus and help them lead healthier, fuller lives. I urge all of our colleagues to support House Resolution 373. I want to thank Congresswoman BACHMANN and Congressman CLAY.

Mr. CLAY. Mr. Speaker, I continue to reserve the balance of my time.

Mrs. BACHMANN. Mr. Speaker, I urge all Members to support the passage of House Resolution 373.

I yield back the balance of my time.

Mr. CLAY. Mr. Speaker, again, I urge support for House Resolution 373.

I yield back the balance of my time.

The SPEAKER pro tempore. The question is on the motion offered by the gentleman from Missouri (Mr. CLAY) that the House suspend the rules and agree to the resolution, H. Res. 373.

The question was taken.

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

Mrs. BACHMANN. Mr. Speaker, I object to the vote on the ground that a quorum is not present and make the point of order that a quorum is not present.

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.

The point of no quorum is considered withdrawn.

COACH JODIE BAILEY POST OFFICE BUILDING

Mr. CLAY. Mr. Speaker, I move to suspend the rules and pass the bill (H.R. 3072) to designate the facility of the United States Postal Service located at 9810 Halls Ferry Road in St. Louis, Missouri, as the ''Coach Jodie Bailey Post Office Building''.

The Clerk read the title of the bill.

The text of the bill is as follows:

H.R. 3072

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

SECTION 1. COACH JODIE BAILEY POST OFFICE BUILDING.

(a) DESIGNATION.—The facility of the United States Postal Service located at 9810 Halls Ferry Road in St. Louis, Missouri, shall be known and designated as the ''Coach Jodie Bailey Post Office Building''.

(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 ''Coach Jodie Bailey Post Office Building''.

□ 1700

The SPEAKER pro tempore. Pursuant to the rule, the gentleman from Missouri (Mr. CLAY) and the gentlewoman from Minnesota (Mrs. BACHMANN) each will control 20 minutes.

The Chair recognizes the gentleman from Missouri.

GENERAL LEAVE

Mr. CLAY. Mr. 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 gentleman from Missouri?

There was no objection.

Mr. CLAY. I yield myself such time as I may consume.

Mr. Speaker, I am pleased to present for consideration H.R. 3072, a bill to name the post office located at 9810 Halls Ferry Road in St. Louis, Missouri, after a true Missouri legend, Coach Jodie Bailey.

H.R. 3072, which I introduced on June 26, 2009, was reported from the Committee on Oversight and Government Reform on July 10, 2009.

The St. Louis community lost one of its true giants with the passing of Coach Bailey at the age of 94. He was an icon in the public high school league for five decades. During his career, he coached at Vashon, O'Fallon Tech, and Northwest High Schools in St. Louis.

Coach Bailey accumulated an outstanding total of 828 victories and only

198 losses in a great career that spanned 42 years. He coached many great sports stars, including the late Elston Howard of the New York Yankees and the great Boston Celtic player Jo Jo White.

His accomplishments led him to be inducted into the Missouri Sports Hall of Fame in 1989. Coach Bailey put an emphasis on teaching fundamentals in the game of basketball. Coach Bailey was also treasured for making personal investments in each of his students' lives, which they remember until this day.

Mr. Speaker, on a personal note, Jodie Bailey happened to be my YMCA camp counselor and taught me how to swim. The camp was called Camp Rivercliff, located in Bourbon, Missouri, and, at a very young age, required me to swim across the Meramec River. And you can bet I learned how to swim at a young age in order to survive that river. And I will always remember Coach Bailey for that and what he gave to that community.

Mr. Speaker, I urge my colleagues to join me in recognizing Coach Jodie Bailey by agreeing to pass H.R. 3072.

I reserve the balance of my time.

Mrs. BACHMANN. Mr. Speaker, I yield myself as much time as I may consume.

I happily rise today in support of H.R. 3072, to designate the facility of the United States Postal Service located at 9810 Halls Ferry Road in St. Louis, Missouri, as the Coach Jodie Bailey Post Office Building. This honor is much deserved, Mr. Speaker, as Jodie Bailey was a coaching legend in St. Louis.

He began his basketball career as a talented player, and later Jodie Bailey found his true passion in coaching basketball. It was in the 1940s when Jodie Bailey began coaching the Vashon Wolverines within the all-black Illinois-Missouri League and helped them win league titles in 1943, 1945, 1947, and 1948. He also guided them to the Missouri Negro Interscholastic Athletic Association State Championship not one, not two, not three, but four times.

And during this tenure, segregation still existed within the school system and many people were not aware of his greatness during the beginning of his career. That is true no longer. However, after school integration, the Vashon Wolverines were able to go on to participate in a regional championship and the State quarterfinals in 1963.

Coach Bailey's success with coaching did not end with the Wolverines. He coached O'Fallon Tech, guiding the Hornets to their only State championship in 1968, where they became the first all black Public High League basketball team to win a Missouri State championship.

Soon thereafter, O'Fallon dropped its sports program, which caused Coach Bailey to find a new job coaching Northwest High School, where he immediately helped them win a regional title in 1969. Wherever Coach Bailey went, success followed. Overall, Coach Bailey coached three different Public High League basketball teams and led those teams to a total of 824 wins and 198 losses, a phenomenal record.

Coach Bailey's formula for his coaching success was simple. Coach Bailey said this: ''To be a successful basketball coach, you need three things. You have to have a well-conditioned team; you have to be fundamentally sound in every phase of the game; and you also have to be team oriented, because there's no 'I' in the word team.''

Though recognized for his exceptional coaching abilities, Coach Bailey was also respected as a mentor. On and off the field, Coach Bailey was a man of his own. He urged his players to concentrate on the fundamentals of basketball. He emphasized the need to use their natural abilities to become even better. By employing his talent for support and inspiration, Coach Bailey positively impacted the lives of so many young men that he coached during his 42-season career.

Sadly, the St. Louis basketball community lost Jodie Bailey in March when he died at the age of 88. For his dedication to the St. Louis basketball community, I happily join with my fellow Members, and especially my colleague Congressman CLAY, to join us in supporting H.R. 3072.

I reserve the balance of my time, Mr. Speaker.

Mr. CLAY. Mr. Speaker, I want to thank my colleague from Minnesota for her support of this and wanted to also add that Coach Jodie Bailey was a true scholar, a graduate of Coe College in Iowa who studied at Springfield College in Massachusetts, which was also the school of Dr. Naismith, who created basketball. And there's one thing he always stressed to his players, that academics will take you much further than basketball, so he always pushed them to excel in the classroom as well as on the basketball court.

I reserve my time.

Mrs. BACHMANN. Mr. Speaker, I again join with my colleague Mr. CLAY and urge all of our colleagues to support the passage of H.R. 3072.

I yield back the balance of my time.

Mr. CLAY. Mr. Speaker, again, I urge my colleagues to join me in celebrating the life and legacy of Coach Jodie Bailey by supporting H.R. 3072.

I yield back the balance of my time.

The SPEAKER pro tempore. The question is on the motion offered by the gentleman from Missouri (Mr. CLAY) that the House suspend the rules and pass the bill, H.R. 3072.

The question was taken.

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

Mrs. BACHMANN. Mr. Speaker, I object to the vote on the ground that a quorum is not present and make the point of order that a quorum is not present.

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.

The point of no quorum is considered withdrawn.

SUPPORTING VETERANS OF FOREIGN WARS DAY

Mr. CLAY. Mr. Speaker, I move to suspend the rules and agree to the resolution (H. Res. 483) supporting the goals and ideals of Veterans of Foreign Wars Day.

The Clerk read the title of the resolution.

The text of the resolution is as follows:

H. Res. 483

Whereas veterans of the Spanish-American War and Philippine Insurrection, the Nation's first major foreign conflicts, faced hardships to include a complete lack of medical care and pensions upon discharge from the service;

Whereas, on September 29, 1899, the American Veterans of Foreign Service and in December 1899, the National Society of the Army of the Philippines, were established to advocate for the rights and benefits then denied to veterans of the Spanish-American War and Philippine Insurrection;

Whereas, in subsequent years, membership in these and other veterans organizations continued to grow;

Whereas these veterans organizations, recognizing their common goals and the importance of unity, merged to form the present-day Veterans of Foreign Wars of the United States in 1914;

Whereas membership in the Veterans of Foreign Wars continued to grow and reached nearly 200,000 in 1936 when the organization received its Congressional Charter;

Whereas the 2.3 million members of the Veterans of Foreign Wars and Ladies Auxiliary remain committed to the organization's mission of ''ensuring rights, remembering sacrifices, promoting patriotism, performing community services, and advocating for a strong national defense'';

Whereas the organization continues this honorable mission by effectively advocating for our Nation's veterans, to include helping establish the present-day Department of Veterans Affairs, creating the Montgomery G.I. Bill, developing the national cemetery system, and assisting combat wounded veterans receive compensation for their injuries; and

Whereas the members of the Veterans of Foreign Wars celebrate the organization's establishment and achievements on September 29th while carrying on the vital mission of their predecessors: Now, therefore, be it

Resolved, That the House of Representatives supports the goals and ideals of Veterans of Foreign Wars Day.

The SPEAKER pro tempore. Pursuant to the rule, the gentleman from Missouri (Mr. CLAY) and the gentlelady from Minnesota (Mrs. BACHMANN) each will control 20 minutes. The Chair recognizes the gentleman from Missouri.

GENERAL LEAVE

Mr. CLAY. Mr. 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 gentleman from Missouri?

There was no objection.

Mr. CLAY. Mr. Speaker, it is an honor to rise today in support of House Resolution 483, a bill supporting the goals and ideals of Veterans of Foreign Wars Day. Every day more and more brave Americans join the ranks of the Veterans of Foreign Wars, and they deserve every ounce of praise we can possibly provide.

I would like to thank my colleague, the Honorable JOHN KLINE from Minnesota, for introducing this important resolution. I would also like to thank Chairman TOWNS and my colleagues on the Committee on Oversight and Government Reform for bringing this bill to the floor.

Just before the turn of the 20th century, the United States was called upon to defend the hemisphere in the Spanish-American War. American troops fought valiantly and emerged victorious in this, our first modern foreign conflict. On September 20, 1899, the American Veterans of Foreign Service was established to guarantee that troops receive the benefits to which they were entitled.

The following decades demanded millions of young Americans, men and women, heed their Nation's call for service. War against fascism and tyranny in Europe, first in 1917, and again in 1941, proved that American soldiers are the greatest protectors of freedom in the world. When they returned home, the troops were greeted by the Veterans of Foreign Wars.

The organization was and continues to be a vital advocate for veterans' well-being. It helped establish, among other things, the GI Bill, which provided college education for all veterans and fueled the greatest economic boom our Nation had ever seen.

In 2008, the VFW was instrumental in passing a 21st century GI Bill to continue to provide educational assistance to servicemen and -women returning from Iraq and Afghanistan.

Today, the Veterans of Foreign Wars and its auxiliaries represent 2.2 million veterans. With 8,100 locations worldwide, help is never far away from those who deserve it most.

The Veterans of Foreign Wars' mission is to ''Honor the dead by helping the living.'' For 110 years they have done just that. For this, I send my personal gratitude.

I ask my colleagues to join me in recognizing the invaluable work of the VFW and support House Resolution 483.

I reserve the balance of my time.

The SPEAKER pro tempore. The Chair recognizes the gentleman from Minnesota (Mr. KLINE), who will control the time.

Mr. KLINE of Minnesota. Mr. Speaker, I rise today in strong support of H. Res. 483, and I want to thank my friend, the gentleman from Missouri, for his very kind remarks.

I'm a life member of the Veterans of Foreign Wars and a proud one at that, and a member of Post 210 in my hometown of Lakeville. The VFW is not just a gang of old guys sitting around. These are real patriots, real Americans who have sacrificed for our country.

The VFW traces its roots all the way back to 1899 when veterans of the Spanish-American War and the Philippine Insurrection founded local organizations to secure rights and benefits for their service. Before that time, as has been mentioned, many of our veterans would return home wounded or sick and there was no medical care or veterans pension for them. They were left to care for themselves.

The founders of the VFW sought to remedy that and provide support and encouragement to all of our veterans who had served in foreign wars. Their mission statement, ''To honor the dead by helping the living.'' Over time, their mission expanded to ''ensuring rights, remembering sacrifices, promoting patriotism, performing community services, and advocating for a strong national defense.''

Mr. Speaker, some of these veterans go down to the cemetery, the national cemetery, Snelling, in Minnesota every day to perform services to honor those who have passed, to fire the salute, to fold the flag, and they do it sometimes when the temperature is way below zero. And some of these veterans now are in their late seventies and eighties, but there's a dedication here that I think we should all be aware of.

The VFW has a rich history of advocacy, playing an instrumental role in establishing the Veterans Administration, creating the GI Bill, developing the National Cemetery System, and fighting to ensure combat-wounded veterans from all wars receive proper compensation.

In addition, the VFW has been a powerful force behind the creation of the Vietnam, the Korean War, World War II, and Women in Military Service Memorials; and aren't they fantastic. There's nothing that lifts your spirits like taking a group of veterans down to the World War II Memorial and seeing the joy in their faces as they get that fantastic experience.

□ 1715

Today, the VFW has grown to more than 2.3 million members worldwide, and it continues to advocate for all of our veterans of foreign wars.

I applaud the members of the VFW for their continued commitment to one another and to this great Nation. I am humbled by their work on behalf of our veterans, and I am honored to speak on behalf of this resolution.

I ask all of my colleagues to join me in supporting H. Res. 483.

I reserve the balance of my time.

Mr. CLAY. Mr. Speaker, I do not have any other speakers, and I will continue to reserve the balance of my time.

Mr. KLINE of Minnesota. Mr. Speaker, I also have no more speakers. So, again, I want to thank my colleague from Missouri and urge my colleagues to support this legislation.

I yield back the balance of my time.

Mr. CLAY. Mr. Speaker, in closing, I want to thank my friend from Minnesota (Mr. KLINE) for offering this resolution for such a worthy organization. Again, I urge support for House Resolution 483.

Mr. GINGREY of Georgia. Mr. Speaker, I rise today as a proud cosponsor of H. Res. 483, a resolution supporting the goals and ideals of Veterans of Foreign Wars Day.

The Veterans of Foreign Wars (VFW) traces its origin back to 1899 when veterans of the Spanish-American War and the Philippine Insurrection founded local organizations to secure benefits for their service. Fifteen years later an umbrella organization was created named the VFW of the United States, and by 1936 it had a membership of 200,000 veterans and was chartered by Congress.

Mr. Speaker, the VFW's motto is "honor the dead by helping the living." These brave veterans, who have served their nation in wars on foreign soil, are now constantly improving America at home by their service to the community and all living veterans. The VFW has been instrumental in establishing the Veterans Administration, the enactment of two GI bills, and building support for expanded educational benefits for active-duty service members, as well as our Guard and Reserve forces. They have done a remarkable job improving medical centers for all of our returning service men and women. Further, the VFW participates in more than 13 million service hours throughout different communities across the nation and donates $2.5 million in college scholarships to high school students every year.

Mr. Speaker, the brave men and women who sacrificed in the past for our present freedoms deserve our fullest support. Those who have served our nation represent the best our country has to offer, and we must honor them.

Accordingly, I would also like to say a special thank you to the veterans in my district, the 11th of Georgia. Post 4911 of Rome, Post 5376 of Calhoun, Post 6688 of Summerville, Post 5408 of Acworth, Post 7402 of Buchanan, Post 5262 of Kennesaw, Post 2681 of Marietta, and Post 7404 of Carrollton have all admirably served our community and our nation, and they deserve our utmost appreciation for their lifetime of dedication to the Armed Services and our veterans.

It is appropriate that we recognize the dedication and honor of the Veterans of Foreign Wars today in this chamber, and I urge all of my colleagues to support this resolution.

Mr. CLAY. I yield back the balance of my time.

The SPEAKER pro tempore. The question is on the motion offered by the gentleman from Missouri (Mr. CLAY) that the House suspend the rules and agree to the resolution, H. Res. 483.

The question was taken.

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

Mr. KLINE of Minnesota. Mr. Speaker, I object to the vote on the ground that a quorum is not present and make the point of order that a quorum is not present.

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.

The point of no quorum is considered withdrawn.

RECESS

The SPEAKER pro tempore. Pursuant to clause 12(a) of rule I, the Chair declares the House in recess until approximately 6:30 p.m. today.

Accordingly (at 5 o'clock and 16 minutes p.m.), the House stood in recess until approximately 6:30 p.m.

AFTER RECESS

The recess having expired, the House was called to order by the Speaker pro tempore (Mr. MASSA) at 6 o'clock and 31 minutes p.m.

ANNOUNCEMENT BY THE SPEAKER PRO TEMPORE

The SPEAKER pro tempore. Pursuant to clause 8 of rule XX, proceedings will resume on motions to suspend the rules previously postponed.

Votes will be taken in the following order:

H. Res. 593, de novo;

H.R. 1376, de novo;

H.R. 1121, de novo.

The first electronic vote will be conducted as a 15-minute vote. Remaining electronic votes will be conducted as 5-minute votes.

RECOGNIZING 50TH ANNIVERSARY OF HAWAII STATEHOOD

The SPEAKER pro tempore. The unfinished business is the question on suspending the rules and agreeing to the resolution, H. Res. 593, as amended.

The Clerk read the title of the resolution.

The SPEAKER pro tempore. The question is on the motion offered by the gentleman from Missouri (Mr. CLAY) that the House suspend the rules and agree to the resolution, H. Res. 593, as amended.

The question was taken.

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

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

The yeas and nays were ordered.

The vote was taken by electronic device, and there were—yeas 378, nays 0, not voting 55, as follows:

[Roll No. 647]

YEAS—378

Abercrombie
Ackerman
Aderholt
Adler (NJ)
Alexander
Altmire
Andrews
Arcuri
Austria
Baca
Bachmann
Bachus
Baird
Baldwin
Barrow
Bartlett
Barton (TX)
Bean
Becerra
Berkley
Berman
Berry
Biggert
Bilbray
Bilirakis
Bishop (GA)
Bishop (UT)
Blackburn
Blumenauer
Blunt
Boccieri
Boehner
Bonner
Bono Mack
Boozman
Boren
Boswell
Boustany
Boyd
Brady (PA)
Bright
Broun (GA)
Brown, Corrine
Brown-Waite, Ginny
Buchanan
Burgess
Burton (IN)
Butterfield
Buyer
Calvert
Cantor
Cao
Capito
Capps
Capuano
Cardoza
Carnahan
Carney
Carson (IN)
Cassidy
Castle
Castor (FL)
Chaffetz
Chandler
Childers
Chu
Clarke
Clay
Cleaver
Clyburn
Coble
Coffman (CO)
Cohen
Cole
Conaway
Connolly (VA)
Conyers
Cooper
Costa
Crowley
Culberson
Cummings
Dahlkemper
Davis (CA)
Davis (KY)
Davis (TN)
DeFazio
DeGette
Delahunt
DeLauro
Dent
Diaz-Balart, L.
Diaz-Balart, M.
Dicks
Dingell
Doggett
Donnelly (IN)
Doyle
Dreier
Driehaus
Duncan
Edwards (MD)
Edwards (TX)
Ehlers
Ellison
Ellsworth
Emerson
Eshoo
Etheridge
Fallin
Farr
Fattah
Filner
Flake
Fleming
Forbes
Fortenberry
Foster
Foxx
Frank (MA)
Franks (AZ)
Frelinghuysen
Fudge
Gallegly
Garrett (NJ)
Gerlach
Giffords
Gingrey (GA)
Gohmert
Gonzalez
Goodlatte
Gordon (TN)
Granger
Grayson
Green, Gene
Griffith
Guthrie
Hall (NY)
Hall (TX)
Halvorson
Hare
Harman
Harper
Hastings (FL)
Hastings (WA)
Heinrich
Heller
Hensarling
Herger
Herseth Sandlin
Hill
Himes
Hinchey
Hinojosa
Hirono
Holden
Holt
Honda
Hoyer
Hunter
Inglis
Inslee
Israel
Issa
Jackson (IL)
Jackson-Lee (TX)
Jenkins
Johnson (GA)
Johnson, E. B.
Johnson, Sam
Jones
Jordan (OH)
Kagen
Kanjorski
Kaptur
Kennedy
Kildee
Kilpatrick (MI)
Kind
King (IA)
King (NY)
Kingston
Kirk
Kirkpatrick (AZ)
Kissell
Klein (FL)
Kline (MN)
Kosmas
Kratovil
Kucinich
Lamborn
Lance
Langevin
Larson (CT)
Latham
LaTourette
Latta
Lee (CA)
Lee (NY)
Levin
Lewis (CA)
Lewis (GA)
Linder
Lipinski
LoBiondo
Loebsack
Lofgren, Zoe
Lowey
Lucas
Luetkemeyer
Luján
Lummis
Lungren, Daniel E.
Mack
Maffei
Manzullo
Markey (CO)
Markey (MA)
Marshall
Massa
Matheson
Matsui
McCarthy (CA)
McCaul
McClintock
McCollum
McCotter
McDermott
McGovern
McHenry
McHugh
McIntyre
McKeon
McMahon
McMorris Rodgers
McNerney
Meek (FL)
Meeks (NY)
Melancon
Mica
Michaud
Miller (FL)
Miller (MI)
Miller, Gary
Miller, George
Minnick
Mitchell
Mollohan
Moore (KS)
Moore (WI)
Moran (KS)
Moran (VA)
Murphy (NY)
Murphy, Patrick
Murphy, Tim
Myrick
Nadler (NY)
Napolitano
Neal (MA)
Neugebauer
Nunes
Nye
Oberstar
Obey
Olver
Pallone
Pascrell
Pastor (AZ)
Paulsen
Payne
Pence
Perlmutter
Perriello
Peters
Peterson
Petri
Pingree (ME)
Pitts
Poe (TX)
Polis (CO)
Pomeroy
Posey
Price (GA)
Price (NC)
Putnam
Rahall
Rangel
Rehberg
Reichert
Reyes
Richardson
Roe (TN)
Rogers (AL)
Rogers (KY)
Rogers (MI)
Rooney
Ros-Lehtinen
Roskam
Ross
Rothman (NJ)
Roybal-Allard
Royce
Ruppersberger
Ryan (OH)
Ryan (WI)
Salazar
Sánchez, Linda T.
Sanchez, Loretta
Sarbanes
Scalise
Schauer
Schiff
Schmidt
Schock
Schrader
Schwartz
Scott (GA)
Scott (VA)
Sensenbrenner
Serrano
Sessions
Shadegg
Shea-Porter
Sherman
Shimkus
Shuler
Shuster
Simpson
Skelton
Slaughter
Smith (NE)
Smith (NJ)
Smith (TX)
Snyder
Souder
Space
Speier
Spratt
Stark
Stearns
Sullivan
Sutton
Tanner
Taylor
Teague
Terry
Thompson (CA)
Thompson (MS)
Thompson (PA)
Thornberry
Tiahrt
Tierney
Titus
Tonko
Towns
Turner
Upton
Van Hollen
Velázquez
Visclosky
Walden
Walz
Wasserman Schultz
Watson
Watt
Welch
Westmoreland
Wexler
Whitfield
Wilson (OH)
Wilson (SC)
Wittman
Wolf
Woolsey
Wu
Yarmuth
Young (AK)
Young (FL)

NOT VOTING—55

Akin
Barrett (SC)
Bishop (NY)
Boucher
Brady (TX)
Braley (IA)
Brown (SC)
Camp
Campbell
Carter
Costello
Courtney
Crenshaw
Cuellar
Davis (AL)
Davis (IL)
Deal (GA)
Engel
Graves
Green, Al
Grijalva
Gutierrez
Higgins
Hodes
Hoekstra
Johnson (IL)
Kilroy
Larsen (WA)
Lynch
Maloney
Marchant
McCarthy (NY)
Miller (NC)
Murphy (CT)
Murtha
Olson
Ortiz
Paul
Platts
Quigley
Radanovich
Rodriguez
Rohrabacher
Rush
Schakowsky
Sestak
Sires
Smith (WA)
Stupak
Tiberi
Tsongas
Wamp
Waters
Waxman
Weiner

□ 1856

Mr. LATHAM changed his vote from "nay" to "yea."

So (two-thirds being in the affirmative) the rules were suspended and the resolution, as amended, was agreed to.

The result of the vote was announced as above recorded.

A motion to reconsider was laid on the table.

WACO MAMMOTH NATIONAL MONUMENT ESTABLISHMENT ACT OF 2009

The SPEAKER pro tempore. The unfinished business is the question on suspending the rules and passing the bill, H.R. 1376, as amended.

The Clerk read the title of the bill.

The SPEAKER pro tempore. The question is on the motion offered by the gentlewoman from Guam (Ms. BORDALLO) that the House suspend the rules and pass the bill, H.R. 1376, as amended.

The question was taken.

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

RECORDED VOTE

Mr. CHAFFETZ. Mr. Speaker, I demand a recorded vote.

A recorded vote was ordered.

The SPEAKER pro tempore. This is a 5-minute vote.

The vote was taken by electronic device, and there were—ayes 308, noes 74, not voting 51, as follows:

[Roll No. 648]

AYES—308

Abercrombie
Ackerman
Adler (NJ)
Altmire
Andrews
Arcuri
Austria
Baca
Bachmann
Bachus
Baird
Baldwin
Barrow
Barton (TX)
Bean
Becerra
Berkley
Berman
Berry
Biggert
Bilbray
Bishop (GA)
Blackburn
Blumenauer
Blunt
Boccieri
Bonner

Bono Mack
Boren
Boswell
Boyd
Brady (PA)
Bright
Brown, Corrine
Buchanan
Burgess
Butterfield
Cao
Capito
Capps
Capuano
Cardoza
Carnahan
Carney
Carson (IN)
Cassidy
Castle
Castor (FL)
Chandler
Childers
Chu
Clarke
Clay
Cleaver
Clyburn
Cohen
Cole
Conaway
Connolly (VA)
Conyers
Cooper
Costa
Crowley
Culberson
Cummings
Dahlkemper
Davis (CA)
Davis (TN)
DeFazio
DeGette
Delahunt
DeLauro
Dent
Diaz-Balart, L.
Diaz-Balart, M.
Dicks
Dingell
Doggett
Donnelly (IN)
Doyle
Driehaus
Duncan
Edwards (MD)
Edwards (TX)
Ehlers
Ellison
Ellsworth
Eshoo
Etheridge
Fallin
Farr
Fattah
Filner
Fleming
Fortenberry
Foster
Frank (MA)
Frelinghuysen
Fudge
Gerlach
Giffords
Gingrey (GA)
Gohmert
Gonzalez
Gordon (TN)
Granger
Grayson
Green, Gene
Griffith
Guthrie
Hall (NY)
Hall (TX)
Halvorson
Hare
Harman
Hastings (FL)
Heinrich
Herseth Sandlin
Hill
Himes
Hinchey
Hinojosa
Hirono
Holden
Holt
Honda
Hoyer
Inslee
Israel
Issa
Jackson (IL)
Jackson-Lee (TX)
Jenkins
Johnson (GA)
Johnson, E. B.
Johnson, Sam
Jones
Kagen
Kanjorski
Kaptur
Kennedy
Kildee
Kilpatrick (MI)
Kind
King (NY)
Kirk
Kirkpatrick (AZ)
Kissell
Klein (FL)
Kline (MN)
Kosmas
Kratovil
Kucinich
Lance
Langevin
Larson (CT)
Latham
LaTourette
Lee (CA)
Lee (NY)
Levin
Lewis (GA)
Linder
Lipinski
LoBiondo
Loebsack
Lofgren, Zoe
Lowey
Lucas
Luján
Lummis
Lungren, Daniel E.
Mack
Maffei
Markey (CO)
Markey (MA)
Marshall
Massa
Matheson
Matsui
McCaul
McCollum
McCotter
McDermott
McGovern
McHugh
McIntyre
McMahon
McMorris Rodgers
McNerney
Meek (FL)
Meeks (NY)
Melancon
Mica
Michaud
Miller (MI)
Miller, George
Minnick
Mitchell
Mollohan
Moore (KS)
Moore (WI)
Moran (VA)
Murphy (CT)
Murphy (NY)
Murphy, Patrick
Murphy, Tim
Myrick
Nadler (NY)
Napolitano
Neal (MA)
Neugebauer
Nye
Oberstar
Obey
Olver
Pallone
Pascrell
Pastor (AZ)
Paulsen
Payne
Perlmutter
Perriello
Peters
Peterson
Pingree (ME)
Pitts
Poe (TX)
Polis (CO)
Pomeroy
Posey
Price (NC)
Putnam
Rahall
Rangel
Rehberg
Reichert
Reyes
Richardson
Roe (TN)
Rogers (KY)
Rogers (MI)
Ros-Lehtinen
Ross
Rothman (NJ)
Roybal-Allard
Ruppersberger
Ryan (OH)
Salazar
Sánchez, Linda T.
Sanchez, Loretta
Sarbanes
Schakowsky
Schauer
Schiff
Schrader
Schwartz
Scott (GA)
Scott (VA)
Serrano
Shea-Porter
Sherman
Shimkus
Shuler
Shuster
Skelton
Slaughter
Smith (NJ)
Smith (TX)
Snyder
Souder
Space
Speier
Spratt
Stark
Stearns
Sutton
Tanner
Taylor
Teague
Thompson (CA)
Thompson (MS)
Thornberry
Tiahrt
Tierney
Titus
Tonko
Towns
Turner
Upton
Van Hollen
Velázquez
Visclosky
Walz
Wasserman Schultz
Watson
Watt
Waxman
Welch
Wexler
Whitfield
Wilson (OH)
Wolf
Woolsey
Wu
Yarmuth
Young (AK)
Young (FL)

NOES—74

Aderholt
Alexander
Bartlett
Bilirakis
Bishop (UT)
Boehner
Boozman
Boustany
Broun (GA)
Brown-Waite, Ginny
Burton (IN)
Buyer
Calvert
Campbell
Cantor
Chaffetz
Coble
Coffman (CO)
Davis (KY)
Dreier
Emerson
Flake
Forbes
Foxx
Franks (AZ)
Gallegly
Garrett (NJ)
Goodlatte
Harper
Hastings (WA)
Heller
Hensarling
Herger
Hunter
Inglis
Jordan (OH)
King (IA)
Kingston
Lamborn
Latta
Lewis (CA)
Luetkemeyer
Manzullo
McCarthy (CA)
McClintock
McHenry
McKeon
Miller (FL)
Miller, Gary
Moran (KS)
Nunes
Pence
Petri
Price (GA)
Rogers (AL)
Rooney
Roskam
Royce
Ryan (WI)
Scalise
Schmidt
Schock
Sensenbrenner
Sessions
Shadegg
Simpson
Smith (NE)
Sullivan
Terry
Thompson (PA)
Walden
Westmoreland
Wilson (SC)
Wittman

NOT VOTING—51

Akin
Barrett (SC)
Bishop (NY)
Boucher
Brady (TX)
Braley (IA)
Brown (SC)
Camp
Carter
Costello
Courtney
Crenshaw
Cuellar
Davis (AL)
Davis (IL)
Deal (GA)
Engel
Graves
Green, Al
Grijalva
Gutierrez
Higgins
Hodes
Hoekstra
Johnson (IL)
Kilroy
Larsen (WA)
Lynch
Maloney
Marchant
McCarthy (NY)
Miller (NC)
Murtha
Olson
Ortiz
Paul
Platts
Quigley
Radanovich
Rodriguez
Rohrabacher
Rush
Sestak
Sires
Smith (WA)
Stupak
Tiberi
Tsongas
Wamp
Waters
Weiner

ANNOUNCEMENT BY THE SPEAKER PRO TEMPORE

The SPEAKER pro tempore (during the vote). Members have 2 minutes remaining to vote.

□ 1903

Messrs. NUNES and MANZULLO changed their vote from ''aye'' to ''no.''

So (two-thirds being in the affirmative) the rules were suspended and the bill, as amended, was passed.

The result of the vote was announced as above recorded.

The title was amended so as to read: ''A bill to establish the Waco Mammoth National Monument in the State of Texas, and for other purposes.''.

A motion to reconsider was laid on the table.

BLUE RIDGE PARKWAY AND TOWN OF BLOWING ROCK LAND EXCHANGE ACT OF 2009

The SPEAKER pro tempore. The unfinished business is the question on suspending the rules and passing the bill, H.R. 1121, as amended.

The Clerk read the title of the bill.

The SPEAKER pro tempore. The question is on the motion offered by the gentlewoman from Guam (Ms. BORDALLO) that the House suspend the rules and pass the bill, H.R. 1121, as amended.

The question was taken.

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

RECORDED VOTE

Mr. HASTINGS of Florida. Mr. Speaker, I demand a recorded vote.

A recorded vote was ordered.

The SPEAKER pro tempore. This is a 5-minute vote.

The vote was taken by electronic device, and there were—ayes 377, noes 0, not voting 56, as follows:

[Roll No. 649]

AYES—377

Abercrombie
Aderholt
Adler (NJ)
Alexander
Altmire
Andrews
Arcuri
Austria
Baca
Bachmann
Bachus
Baird
Baldwin
Barrow
Bartlett
Barton (TX)
Bean
Becerra
Berkley
Berman
Berry
Biggert
Bilbray
Bilirakis
Bishop (GA)
Bishop (UT)
Blackburn
Blumenauer
Blunt
Boccieri
Boehner
Bonner
Bono Mack
Boozman
Boren
Boswell
Boustany
Brady (PA)
Bright
Broun (GA)
Brown, Corrine
Brown-Waite, Ginny
Buchanan
Burgess
Burton (IN)
Butterfield
Buyer
Calvert
Campbell
Cantor
Cao
Capito
Capps
Capuano
Cardoza
Carnahan
Carney
Carson (IN)
Cassidy
Castle
Castor (FL)
Chaffetz
Chandler
Childers
Chu
Clarke
Clay
Cleaver
Clyburn
Coble
Coffman (CO)
Cohen
Cole
Conaway
Connolly (VA)
Cooper
Costa
Crowley
Culberson
Cummings
Dahlkemper
Davis (CA)
Davis (KY)
Davis (TN)
DeFazio
DeGette
Delahunt
DeLauro
Dent
Diaz-Balart, L.
Diaz-Balart, M.
Dicks
Dingell
Doggett
Donnelly (IN)
Doyle
Dreier
Driehaus
Duncan
Edwards (MD)
Edwards (TX)
Ehlers
Ellison
Ellsworth
Emerson
Eshoo
Etheridge
Fallin
Farr
Fattah
Filner
Flake
Fleming
Forbes
Fortenberry
Foster
Foxx
Frank (MA)
Franks (AZ)
Frelinghuysen
Fudge
Gallegly
Garrett (NJ)
Gerlach
Giffords
Gingrey (GA)
Gohmert
Gonzalez
Goodlatte
Gordon (TN)
Grayson
Green, Gene
Griffith
Guthrie
Hall (NY)
Hall (TX)
Halvorson
Hare
Harman
Harper
Hastings (FL)
Hastings (WA)
Heinrich
Heller
Hensarling
Herger
Herseth Sandlin
Hill
Himes
Hinchey
Hinojosa
Hirono
Holden
Holt
Honda
Hoyer
Hunter
Inglis
Inslee
Israel
Issa
Jackson (IL)
Jackson-Lee (TX)
Jenkins
Johnson (GA)
Johnson, E. B.
Johnson, Sam
Jones
Jordan (OH)
Kagen
Kanjorski
Kaptur
Kennedy
Kildee
Kilpatrick (MI)
Kind
King (IA)
King (NY)
Kingston
Kirk
Kirkpatrick (AZ)
Kissell
Klein (FL)
Kline (MN)
Kosmas
Kratovil
Kucinich
Lamborn
Lance
Langevin
Larson (CT)
Latham
LaTourette
Latta
Lee (CA)
Lee (NY)
Levin
Lewis (CA)
Lewis (GA)
Linder
Lipinski
LoBiondo
Loebsack
Lofgren, Zoe
Lowey
Lucas
Luetkemeyer
Luján
Lummis
Lungren, Daniel E.
Mack
Maffei
Manzullo
Markey (CO)
Markey (MA)
Marshall
Massa
Matheson
Matsui
McCarthy (CA)
McCaul
McClintock
McCollum
McCotter
McDermott
McGovern
McHenry
McHugh
McIntyre
McKeon
McMahon
McMorris Rodgers
McNerney
Meek (FL)
Meeks (NY)
Melancon
Mica
Michaud
Miller (FL)
Miller (MI)
Miller, Gary
Miller, George
Minnick
Mitchell
Mollohan
Moore (KS)
Moore (WI)
Moran (KS)
Moran (VA)
Murphy (CT)
Murphy (NY)
Murphy, Patrick
Murphy, Tim
Myrick
Nadler (NY)
Napolitano
Neal (MA)
Neugebauer
Nunes
Nye

Oberstar
Obey
Olver
Pallone
Pascrell
Pastor (AZ)
Paulsen
Payne
Pence
Perlmutter
Perriello
Peters
Peterson
Petri
Pingree (ME)
Pitts
Poe (TX)
Polis (CO)
Pomeroy
Posey
Price (GA)
Price (NC)
Putnam
Rahall
Rangel
Rehberg
Reichert
Reyes
Richardson
Roe (TN)
Rogers (AL)
Rogers (KY)
Rogers (MI)
Rooney
Ros-Lehtinen
Roskam
Ross
Rothman (NJ)
Roybal-Allard
Royce
Ruppersberger
Ryan (OH)
Ryan (WI)
Salazar
Sánchez, Linda T.
Sanchez, Loretta
Sarbanes
Scalise
Schakowsky
Schauer
Schiff
Schmidt
Schock
Schrader
Schwartz
Scott (GA)
Scott (VA)
Sensenbrenner
Serrano
Sessions
Shadegg
Shea-Porter
Sherman
Shimkus
Shuler
Simpson
Skelton
Slaughter
Smith (NE)
Smith (NJ)
Smith (TX)
Snyder
Souder
Space
Speier
Spratt
Stark
Stearns
Sullivan
Sutton
Tanner
Taylor
Teague
Terry
Thompson (CA)
Thompson (MS)
Thompson (PA)
Thornberry
Tiahrt
Tierney
Titus
Tonko
Towns
Turner
Upton
Van Hollen
Velázquez
Visclosky
Walden
Walz
Wasserman Schultz
Watson
Watt
Waxman
Welch
Westmoreland
Wexler
Whitfield
Wilson (OH)
Wilson (SC)
Wittman
Wolf
Woolsey
Wu
Yarmuth
Young (AK)
Young (FL)

NOT VOTING—56

Ackerman
Akin
Barrett (SC)
Bishop (NY)
Boucher
Boyd
Brady (TX)
Braley (IA)
Brown (SC)
Camp
Carter
Conyers
Costello
Courtney
Crenshaw
Cuellar
Davis (AL)
Davis (IL)
Deal (GA)
Engel
Granger
Graves
Green, Al
Grijalva
Gutierrez
Higgins
Hodes
Hoekstra
Johnson (IL)
Kilroy
Larsen (WA)
Lynch
Maloney
Marchant
McCarthy (NY)
Miller (NC)
Murtha
Olson
Ortiz
Paul
Platts
Quigley
Radanovich
Rodriguez
Rohrabacher
Rush
Sestak
Shuster
Sires
Smith (WA)
Stupak
Tiberi
Tsongas
Wamp
Waters
Weiner

ANNOUNCEMENT BY THE SPEAKER PRO TEMPORE

The SPEAKER pro tempore (during the vote). Members have 2 minutes remaining to vote.

□ 1911

So (two-thirds being in the affirmative) the rules were suspended and the bill, as amended, was passed.

The result of the vote was announced as above recorded.

A motion to reconsider was laid on the table.

PERSONAL EXPLANATION

Mr. BRALEY of Iowa. Mr. Speaker, I missed votes on Monday, July 27, 2009. If I were present, I would have voted:

"Yea" on rollcall 647, On Motion to Suspend the Rules and Pass H. Res. 593—Recognizing and celebrating the 50th Anniversary of the entry of Hawaii into the Union as the 50th State;

"Yea" on rollcall 648, On Motion to Suspend the Rules and Pass H.R. 1376—Waco Mammoth National Monument Establishment Act of 2009;

"Yea" on rollcall 649, On Motion to Suspend the Rules and Pass H.R. 1121—Blue Ridge Parkway and Town of Blowing Rock Land Exchange Act of 2009.

PERSONAL EXPLANATION

Mr. RODRIGUEZ. Mr. Speaker, unfortunately I was unable to vote today, Monday, July 27, 2009 because I was unavoidably detained. Had I been present to vote, I would have voted in support of the three bills that were before the floor of the House of Representatives today; H. Res. 593, Recognizing and celebrating the 50th Anniversary of the entry of Hawaii into the Union as the 50th State; H.R. 1376, the Waco Mammoth National Monument Establishment Act of 2009; and H.R. 1121, the Blue Ridge Parkway and Town of Blowing Rock Land Exchange Act of 2009.

PERSONAL EXPLANATION

Ms. JACKSON-LEE of Texas. Mr. Speaker, although I voted for all amendments and for the motion to recommit, because of responsibilities in commemorating Apollo 11 in Houston, I missed the final vote on H.R. 3293, Labor, Health and Human Services, Education, and Related Agencies, the appropriations bill, on Friday, July 24, 2009.

Had I been present, I would have voted ''aye.''

REGARDING POSSIBLE REINSTATEMENT OF PETE ROSE

(Mrs. SCHMIDT asked and was given permission to address the House for 1 minute and to revise and extend her remarks.)

Mrs. SCHMIDT. Mr. Speaker, I rise this evening to discuss Major League Baseball's possible reinstatement of Pete Rose. I was pleased to hear reports over the weekend that Commissioner Bud Selig is seriously considering ending the ban that has kept baseball's all-time hits leader from consideration for enshrinement in the Hall of Fame.

Beginning in 1963 until his playing days ended in 1986, Pete Rose accumulated some of the most heralded baseball statistics known to the game. Most notably are his 4,256 career hits, a Major League record, one that may never be broken. Pete did not get this record without earning the nickname ''Charlie Hustle.''

It will always be hard to forget that September evening in 1985 when Rose belted his record-breaking hit into left-center off pitcher Eric Show of the San Diego Padres. Additionally, Rose won two World Series championships with the Cincinnati Reds in 1975 and 1976, a squad commonly known as the Big Red Machine, and also one with the Philadelphia Phillies in 1980.

Even Pete Rose has admitted to making some serious mistakes in his life. Mr. Speaker, we are a country of second chances and of forgiveness. After 20 years of Major League Baseball banishment, Pete Rose deserves to have his second chance.

HOUSTON FEDERAL JOBS FAIR

(Ms. JACKSON-LEE of Texas asked and was given permission to address the House for 1 minute.)

Ms. JACKSON-LEE of Texas. On July 25, the Sunday Chronicle read: Houston fair draws more than expected despite the stifling heat. Thousands sweat out the chance to get Federal jobs. Houston fair draws more than expected despite the stifling heat.

A Federal jobs fair that was held by my office in Houston on this past Saturday, July 25, shows that Texas is vulnerable to the unemployment numbers, and it also shows why the stimulus dollars do count.

Houstonians and Texans and Americans want to work. These stimulus dollars are beginning to impact our communities, even those who are viewed as not being vulnerable to this high unemployment. We realize that we have to face this while we rebuild our economic structure. That is what we are trying to do with the passage of health care reform and in providing more jobs for our constituents.

I will have another Federal jobs fair in collaboration with many of my friends—with the private sector, with community colleges, and with others—to ensure that Americans know that their tax dollars are working for them. We want Federal jobs to be known and to be available throughout America beyond the beltway, and we'll be working with our government, with our administration and with our Department of Labor to let Americans know there are jobs there for them that their tax dollars are paying for. In essence, we need you to work for the United States Government, and jobs are there for you.

Houston, we will be back again for a second U.S. Federal jobs fair.

□ 1915

CITY OF EDINA IN TOP TEN

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

Mr. PAULSEN. Mr. Speaker, I rise tonight to recognize one of the many great communities in my congressional district. The City of Edina, Minnesota, was recently named one of the top 10 best towns for families by Family Circle magazine. Edina was chosen from an initial list of 1,700 towns and cities nationwide with populations between 15,000 people and 150,000 people.

The annual rankings are based on a number of criteria, including the quality of schools, access to health care, affordable homes, green space, crime rates, and financial stability. In fact, Edina was the only city on the list to receive a Great Schools rating of a 10—the best score possible—which is determined by looking at standardized test scores of students in the public school district.

Mr. Speaker, I offer my congratulations to the City of Edina and the parents and the students and the friends

and neighbors who make that community great.

ALEXANDER HEARD

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

Mr. COHEN. Mr. Speaker, I attended Vanderbilt University and graduated in 1971. My chancellor was a gentleman named Alexander Heard. Alexander Heard passed away last week at the age of 92. He was an exceptional educator, one of the best Tennessee or this Nation will ever know.

During the tumultuous times of the 1960s, a student group invited both Dr. Martin Luther King and Stokely Carmichael to address the students at Vanderbilt University. Protests came in as expected. Chancellor Heard knew that colleges were about openness, about free speech and exchange of ideas. In fact, he said the university's obligation is not to protect students from ideas, but rather to expose them to ideas to help make them capable of handling them and hopefully having ideas.

Chancellor Heard wrote quite a few texts on southern politics, was a respected academician as well as an educator. He was a gentleman, he was a scholar, he made Vanderbilt a great university.

He will be missed.

HEALTH CARE THIEVES

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

Mr. POE of Texas. Mr. Speaker, it's time to put common sense into health care reform. The first thing to do is focus on current fraud and waste. The part of health care that the government already runs, like Medicare and Medicaid, wastes billions of dollars every year, and billions more are lost through fraud.

The national health care antifraud system says Medicare fraud costs American taxpayers $68 billion every year. The FBI says health care fraud may be as high as 10 percent of costs, which means the crooks and the cheats are stealing $226 billion a year from taxpayers. That's money that should be going to treat the sick and the disabled. Now taxacrats want to hand all of our health care money over to the bureaucrats.

Law enforcement needs to go after Medicare and Medicaid cheats before we consider nationalized health care. We can save billions of dollars on health care by simply sending the crooks to jail. Fix the obvious stealing and waste before we encourage more fraud and abuse under a universal government-run health care system.

And that's just the way it is.

HONORING DANIEL PAUL

(Mrs. BACHMANN asked and was given permission to address the House for 1 minute.)

Mrs. BACHMANN. Mr. Speaker, this last Saturday was a very sad day in Minnesota. We laid to rest a fallen hero named Daniel Paul. His parents were in attendance, his family, our community, and we came together in sorrow and tears, our governor, our two Senators, and we went as a community for this fallen hero.

He was really a remarkable man, Daniel Paul. He was so remarkable, 22 years old, he didn't fear anything. And he willingly laid his life on the altar of freedom for all of us. And it was one more reminder, Mr. Speaker, of how heavy the cost of our freedom is and yet how remarkable these young men and women are who voluntarily, with full assurance in their heart, lay their life down for us.

So, Mr. Speaker, I just wanted to come today and make reference and thanks to this young man who gave his life for us to his parents, to his siblings, to his extended family who have all sacrificed so much with the loss of this young life.

So, Mr. Speaker, I want to honor the memory of Daniel Paul and thank him for his service to our country. And also for those in our community who doff their hats, the patriot guards, the motorcyclists who lined the streets with their flags. I was never more proud to be an American than this last Saturday when I saw our community recognize this cost and pause and honor his memory.

REPUBLICAN HEALTH CARE PLAN NEEDS TO COME TO THE FLOOR

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

Mr. GOHMERT. Mr. Speaker, I'm looking at the list of the things to be covered this week. It has, ''Friday, health care legislation???''

I hope that the American people will let their voices be heard. This is not good for America. It is going to cost tremendous amounts of money, and then our seniors, especially, get particularly vulnerable. They go on lists and they are not prioritized, and then they die waiting in line, just as the man I met here recently from Canada, just as his father did after being on the list for 2 years to get a bypass surgery.

We don't need to go here. People don't need to be dying in line. We can have a better plan, and we have a better plan, but it's been shut out with Leg Counsel and I can't get it out in the form of a bill. That's what we need to do. The plan's there. Just let us get it to the floor.

SOCIALIZED MEDICINE WILL NOT WORK

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

Mr. BURTON of Indiana. About 85 percent of the people in this country do have health care coverage, Mr. Speaker. And we really need to do something about the indigent, the people that are poor, the 15 percent that don't have coverage. But creating a socialized medical system simply won't work, as my colleague that just preceded me said. Socialism causes a rationing of health care, and in addition to that, it causes a tremendous amount of additional expense on people that they don't really think they're going to have to bear.

We're going to see a tax increase for everybody in this country if we pass the program that's been put forth by the Democrats and the President of the United States. And the rationing of health care for seniors. I can't believe the AARP has come out in favor of this bill, because seniors who have more health problems as they progressively get older are going to be hit the worst. And as my colleague just said, there will be rationing of health care, and many people won't be able to get hip replacements or heart surgery that's absolutely necessary to keep them going and keep their quality of life where it should be.

I hope the people of this country, Mr. Speaker, really pay attention, and I hope we don't get this bill passed until we get back in August, because once the American people find out what's in it, they aren't going to want it.

SPECIAL ORDERS

The SPEAKER pro tempore. Under the Speaker's announced policy of January 6, 2009, and under a previous order of the House, the following Members will be recognized for 5 minutes each.

LADIES OF LIBERTY

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

Mr. POE of Texas. Mr. Speaker, the women of Iran are inspiring people around the world leading in the cause and fight for freedom. They have taken to the streets by the thousands because of the fraudulent government elections and repressive government subjugation. They are giving even men courage to protest. The New York Times ran an eyewitness report saying, ''For days now, I've seen women urging less courageous men on. I've seen them get beaten and return to the fray.'' Women shout at the men to ''Get up. Get up. Speak out against government oppression.''

Untold numbers of Iranian women have been arrested. Shadi Sadr is a journalist, lawyer, and a human rights activist. She was last seen Friday, July 17, on her way to prayer. She was seen struggling with government henchmen as they beat her and dragged her into a car.

Shadi managed to break away for a few moments, but she was chased down, beaten with batons and taken to

prison in Tehran to keep her voice silent. She is jailed this very night as we assemble here in this cradle of liberty. What's the charge? What's her crime? Seeking freedom and respect seem to be her crimes. And by any means necessary, the black-booted government thugs want to silence those who exercise the first human right of freedom—and that being the freedom to speak out against oppression.

As a lawyer, Shadi represents Iranian activists and journalists. She has won cases for several women sentenced to be executed for violations of religious laws, and those convictions have been overturned. She is also involved in Women's Field, a group defending women's rights in Iran, including the ''Stop Stoning Forever'' campaign.

Mr. Speaker, women are tragically stoned to death for religious violations in Iran, for acts that aren't even crimes in civilized countries. They are buried up to their waist with their hands tied behind their backs, then a mob throws stones at them until they're dead. And sometimes it takes more than an hour to die. These violent, barbaric acts are to be condemned by those who value life and liberty.

For the first time in a Presidential campaign in Iran, women made their oppression an issue in the election. Women courageously confronted their oppressors demanding freedom.

One Iranian woman said, ''When the elections were stolen, women felt betrayed. They took to the streets. Images of security forces beating up unarmed, innocent women were shocking and fueled their anger. At times, the number of women exceeded those of men in the protest.''

One protester told reporters, ''We don't sit in the corner and wait for the men to make change. We do it. We are the mothers of Iran.''

You see, Mr. Speaker, women in Iran have been fighting for dignity and respect for over 30 years. Mr. Speaker, these mothers of Iran have true courage, the kind of courage that comes from standing for truth over government lies. The kind of courage that comes from fighting for freedom against tyranny.

It's been said ''Tyranny is when the people fear the government. Freedom is when the government fears the people.'' And now, the government of Iran has begun to fear these ladies of liberty.

The women of Iran have shown their courage to the world. They speak with one bold voice saying ''NO MORE''. They will not be silenced because truthful, righteous words cannot long be silenced by the stones of oppression and the rocks of brutality.

The Ladies of Liberty are writing their own glorious page in history. They have been unjustly trampled, dragged, beaten, shot, and killed by a government that has declared war on its own people.

□ 1930

They have earned their honored place among those who have shed blood for freedom. But their fight is not for their native Iran alone. It is a fight for all freedom-seeking women and men worldwide that are being persecuted by their own government. Shadi Sadr and the wonder women have earned the respect of the free world.

Mr. Speaker, it is only a matter of time before the women of Iran win their freedom. They are throwing off the yolk of tyranny. With every step they take, they move closer to the day that liberty will be theirs. When they are successful in liberating their country from tyranny, Iran and the world will be safer. Their cause is righteous and their actions are just.

And that's just the way it is.

HEALTH CARE REFORM

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

Ms. LEE of California. Mr. Speaker, I rise today to speak on the urgent issue of health care reform. Later, the Congressional Black Caucus, led by a great leader who does this every Monday night on behalf of the CBC, Congresswoman MARSHA FUDGE from Ohio, will be holding another Special Order on health reform. Although I won't be able to join my colleagues tonight, I did want to come to the floor and add my voice to the chorus of members from the Congressional Black Caucus who are calling for real health care reform now.

I want to begin by commending my colleagues in the CBC, especially Congresswoman and Dr. DONNA CHRISTENSEN, who also is the second vice Chair of the Congressional Black Caucus and chairs our Congressional Black Caucus Health Brain Trust. She has been leading the charge to address racial and ethnic disparities in health care. Together with Representative DANNY DAVIS, who cochairs the CBC's Health and Wellness Task Force, the two of them have developed a very important set of requirements to ensure that real health care reform becomes the order of the day. So I just want to thank them for their leadership, and just know that the Congressional Black Caucus supports what they have put together with all of the input of the CBC.

Let me just begin by just saying, we have said over and over again that we want to ensure that there is a strong public health option linked to Medicare providers. This requirement must remain intact in the final bill.

We believe that we must continue to work to get this done as quickly as possible. That means hopefully we can do this before we recess this week. The 47 million uninsured deserve this. This means, again, we must pass a bill this week before we adjourn for the August recess.

The Congressional Black Caucus believes that a bill that is less than $1 trillion, that is completely paid for, that is budget neutral, would likely compromise many of the provisions that are important to the millions of Americans that are uninsured. This is unacceptable. We think the bill must at least have a cost of $1 trillion. There is no reason to consider a bill less costly.

The CBC stands firmly behind an original request that we made, along with the Congressional Hispanic Caucus and the Congressional Asian Pacific American Caucus, to include specific health disparity provisions from the TriCaucus bill, which I believe is H.R. 3090, the Health Equity and Accountability Act. We want these provisions in the final health reform bill.

The TriCaucus has worked on a comprehensive bill to eliminate health disparities for the last 8 years. We believe that we have a very good bill, and we are pleased that many of the provisions in our health care reform bill are included now as it relates to health and ethnic and racial disparities.

The CBC considers the provisions on children's health prevention services and mental health and substance abuse critical to this bill, and they should not be compromised in the final product. We must ensure that we guarantee true parity for mental health and comprehensive coverage, including dental and vision, for kids.

Also, the Congressional Black Caucus believes that the disproportionate share of hospital payments should not be cut in an unnecessary attempt to reduce the cost of the overall health bill. Many hospitals who care for a large number of low-income patients or which serve as teaching hospitals depend on these DSH payments to help cover their operating costs. We shouldn't be penalizing these hospitals, because ultimately that will affect their ability to provide access and care to low-income populations.

And finally, the Congressional Black Caucus strongly believes that we can realize a host of savings from a variety of provisions in this bill, whether or not the Congressional Budget Office agrees to evaluate and score these savings. As a caucus, we strongly recommend including a trigger in the final health care reform bill that would allow those savings to be used to replace current pay-fors and to add important services that were left out of the initial bill because of the failure to fully assess and score the final cost.

The bottom line is that expanding access to care and expanding the availability of preventive health services will cut costs and save lives and will be to the benefit of everyone. We should try and recapture those savings and use them to strengthen the system.

Last week, President Obama reminded us all of the important work that we must do, and we must do it now. We must reject claims that the cost of reforming health care in America is something our Nation can't afford. To the contrary; if we fail to act, and if we fail to act now, we do so at

the peril of the American people, particularly the 47 million who will continue to suffer.

Thank you, Congresswoman FUDGE, for your leadership.

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

(Mr. JONES addressed the House. His remarks will appear hereafter in the Extensions of Remarks.)

SMOKE AND MIRRORS

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

Mr. BROUN of Georgia. Mr. Speaker, when it comes to passing a health care bill that the Democratic leadership insists that this will happen, they claim to currently have the votes to get it passed on this floor. If that's true, Mr. Speaker, then show us the bill. If the rhetoric coming from the other side of the aisle is true and you are planning to steamroll a $1 trillion health care experiment through this body before August, then let's see it. Let us debate it. Let the American people see it. The American people deserve to see the bill with plenty of time for an open and honest debate about what is exactly in store for them if this partisan experiment passes.

The American people have seen enough smoke and mirrors about the Washington bureaucrat that will be inserted between them, as a patient, and their physician. They have seen enough smoke and mirrors about how many people will be forced off of their current health care plans. They have seen enough smoke and mirrors about the real cost of this plan. If you have the votes, then let's clear out the smoke, show us the bill, and finally give hardworking Americans answers to their questions.

AMERICA'S REPUTATION IS IMPROVING, BUT THERE'S MORE TO DO

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

Ms. WOOLSEY. Mr. Speaker, one of President Obama's greatest challenges has been to restore America's moral leadership and reputation in the world because it sunk to new lows under the previous administration.

To achieve this goal, the President has taken several important steps. He has renounced the use of torture. He has called for a nuclear-free world. He has reached out to the Muslim world, and he has promised to emphasize diplomacy and international cooperation.

We are now seeing the results of these changes. Last week, the Pew Global Attitudes Project reported the results of its latest survey of opinions about the United States. It found that the image of the United States has improved significantly under President Obama. People in Western Europe, Africa, Latin America, and Asia now have a much more positive opinion of the United States. America's reputation has even improved, Mr. Speaker, in some countries which are predominantly Muslim.

The survey also compared attitudes about President Obama and Osama bin Laden in the Muslim world. For the first time in the survey's history, people in Turkey, Egypt, Jordan, Nigeria, and Indonesia have a better opinion of the American President than bin Laden.

Mr. Speaker, I am encouraged that the people of the world have more trust and respect for America these days. It means our moral authority is being restored, and moral authority matters. When America is trusted, we have a much greater capacity for global leadership.

But even though our country's good name is being restored throughout the world, there is much more to be done. Most importantly, we need a foreign policy based on the principles of ''smart power.''

Smart power emphasizes preventing war instead of preemptive war. It relies on diplomacy and international cooperation instead of military occupation, and it gives the people of the world the hope and the opportunity they need to reject a life of violence and hatred.

The principles of smart power are included in my ''Smart Security Platform for the 21st Century,'' which I have proposed in House Resolution 363. The Smart Platform calls for America to work with multilateral organizations to cut off funding and support for extremist networks. It strengthens international intelligence and law enforcement operations to track down extremists while respecting civil liberties. It helps eliminate the root causes of instability by promoting economic development, Third World debt relief, conflict resolution, global health programs, and universal education. It increases support for civil society, which plays a key role in stopping violence. It reduces our dependence on foreign oil by investing in renewable alternatives.

Smart calls for diplomatic efforts enhanced by inspection regimes and regional security arrangements to reduce the spread of nuclear weapons and nuclear materials. It calls for the ratification of the Comprehensive Nuclear Test Ban Treaty by the Senate, and it provides adequate funding for the Cooperative Threat Reduction Program to secure nuclear materials in Russia and other countries.

Mr. Speaker, it is time for America to start relying on smart power to protect our country because the smarter we are, the safer we are going to be.

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

(Mr. MORAN of Kansas addressed the House. His remarks will appear hereafter in the Extensions of Remarks.)

HEALTH CARE

The SPEAKER pro tempore. Under a previous order of the House, the gentlewoman from Minnesota (Mrs. BACHMANN) is recognized for 5 minutes.

Mrs. BACHMANN. We need to know what the people who advise the President of the United States think and believe about health care reform, Mr. Speaker. Listening to the President's adviser's actual words I believe is very enlightening.

This morning I read a column written by Betsy McCaughey, and I would like to quote from it extensively now. This is from a column dated July 24, 2009. Ms. McCaughey wrote the following. She said, The health bills coming out of Congress would put the decisions about your care in the hands of Presidential appointees. Government will decide, not the people, not their doctors, what our plan will cover, how much leeway our doctor will have, and what senior citizens will finally get under Medicare.

But what is even more important, Mr. Speaker, are the actual words of the President's advisers on health care. Here are the words from one of the President's first advisers, Dr. Ezekiel Emanuel, the brother of the White House Chief of Staff. He has already been appointed to two key positions: one is Health Policy Adviser at the Office of Management and Budget, the other is as a member of the Federal Council on Comparative Effectiveness Research.

This is what Mr. Emanuel has written, and I quote, ''Vague promises of savings from cutting waste, enhancing prevention and wellness, installing electronic medical records and improving quality are merely 'lipstick' cost control, more for show and public relations than for true change.''

Isn't this what the Democrats have claimed we are going to find $500 billion in savings for? The President's own adviser says this is just lipstick, this is just a paper covering, this isn't where the real savings are. Savings, the President's adviser writes, will require changing how doctors think about their patients. Doctors take the Hippocratic Oath too seriously, he writes. Now, hear me, Mr. Speaker, this is the President's adviser writing this, Doctors take the Hippocratic Oath too seriously ''as an imperative to do everything for the patient regardless of the cost or effects on others.''

But that is what the people want their doctor to do. But Emanuel wants doctors to look beyond the needs of their patient and consider social justice, such as whether the money would be better spent on someone else. This is

a horrific notion to our Nation's doctors, but it is a horrific notion to each American because doctors believe, as Americans believe, that social justice is given out one patient at a time.

But the President's adviser, Dr. Emanuel, believes communitarianism should guide decisions on who gets care. He says medical care should be reserved for the nondisabled. So watch out if you're disabled. Care should be reserved for the nondisabled, not given to those who are ''irreversibly'' prevented from becoming participating citizens. ''An obvious example,'' he said, ''is not guaranteeing health services to patients with dementia.''

We just lost my father-in-law to dementia 2 months ago. I thank God that the doctors were able to alleviate my poor father-in-law's symptoms at the end of his life at age 85.

□ 1945

Apparently, under the Democrats' health care plan, my father-in-law would not have received the high quality of care that he received in his last 2 months of life. Or if you're a grandmother with Parkinson's or a child with cerebral palsy, watch out.

In fact, the President's adviser defends discrimination against older patients. He writes: ''Unlike allocation by sex or race, allocation by age is not invidious discrimination. Every person lives through different stages of life rather than being a single age. Even if a 25-year-old receives priority over 65-year-olds, everyone who is 65 now was previously 25.''

These bills that are being rushed through Congress right now, maybe even this week, are going to cut over $500 billion out of Medicare in the next 10 years, putting it on the backs of our State legislature to fill the gaps. Knowing how unpopular these cuts are, the President's Budget Director, Peter Orszag, has urged Congress to delete their own authority over Medicare to a new Presidentially appointed bureaucracy that will not be accountable to the public.

Here is the President's next adviser, Dr. David Blumenthal. He recommends that we slow medical innovation in order to control health spending. You heard me right. He said let's slow medical innovation to control health spending. He has long advocated government health spending controls, although he concedes they are associated with longer waits and reduced availability of new and expensive treatment and devices, but he calls it debatable whether the timely care Americans get is worth the cost.

Mr. Speaker, Americans need to wake up and read what the President and his advisers are saying. It may scare them to go to the phones and call their Members.

The SPEAKER pro tempore. Under a previous order of the House, the gentlewoman from Ohio (Ms. KAPTUR) is recognized for 5 minutes.

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

THE RISING COSTS OF HEALTH CARE AND THE NEED FOR A PUBLIC OPTION

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

Mr. LUJÁN. Mr. Speaker, at a time when families throughout my district and throughout our Nation are struggling with the rising costs of health care, a robust public option will expand choice and increase competition, driving down costs and making affordable health care a reality.

We need a strong public option for the single mother in my district who changed jobs and lost her insurance, who deserves the chance to get the coverage she needs for herself and for her kids.

We need health care reform for the self-employed businessperson who will finally have a chance to get affordable, comprehensive health care without worrying about constraints on his business.

There should be no question that our current health care system is broken. We have an opportunity to work with one another to truly look after the American people and make a difference in their lives. We need a strong public option because our constituents, our constituents, deserve affordable, accessible health care.

Mr. Speaker, we have come to work. We have come to look after the general welfare of the American people. Year after year we have had an opportunity, and we have squandered it, to be able to address the problems that are afflicting the American people, people struggling today. And we have an opportunity to either work to come up with some solutions or not present any ideas.

Mr. Speaker, we have some great ideas here, and it is about time that we take some action.

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

(Mr. BURTON of Indiana addressed the House. His remarks will appear hereafter in the Extensions of Remarks.)

REVISIONS TO THE 302(a) ALLOCATIONS AND BUDGETARY AGGREGATES ESTABLISHED BY THE CONCURRENT RESOLUTION ON THE BUDGET FOR FISCAL YEAR 2010

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

Mr. SPRATT. Mr. Speaker, under section 423(a)(1) of S. Con. Res. 13, the concurrent resolution on the budget for fiscal year 2010, I hereby submit an adjustment to the budget aggregates and the 302(a) allocation for the Committee on Appropriations for fiscal year 2010. Section 423(a)(1) of S. Con. Res. 13 permits the chairman of the Committee on the Budget to adjust discretionary spending limits for overseas deployments and other activities when these activities are so designated. Such a designation is included in the bill H.R. 3326 (Making appropriations for the Department of Defense for the fiscal year ending September 30, 2010, and for other purposes). Corresponding tables are attached.

This adjustment is filed for the purposes of sections 302 and 311 of the Congressional Budget Act of 1974, as amended. For the purposes of the Congressional Budget Act of 1974, as amended, this adjusted allocation is to be considered as an allocation included in the budget resolution, pursuant to section 427(b) of S. Con. Res. 13.

BUDGET AGGREGATES

[On-budget amounts, in millions of dollars]

	Fiscal year 2009	Fiscal year 2010	Fiscal years 2010–2014
Current Aggregates: [1]			
Budget Authority	3,668,788	2,882,117	n.a.
Outlays	3,357,366	2,999,049	n.a.
Revenues	1,532,579	1,653,728	10,500,149
Change for Appropriations adjustments to date:			
Budget Authority	0	0	n.a.
Outlays	0	3,514	n.a.
Revenues	0	0	0
Revised Aggregates:			
Budget Authority	3,668,788	2,882,117	n.a.
Outlays	3,357,366	3,002,563	n.a.
Revenues	1,532,579	1,653,728	10,500,149

[1] Current aggregates do not include the disaster allowance assumed in the budget resolution, which if needed will be excluded from current level with an emergency designation (section 423(b)).

n.a. = Not applicable because annual appropriations Acts for fiscal years 2011 through 2014 will not be considered until future sessions of Congress.

DISCRETIONARY APPROPRIATIONS—APPROPRIATIONS COMMITTEE 302(a) ALLOCATION

[In millions of dollars]

	BA	OT
Current allocation:		
Fiscal Year 2009	1,482,201	1,247,872
Fiscal Year 2010	1,091,405	1,309,520
Changes for overseas deployment and other activities designations:		
H.R. 3326 (Department of Defense Appropriations):		
Fiscal Year 2009	0	0
Fiscal Year 2010	128,247	68,091
Revised allocation:		
Fiscal Year 2009	1,482,201	1,247,872
Fiscal Year 2010	1,219,652	1,377,611

OZARK-JETA PROJECT

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

Mr. BOOZMAN. Mr. Speaker, I join those Members of Congress who are concerned about the rapid growth of deficit spending by the Federal Government, lots of spending with little job growth. For that reason I rise today to express my concern that the administration budget attempts to cancel a project that will literally cost the taxpayers more to cancel than it will to complete.

On July 7 the New York Times reported on the Ozark Powerhouse Rehabilitation project. According to the Times: ''Shutting down the Ozark-Jeta project won't save taxpayers a dime since the government would pay a $12 million cancellation fee and reimburse utility ratepayers for their $20 million share. Bottom line: Federal Taxpayers would spend $32 million to kill the project, $4 million more than it would cost to complete it.''

I think it is important for the record to contain some background information on the Ozark Powerhouse Rehabilitation project. So let's take a moment to do that.

The Corps of Engineers is in the middle of a major rehabilitation of the Ozark-Jeta Taylor Powerhouse on the Arkansas River. Construction is under way. This project involves turbine redesign and replacement that will improve and allow the continued operation of this 100-megawatt hydropower facility. The electricity produced at the Ozark Powerhouse is sold to customers in Arkansas, Kansas, Louisiana, Missouri, Oklahoma, and Texas. As the Times article noted, electricity customers have already invested $20 million through their utilities in this project. Neither the President's fiscal year 2010 budget request nor the initial announcements of stimulus money for the Corps contain any funding for this project.

My hope is that the administration will now work with the Congress to do the right thing and ensure that funding is provided to complete this project. If the project is not funded in 2010, work would be closed out on the project as fiscal year 2009 funds are exhausted.

If that happens, what will we have? We will have one turbine unit disassembled and inoperative. We will have another inoperative unit due to a cracked shaft. We will have three units that are available only on a day-to-day basis due to frequent outages caused by problems with old turbine runners. We will have five new units that have already been purchased and may be left sitting uninstalled and onsite with no place to store them. Most regrettably, the taxpayers will have an additional $32 million bill on top of the money they have already spent on an incomplete project.

If this project is cut, how can we say we want to reduce our dependence on fossil fuels and cut emissions? If this project is cut, how can we say we want to encourage renewable energy? If this project is cut, how can we say we will avoid wasting the taxpayers' money?

In fact, because the electricity produced by this Federal project will be sold, once the rehabilitation is complete, every taxpayer's invested dollar will be returned to the Treasury plus interest. At this point how could we even consider not completing the work?

I encourage the President to make an honest effort to reduce Federal spending, and we can start by completing this project rather than canceling it. During the Presidential campaign, then-Senator Obama talked about the importance of using a scalpel, not a hatchet, when cutting spending. A quick look at the facts shows that this project was thoughtlessly cut, the kind of cut that is made with a hatchet.

We have all seen crazy decisions made by both Republicans and Democrats in the White House; so I'm not trying to be partisan expressing my concern about the way this project is being handled. Instead, I believe this cut illustrates that the government too often makes poor decisions and mishandles taxpayers' dollars. It just doesn't make any sense to cancel a project in the middle of construction when it will cost more to cancel the project than it would to finish it.

Again, my hope is that the administration now will work with Congress to do the right thing and ensure that funding is provided to complete this project.

INTRODUCING H. RES. 680, REQUESTING THE PRESIDENT TO RETRACT AND APOLOGIZE FOR REMARKS CRITICIZING OFFICER CROWLEY; AND H.R. 3347, THE FREEDOM TRADE ACT

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

Mr. McCOTTER. Mr. Speaker, tonight I have introduced H. Res. 680, calling upon President Obama to retract and apologize for his remarks regarding the conduct of Cambridge, Massachusetts, police officer James M. Crowley, Jr. Mr. Speaker, I view this as a Presidential issue.

After admitting his bias and inadequate grasp of the facts, the President nevertheless stated Sergeant Crowley had ''acted stupidly'' when carrying out his duties as a law enforcement officer. Subsequently, in a public remark, the President said that Sergeant Crowley had ''overreacted.''

On his part, Sergeant Crowley has steadfastly denied any inappropriate conduct.

Mr. Speaker, this is the crux of the problem, and it is a situation patently unfair to Sergeant Crowley and his standing regarding potential legal and professional consequences. Therefore, I ask the President to retract his premature judgment, apologize for it, and allow the appropriate authorities to resolve this issue through due process.

With my view, Kenneth E. Grabowski, legislative director of the Police Officers Association of Michigan agrees. I quote Mr. Grabowski: ''After admitting a bias against the police officer and an ignorance of the facts, the President used his bully pulpit to help a well-connected friend by unfairly accusing an officer of misconduct in the performance of his duties. It must not stand. If it does, what officer will be next?''

And I would add, what citizen will be next?

Mr. Speaker, tonight I have also introduced H.R. 3347, the Freedom Trade Act, which applies human rights as a criterion of trade with the United States.

Mr. Speaker, I believe H.R. 3347 is most timely, for today, in the Ronald Reagan Building, President Obama stated how ''the relationship between the United States and China will shape the 21st century, which makes it as important as any bilateral relationship in the world.''

On my part, I believe it is therefore imperative that this relationship be built upon a common and unbreakable commitment to every human being's God-given rights to liberty, including the rights of the free exercise of religion and speech and to the ability to form free and independent labor unions.

That is why this bill is necessary. It will show all our potential partners throughout the world that the United States remains a beacon of freedom that will never forget Natan Sharansky's warning that ''how a government treats its own people cannot be separated from how that government could be expected to treat other countries.''

Mr. Speaker, with this I wholeheartedly concur.

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

(Mr. GOHMERT addressed the House. His remarks will appear hereafter in the Extensions of Remarks.)

FREEDOM OF SPEECH

The SPEAKER pro tempore. Under the Speaker's announced policy of January 6, 2009, the gentleman from Texas (Mr. CARTER) is recognized for 60 minutes as the designee of the minority leader.

Mr. CARTER. Mr. Speaker, I rise tonight to sort of do a continuation of a theme that I have been discussing, but this one has gotten to the point where I'm very concerned about the seriousness of the offense.

We talked about failure of certain Members of Congress to pay their taxes, failure of Members of Congress to not disclose the influence peddling that is going on. We've talked about a lot of things. Last week we talked about the rule of law and how many are trying to circumvent the rule of contract.

In fact, I read today in the Wall Street Journal that the compensation czar is going to renegotiate the contracts. I assume that means strong-arm the parties to renegotiate the contracts on certain compensation packages; and however offended we may be by compensation packages, there are certain rules of contract that should be honored. That is one of the backbones of our Nation's freedom is that we have the right to make a deal and then be bound by it. But that's a different subject.

Tonight I want to talk about a subject that I think that if this doesn't concern people back home, if this doesn't concern the Members of this body, then I don't really know what will.

□ 2000

It is because the issue we are talking about here is something that is the beginning of tyranny, and it is something we should all be very concerned about, and that is when a political group starts to step on the free speech rights of others in this Nation.

Now, you may feel like this is a position that I am taking that is untenable, but I am going to tell you that 652,000 people in the various districts, and most of the districts in my State have grown to a million now, send a person to Washington, D.C., to speak and to communicate with them back home about what is going on here in Washington, and they expect to hear the words and the ideas and the thoughts of their elected representative when that elected representative is communicating with them back in Washington, D.C.

But recently, in fact, you started seeing some of this pop up back during what they called the cap-and-trade and we call the cap-and-tax bill, but it has gone now to where it has become rampant on this issue of health care. An organization that is designed to set rules concerning how we spend government money in communicating with our people back home—it is called the Franking Commission. It is made up of, as I understand it, and I could have the number wrong, three Republicans and three Democrats, and both are submitted a communication, say a weekly newsletter, that is sent back home or the lead-in to a telephone townhall or an e-mail back home, an instant e-mail telling people what is going on this day in Congress. And these things have to be submitted if they are being paid for by government money to the Franking Commission.

The Franking Commission, in a simple way to say it, they just basically don't think you should be using the government's money for politics. But they have never in the history of the Republic taken the position you don't have the right to express your opinion on the policies that are being proposed, or that you must reword the policies to suit the language of someone else. It is almost like, I hate to say it, political correctness run amok.

I want to start off by telling you what happened to me, and then I want to tell you what has happened to some of my colleagues, and I am going to be joined by some of those colleagues.

It is important that you understand that I write to my folks or I communicate with my folks back home every day. One of the tools I use is called a telephone townhall. On a telephone townhall you make a recorded message that leads into the townhall, and part of the recorded message is to tell the people what you are going to be talking with them about for the next hour, so they know what the subject matter is, because it narrows the scope and we get to narrow down the things we talk about.

So we made a telephone townhall recording submission to the Franking Commission in which I proposed to say the Democratic Party is offering their government-run health care program in the next 2 weeks, and this is what we are going to talk about tonight. The Franking Commission came back and told me I could not say ''government-run health care'' and I could not say ''the Democratic Party.'' I had to say the majority party is submitting its public option health care program.

In other words, what they are telling me is I have to use the same language that the President of the United States uses in his speech, or that NANCY PELOSI uses when NANCY PELOSI talks about this, ''public option,'' which they have done polls to discover that ''public option'' sounds better than ''government-run health care.''

But that is their opinion. I as an American citizen and a Member of this body am entitled to express my title for that to my constituents back home, and in fact to the entire American public, to say in my opinion they are submitting their government-run health care program. And I would submit there is no other real way you can describe that if you believe the government is running it, because it says the government is running it.

It is not like they are going to contract out, subcontract to insurance companies to put together a policy. No. The United States Government is going to offer a health care plan for the American public and it is going to be run by the Federal Government, the United States Government. That is the plan. That is what they are submitting in their 1,018-page health care plan, which to this point has not been completed and finally marked up, and we haven't seen the final product. And if it goes the way it has gone since we have been in Congress since January, when Mr. Obama was sworn in, this Congress will present it to us sometime between midnight and 2 in the morning of the morning before we vote on it.

But getting back to the seriousness of this situation, I was taken back by what they did to me. But it is not just about me. If it was just about me, I would not be standing up here. But I felt like they were telling me what I had to say. I had to use someone else's words to describe something that I wanted to describe.

But that wasn't all. My colleague KEVIN BRADY from Texas, and he may be here later on, we were delayed because of weather for a long time tonight, and Mr. BRADY told me he would get here if he could, as fast as he could, within this hour.

My friend KEVIN BRADY prepared this chart. And what this chart is is Mr. BRADY's interpretation of all of the entities that exist or that are being created by this plan that is put together by the Democrats, and it is what stands between the consumers, that is this little body of folks right here, and the health care professionals over there, and all of this stands between them.

Mr. BRADY was told that he could not mail this to his constituents. He asked why, and they said it is not true. And he said, well, that is fine. Point to me one entity that is not in the bill, one, just one, and I will pull it down.

No one could point to any entity that is not contained in the bill. Everything that is seen on this chart is contained in the bill. But the point of this was they were trying to curtail Mr. BRADY's freedom to express himself, his freedom of speech in this body.

Now, if you want to really lean and say, Oh, sure that is fair, they ought to be able to do that, well, let's look at something here that is kind of interesting.

Back during the Hillary Clinton ''HillaryCare'' debate, another chart was introduced into this Congress. It is not as pretty as Mr. BRADY's, because it is not in color. This chart, during the HillaryCare debate, was submitted to the Franking Commission. I don't remember the date. Maybe it is on here. Anyway, it was during the HillaryCare debate, what was that, 1993, back in 1993, by Dick Armey of Texas. It went to the Franking Commission, and the Democrats and the Republicans approved it as appropriate to communicate to constituents with.

So what has changed between the nineties and the first debate about

health care, which was approved by both parties, and today, 2009, which was blocked and refused by the Democrat Members of the Franking Commission? What has changed is someone is trying to tell us we don't have the right to speak our minds in the United States Congress.

Now, when you get a huge majority like they have in the House, and the 60 vote majority in the Senate, maybe you feel like the mandate is so great that you have the right to circumvent the freedom of speech of the Members of Congress on the minority side. But you don't.

Congressman JOE BARTON used the words ''Democratic majority'' in his newsletter. The Franking Commission kicked it out and said he had to use ''congressional majority.'' But in NANCY PELOSI's newsletter in 2006 when she was in the minority, you find this statement: ''But too many here and across our Nation are paying the price for the Republican congressional majority's special interest agenda.''

So why was it okay for the now-Speaker of the House just in 2006 to use ''Republican congressional majority,'' but it is not okay for Mr. BARTON to use the term ''Democrat majority?'' He has sent this back along with Ms. PELOSI's statement and is awaiting a response from the Franking Commission.

Now, what is wrong with that? Well, what is wrong with that is that if you await a response from the Franking Commission, then you lose your time to communicate. You try to communicate on issues as they come up. This had to do with cap-and-trade before it passed the House. He was not allowed to use it.

A Florida colleague submitted a franking review for the week of July 13th that said, This bill imposes a new payroll tax on employers who do not provide their employees with insurance. The Democrats demanded it be changed to read, In my opinion, this bill imposes a new payroll tax on employers who do not provide the employees with insurance.

The problem is, it is not an opinion; it is a fact. It was pointed out to them on page 150 of their own bill. It says specifically the language that was quoted by a colleague from Florida.

Mr. KEN CALVERT from California pointed out that he quoted verbatim from President Obama in a speech that he made at his recent townhall meeting on health care in which he quoted this quote. When a lady asked about her elderly mother and special treatment for her elderly mother with heart troubles and receiving a pacemaker, the President, this is a direct quote from his speech, which was not allowed to be sent out and was deleted from Mr. CALVERT's newsletter, it was a direct quote: ''Look, the first thing of all is to understand that we actually have some choices to make about how we want to deal with our end-of-life care. We as a culture, as a society, can start to make better decisions within our own families and for ourselves. At least we can let doctors know and your mom know that you know what—maybe it isn't going to help. Maybe you are better off not having the surgery, but taking painkillers.''

That was a direct quote from the President at his conference, news conference, townhall, which was not allowed to go in Mr. CALVERT's newsletter by the Franking Commission.

There are more stories, but the following people have had censorship of their language recently: Representative HERGER, Representative LAMAR SMITH, Representatives LAMBORN, BONNER, WESTMORELAND, OLSON, SHUSTER, ROSKAM, MCCOTTER, GINGREY, FLEMING, BOUSTANY, BRADY, CONAWAY, PRICE, CULBERSON, GARRETT, KLINE and LEE. All have been in some form or fashion censored in their freedom of speech.

Folks, if they will take the freedom of speech away from your Members of Congress, when will they take it away from the press? When will they take it away from the people? When will they take it away from you and your children and the next generation of Americans that we pass this great, beloved freedom on to, the right of an American to stand up and speak his mind?

□ 2015

Yet this party, in control of this House, is starting to interfere with the freedom of speech of American citizens who are elected by other American citizens to represent them on the floor of Congress. Well, I have talked for a long time, but I am upset about what's going on. I am joined by some of my colleagues.

I yield to my friend Judge POE from Texas for whatever time he needs.

Mr. POE of Texas. I thank the gentleman from Texas. I appreciate the time to address this issue. You've brought forth an excellent argument and concern. As you have mentioned, the bigger problem about what is occurring has to do with the Constitution where the First Amendment says, ''Congress shall make no law abridging the freedom of speech.'' Of all places on Earth, this body, this group of people in this House should have the absolute freedom to speak freely about things that concern the people we represent, things that concern America, things that are good about America, and things that we need to help for America. This place, Congress. And yet this own body, through this censorship commission, prohibits us from talking to people in our own districts in a candid way. So much so that you and I and other Members throughout this House of Representatives can say anything we wish on this House floor—almost anything that doesn't violate the ethics rules that we've all agreed on. But yet we can say things on this House floor that we cannot say to our constituents back home in the form of a newsletter or a telephone call. The example you gave: We can say government-run health care plan, but we can't say that to our people back home. The reason is because there is a censorship commission that garnishes and looks after our words and says, No, you cannot have that freedom of speech.

So this issue is bigger than health care. It's bigger than energy cap-and-trade. It's bigger than all of those issues. The issue is the freedom to speak freely as a Member of Congress. Now we are slowly entering the abyss where words that we want to say in our own way are going to be controlled by the speech police in Congress. Who would have ever thought this would occur? But yet, as you mentioned, this is occurring because of the things that we wish to communicate with the people back home in Texas or California or Michigan or Iowa. We cannot tell them in a candid way what we think about what's going on here and answer their concerns when they ask us questions through e-mails, letters and phone calls. We are now being told that there are some things you just cannot say as a Member of Congress, and it's very disturbing. The First Amendment is first for a reason because without the First Amendment, none of the others can be enforced. Freedom of speech and the freedom of press are first, along with the freedom of religion and freedom to assemble, because they are the most important amendments and rights that we have. Now it's disturbing, as you said, that we find ourselves in a place where we have to get permission to say things from a censorship board that prohibits us from communicating our thoughts and our ideas back home, things that we can say on the House floor that we can't say in writing. Who would have thought?

It ought not be.

Mr. CARTER. I thank my friend from Texas for a very eloquent presentation. And it is that serious. Those of us who spend our lives in the courtroom trying to protect people's rights, as Judge POE will tell you, we spend an inordinate amount of time making sure that all the rights of Americans who appear in the court system are protected. We in this body should spend an inordinate amount of time making sure that our rights and the rights of the American people are protected. There are others here.

My good friend and classmate Mr. MCCOTTER, who is from the great State of Michigan, has a few things to say.

Mr. MCCOTTER. I thank the gentleman from Texas, and I thank him for allowing me to borrow the disputed chart. One of the things that I think frustrates Americans is when they entrust elected officials with office—especially Congress—and the Members of Congress forget a simple thing: We do not represent Washington to our districts. We represent our districts to Washington. I think that that important principle is often missed in the debate we are currently having. By all objective standards, the American people want health care reform, and they

want it done right. Yet in the rush to misjudgment, they are very concerned that one of the truisms Americans understand will, once again, be proven: That no matter how bad a situation may be, Congress can still make it worse. The rush to judgment now to pass a bill before the August deadline, to me, is based upon one ineluctable fact—the more the American people learn about what's in this 1,200-page health care bill, the more they are opposed to it. Thus, if this Congress leaves without having passed a flawed health care bill that will increase costs, decrease quality, eliminate choices and kill jobs, the American people will have time to tell their duly elected Representatives what they think of this bill; and it will not be pleasant.

Thus, we come to the problem before us tonight, which is the inability of Members of Congress to put out a chart that shows how the process would work under this bill. The chart in question is here before us. It is on the floor of the U.S. House; it is being broadcast by C–SPAN across the country; and yet Members are not allowed to put it in materials to be distributed to their constituents. I can find no logical explanation why this chart can be shown to you here and yet cannot be shown to you in a piece of mail, in a flyer or anything distributed out of the office of a Member. I would eagerly await the logical rationale as to why this is the case because, quite simply, if the majority has its way and does not allow Members of Congress to put forward the chart of their own 1,200-page health care plan, you will not see this chart.

This is what they want you to see. This will lead no one to an informed decision about what is in the bill. This will lead no one to an informed decision about how one of the most intimate relationships they will have, between themselves, their doctor and their health care insurance, will be affected by this bill. All we ask is that rather than allowing the people less information about this bill, that the majority do what is right and give the American people time to make their own determination based upon what is in the bill, and allow them to see this chart, contact their Members, tell them what they think of it; and let us come back, let us get rid of a flawed bill, and let us come together from the center and work out for true health care reform that is right for Americans, that will decrease costs, increase quality, empower patients as consumers, and continue to make the best health care system in the world even better for all of our citizens.

Mr. CARTER. I am now going to yield such time as he may choose to consume to my good friend from the State of Iowa, Congressman KING. He always has great things to say. He is a man of compassion and passion.

Mr. KING of Iowa. I thank the judge, the gentleman from Texas, for organizing this Special Order, bringing this point up, and for getting the media out so that the American people understand what is going on.

I'm looking at the two charts that the judge has put down there. One of them is the HillaryCare chart that was black and white that you will remember from a few moments ago, Mr. Speaker. Back in 1993, the black-and-white HillaryCare chart was enough to sink the National Health Care Act. HillaryCare went down because the American people saw a chart. They saw all of those government commissions that were created; and every time you create a government commission, they knew intuitively that some of their freedom was going to be gone, some of their choices were going to be gone, taxes were going to go up, services were going to go down, lines were going to get longer, and the quality of health care was going to be diminished, all in the name of leveling this thing down to the lowest common denominator, would be how I would describe it. That was when that flow chart in '93, 16 years ago, was in black and white.

This flow chart is in full technicolor. Mr. Speaker, when you look at this chart—and I hope you have studied this chart thoroughly and understand all of the 31 agencies that are created here in this full technicolor chart and the maze of government bureaucracy that is created by it, the loss of quality that would result from it, the increasing cost that will come from it, and the dependency that will be brought about because this safety net turns into a hammock; and in the end, no individual will really have an incentive to take care of their own health insurance because they will be crowded out by the public option. This is a national health care plan. This is socialized medicine. Mr. Speaker, I'll say socialized medicine real clearly to you here in this House of Representatives. If I had the notion to put it on frank mail, then we would see how that works too. Public option is the President's words and the national health care plan. Government-run insurance is what it really is.

Now we know a little bit about government-run insurance. A lot of western civilizations have government-run insurance. They have government-run a lot of things that have crippled them to the point where they couldn't compete with us. When you get down to the extreme in this, there's a reason why we won the Cold War—because we didn't have government-run, we had private sector-run, private sector-motivated, a whole mass of worker bees that went out and contributed; they were entrepreneurs; they were creative; and they sparked this economy. The vitality of the American free enterprise system not only created the best health care system in the world, the highest-quality medicine in the world, it created the most dynamic, the most competitive economy that tied together with strong political, military and cultural country. And in the end, the Soviet Union imploded because they couldn't keep up with us economically.

Here we are looking at the rest of the world having failed in their central planning models, whichever side of that great Iron Curtain they originated from. We can look at western Europe; we can look at the plan in France, in the United Kingdom; we can look to our neighbors in the north in Canada and see what they have created when they started down the path of trying to produce a substitute for the private sector health insurance models. We have over 1,300 health insurance companies in America. That's not policies. That's companies, and companies with multiple policies, Mr. Speaker. The President has this idea that we need one more competitor, one more injector of good ideas supposedly into this health care debate. I would submit that of all the people that have spent their lives creating good ways to provide a more competitive model of health insurance, the President's not going to think of a better idea than they came up with.

I think he proved himself here just a couple of days ago on the Cambridge issue. The President doesn't always come up with good ideas. Sometimes his ideas are not so good. But to look in on an industry and decide you want to create a government-competing industry so that you have more competition when you have more than 1,300 health insurance companies, there are only two things that can happen with this. That is, this circle on the chart and down at the bottom in the purple circle on the side that would be the left hand of those who are watching on television is the white square that shows all the traditional health insurance policies that are there. They have to flow into qualified policies. Qualified policies will be policies that will be qualified when the newly appointed health insurance czar decides what kind of rules to write for these private insurance companies, these 1,300 that will have to change their policies to conform with the new rules that will be written by a person yet to be named by the President of the United States. There will not be 1,300 that qualify. They all won't qualify. Some will decide, they can see the writing on the wall, they'll know what's happened, and they will just pull the plug—pull the pin, as we say, and drive away from the wagon they have and decide to get out of the business because they know the government's coming. The government's coming with your tax dollars, and the government is determined to build—this administration at least and the Democrat majority in this Congress—is determined to build a health insurance policy to compete with 1,300 private insurance policies, which means they're going to do two things in some combination. I could say one of two things. I think they'll do both things. The new health insurance czar, who is the guy in the blue box with the

yellow letters above the two purple circles dead center up about a third of the way. The new health insurance czar will write new rules. There will be compliance rules; and those rules will be things such as: They will mandate. They will mandate mental health coverage, which it is good to cover mental health. Some of the States have mandated it, and some have not. They will mandate mental health coverage. They will probably mandate contraceptive coverage. They will probably mandate anything that you can imagine; and additionally, they're going to mandate—they will not step away from this so we know they're going to mandate that this policy fund abortion in America. And they will trample over the top of more than 50 percent of Americans' deeply held convictions that life begins at the instant of conception, and that it is sacred in all of its forms. They're going to ram this policy at us all, and some of these companies will decide out of moral reasons that they are no longer going to be in business in a country that is going to compel abortion, for example, or compel mandates, for example. All of those mandates that are on there will drive the premiums up.

Now if the newly appointed Obama health insurance czar, which is the guy in that rectangular box in that schematic there, the blue box with the yellow letters on it, if he will write those regulations tough enough, a lot of companies will drop out, and the others will have to raise their premiums.

□ 2030

When they do all that, then the Federal Government can compete with their public plan that they want to have, just one entity out there to compete with the private sector. And they will be able to compete more easily and still be able to have premiums that are competitive for a time, and then when we find out that the competition is not working that way, they will subsidize the premiums in the public plan, and that will drive the private sector insurance companies.

And we know the model in Canada. They started out with a similar proposal. I actually think that's where President Obama got this idea. The Canadians don't have any competitive health insurance plan today. There are no two purple circles, one of them the public options, the collection of them, and the other is the private. They have one circle, one size fits all, and everybody has to submit to one health care system in Canada. And they have to stand in line, and the result is rationing.

And so, for example, if you're waiting for a knee replacement in Canada, the average wait is 340 days. When you're waiting for a hip replacement, the average wait in Canada is 196 days. If you're waiting for heart surgery, I'd like to think it's not as long a wait. But we know this: If people have to wait for health care, if they have to get in line for health care, they will die in line. Some will die in line. We've seen numbers that are pretty stark, and I'm going to hesitate on quoting them.

But I will tell you that a week ago Thursday night, we had a speaker in the Policy Committee that Mr. McCotter, who just spoke, from Michigan, chairs, and it was a doctor from Michigan who has practiced medicine on both sides of the border, in Michigan and in Canada. He told a story of going up there to work in the ER in the hospital in Canada, and they brought a patient in that had a knee that was all torn up, a torn meniscus and a torn ACL, anterior cruciate ligament. And so this knee was a mess. And the doctor examined the knee, did what tests he could within the ER, and he said, You need surgery. You need surgery right away. I'll schedule you for tomorrow morning.

Well, it must have been the doctor's first real foray up into Canadian medicine working within the system because he found out that he couldn't schedule the surgery the next morning. He had to schedule another exam and another approval from a doctor who was a specialist. And by the way, this doctor is a specialist.

And so he couldn't get him scheduled, not for that night or the following morning or the day after, which would be a real stretch in America. Can you imagine laying around in a hospital for a specialist to come along, your knee swollen up the size of a cantaloupe, and waiting for a doctor to show up 2 days? And I'd say, Mr. Speaker, no. We wouldn't wait 2 days for a doctor to show up to look at our leg. If he couldn't be there that night, he would be there the next day, probably in the morning.

And he would do the examination and they'd find a way to schedule the surgery, and they would do that surgery as quickly as they could because they care about recovery and quality of life and service and they want to make sure that you're not in an ambulance going to a hospital somewhere else telling them that you couldn't get in at so and so memorial hospital because there was a long line. They don't want that to happen.

But in Canada, in this patient, this real case that was related to us before the Policy Committee a week ago last Thursday night by a doctor from Michigan, it took 6 months for that young man with that torn-up knee to see the specialist to be diagnosed in order to be approved for surgery that this doctor would have liked to have seen done the next day.

And then 6 months later, they actually did the surgery. A knee torn up, a man who's in the productive time of his life, on crutches for 12 months waiting for surgery. And then we know that the leg atrophies and the recovery and the rehab gets to be longer.

So he was out, I think pretty close, I believe the doctor said 15 months he was off work, when they could have had him back to work in a couple or maybe even less if they could have just had the surgery right away. That's an example of Canadian health care.

And I recall reading through a stack of Collier's magazines from 1948 and 1949. These magazines were—they featured the United Kingdom's socialized medicine plan that they passed in 1948 in Britain. And there they showed pictures of long lines outside the clinics and doctors that were just frazzled that they had to see so many patients in order to hold their economics together. They didn't have time to be a doctor with a patient relationship. They just ran through them as fast as they could do so, and it just was wearing everybody down.

All the predictions, the things that we see today were even predicted then. They saw them. They were real in the first year of the socialized medicine plan in the United Kingdom. And here we are where we can't even call this government-run health care, government-run system. Well, who will be running this system if it's not the government? Who is poised to pass this legislation if it isn't the Democrat majority in the House of Representatives and the Democrat President in the White House? And it will take a Democrat majority in the United States Senate to pass this schematic that is in full technicolor today that takes away the American people's freedom to purchase their own health insurance policy and access to their own health care, all in the name of trying to provide for the people that are not insured and blurring, intentionally, the language between health insurance and health care.

If we had a billion dollars for every time somebody on this floor had blurred the language between health insurance and health care intentionally, I believe, Mr. Speaker, we would have enough money to fund this monstrosity. People are being confused, I believe, intentionally. I've seen this language unfold for at least 2 years now. People don't have health care. It gets said over and over again. Every American has access to health care. And we can have the argument about whether going to the emergency room is the right way to do it or not, and we know it's not the cheapest. But if they have access to health care, we should not tell the American people they do not. We need to tell them every American has access to health care. Not every American can afford their own health insurance policy.

But when you break the numbers down, we're around 306 million people, and if you start subtracting from that those that are in America that are here illegally, if—let's just say this great gift of automatic government health insurance had to be delivered to these illegals in this country by the Department of Homeland Security, they would be obligated to deport those people rather than reward them with a

government-owned and run health insurance plan. Subtract them from the 306 million.

Subtract those that are here legally that are immigrants. They're supposed to take care of themselves. We don't hand people entitlements when they come to the United States. That's by law. Subtract them. Subtract the people that make over $75,000 a year. They can find a way to take care of themselves. And if you subtract the people that are eligible for Medicaid but are not signed up—and by the way, Mr. Speaker, almost half of those eligible for Medicaid just aren't signed up. And I don't know why we would think that if we would just give everybody free access to health insurance that they will sign up. But you subtract the Medicaid people that are not signed up. Then you subtract the people that are eligible for an employee-run option but they don't sign up for one reason or another, and you get down to a study that is this.

One was by a pair of Penn State professors that does the math down to 10.1 million Americans are the chronically uninsured. And there's another study that one of our government agencies, I think it actually was CBO, but I'm not certain, 12 million uninsured. So, in any case, between 10.1 and 12 million Americans are chronically uninsured. That's the universe that we're supposedly trying to get to, about 10 to 12 million Americans. That maps out to be about 4 percent of this population, 4 percent of the population chronically uninsured.

And we know that the people that are, let's say, chronically not covered by Medicaid just simply don't show up. So why would we think that the chronically uninsured are any different type of personality or any different kind of person utilizing the health policies that we have.

So I will submit that even if we handed them a free policy, probably not more than half of the 4 percent that are chronically uninsured are going to sign up. The rest you'd have to chase them down and impose it on them. Staple the policy to their shirt collar on the chance they'd show up at the emergency room, in which case we're going to take care of them anyway. The administration cost of providing health insurance for the 4 percent of the chronically uninsured when you can't get probably half of them to actually sign up, so we get 2 percent of a population of 306 million people at the price of $1.5 trillion and a raising of taxes of $800 to $900 billion and a deficit of $239.1 billion, at the low side, and maybe a deficit of $500 to $600 billion on the up side.

I wonder if anybody wants to censor those numbers? I mean, I'm always open to that debate. But I found out that when I put numbers out here, some will say, You're wrong, Congressman. And I say, What's your number? And they don't have a number. If they don't have a number, they don't have any right to challenge my numbers. I'll put the numbers out here.

But this is about access to health care. This is about our freedoms. This is about whether 1,300 private health insurance companies in America can do a better job of providing the options that are suitable to the American people and the creativity and the research and development and the innovativeness and the modern health care system that sets the standards for the world. And the rest of the world, by the way, poaches on the innovativeness of the American health care system. We create more pharmaceuticals and more techniques and surgical techniques than anybody else by far. And they're available to the rest of the world for a really cheap price, if anything at all is charged. We set the standard. The Americans pay the price, and still they can't keep up with the results we have here in America.

I could go on, Mr. Speaker, but I think I have made my point, and I thank the gentleman from Texas for bringing this up. And I'll just say this. Can I say this like a Texan, Judge? This is our chart. KEVIN BRADY of Texas put that chart up. It is accurate. It shows 31 government agencies, new ones. It is accurate and it shall stand. It shall not come down. And like that first flag down in Texas with that cannon on it, if they think that this should not be something for the public to see, they can come and take it.

Thank you, Judge. I yield back.

Mr. CARTER. I thank my friend for reminding us of Texas history. In reading over the list of people that have had the Franking Commission censor their language, I failed to mention Congressman SPENCER BACHUS, who's the ranking member of the Financial Services Committee and has had just horrendous hard times this year with all the issues of bailouts and all the things that are going on in the financial service industry. He submitted the term ''government-run health care.'' This is his exact sentence. ''Government-run health care system proposed by President Obama and his liberal allies in Congress.'' They would not allow him to say that.

He was also told during the cap-and-trade—we say cap-and-tax bill, which is our description of the bill, they would not let him use the term ''cap-and-tax'' and wanted it to be climate bill. He also had his language censored. One of my colleagues made the point, said, When people start censoring your language and telling you what to say, I think that most people in America start saying, Why are you doing that? We've got free speech in this country. Those are my elected representatives. They have the right to express their opinion. Why are you not letting them have that right to express their opinion? Why can't they call something a government-run health care that you want to call a public option plan? That ought to be part of the debate. I think the American people would ask that question.

I would also think they would ask the question about this chart, Why are you wanting to hide this? What's there to hide? If it creates those agencies, then it creates them. And we have asked and asked and asked to point out what agency that it says, and it's the colored agencies that are being created that aren't in the bill, and no one has yet pointed out one that's not in the bill.

So why can't we show it to people? Why would a branch of this House tell Members of this House what they can and can't say to the people that elected them to come up here and speak on their behalf?

□ 2045

I think we should be concerned about this. I think Americans should be worried. If they start telling us what we can say, when are they going to start telling you what you can say? You know, if we let it go, we are just as guilty as those who have let tyranny go in the past.

We, as Americans, fought a revolution to be able to set down in black and white, on paper, our God-given rights, and that's what our Constitution says. Man is endowed with these rights by his creator, certain unalienable rights, and we define those rights by setting them down in black and white in amendments to the Constitution.

In the first sentence of the First Amendment, it says that this House—this body, this government—shall not infringe on the right of free speech. I mean, it is a direct directive to this government. That means the House of Representatives of the Congress cannot interfere with the freedom of speech in this country. The Senate cannot interfere, and the executive branch, the President, and any of the agencies cannot impose upon the right of free speech in America. Yet a body created to decide how stamps are going to be spent is now telling us what we can and cannot say to the people who sent us up here.

I don't think I'm blowing this out of proportion. I don't think I was when Mr. BRADY was told he could not publish this initially, in any form or fashion, until it was discovered that the Internet—you know, the Internet is a great protector of American freedom because the average American can make a copy of this, and he can send it to the world on the Internet. The Franking Commission can talk all they want to. It's already out there. If you had something to hide, the fact that you had something to hide will also be out there all over the world.

We feel like we have a duty and a responsibility to talk to and to communicate with the people who sent us up here to represent them. The majority party has every right, the Democrats have every right, to express their opinions on bills, to say what they think they say. We can say what we think they say, and we can describe them as we want to describe them. That's what

this House is all about. We like to say this is the greatest experiment of democracy in history, the greatest experiment of self-government in history. Well, it can't be if somebody is curtailing the voice of even one of the Members of this body, if somebody is telling one Member that he can't do it.

Now, if this chart were written and if every third word said, ''Elect Candidate BRADY to Congress,'' the Franking Commission would have every right to do this because that would be using government money for one's own purposes toward being elected to Congress. If it said, ''Elect only Republicans to Congress,'' I agree that the Franking Commission would have every right to say that because, quite frankly, that's why they're there, to keep us from using government money for political purposes.

Yet, when you're expressing your opinion and when you go to the trouble of using four researchers to dig through and to find out every agency that has been created in the new health care plan that is being proposed by this Congress and at the instruction of this President, Mr. Obama, and if these things are created, why can't you tell people about them?

If I want to describe the Federal Government's public health care plan as a government-run health care plan and if I choose to describe it that way because the government is going to run it, I mean, this isn't rocket science. The government is going to run it. In fact, a whole lot of these agencies are established to help them run it.

If I want to describe it that way, I've got a constitutional right to do that, and no colleague in this House and no organization set up by this House has the right to curtail the freedom of Americans, especially the Representatives of Americans, to speak their minds.

It may be a little thing, but do you know what? It just takes one drop of water, and eventually the bucket is full and then the barrel is full, and then the lake is full.

I didn't count these names, but I can count them. There's this list right here. Let's see, twenty-four Members of this House have had their language censored and their communications stopped because of something that they said, like ''government-run health care'' or like using the term ''Democrat majority'' in the newsletter. If this is going to happen—if you're going to tell people you can't state that the bill imposes taxes when it does impose taxes, if you're being told you can't send the letter out and that you can't communicate—I don't think you can define it any other way than as curtailing the freedom of speech in the United States. That's what's going on.

I've talked in the past about the fact that, a while back, in the middle of these Special Orders when we've been talking about the rule of law and about other things, Congress has just adjourned. We have a 3-day reading rule proposed by Thomas Jefferson that has been set as the standard for this House of Representatives since the beloved Thomas Jefferson, the patron saint of the Democratic Party. Yet the 3-day rule promised by the Speaker, promised by the President and established by Thomas Jefferson hasn't applied to a single one of these bills we've had thus far, not to one, not to one of these major bills starting clear back in the fall. Not one of them has given us 3 days to read them.

Yet if you'll remember, JOHN BOEHNER dropped one that was about that tall—3,000 pages. He dropped it on the floor to show that we'd had 8 hours to look at it.

Now, I guess it's one of these things where, if you don't step up and speak now on the little things, like making you change your language or like telling you you can't mail your letter, then at some point in time, somebody is going to tell you, I'm sorry, Congressman, your opinion is not wanted here on this floor of the House. Sit down. You can't talk at all, or I'm sorry, that party's opinion is not wanted, and you can't talk at all, or whatever, or maybe, Your opinion is not wanted, and you can't express it at all.

That's not America. That's not the America that we created. That's not the America we are proud of. That's not the America we honor when we salute the flag and when we sing patriotic songs. That's not the America that we want.

We were talking about the national health care plan. I really haven't gone into the merits of it. I think my colleague did a very good job of going into the merits of it. I am so concerned about the fact that they're censoring. All I said was ''government-run,'' and it's like I committed a crime. What in the world would have happened if I'd started really saying what I thought about it?

I did see something on television yesterday on PBS. It was on Winston Churchill. He was kicked out of office in 1946, '47 or '48, something like that, by the Labor Party in England. He was reelected, I believe, in 1950, but don't hold me to those dates. They showed him making a speech. I won't quote it exactly, but it was close.

He said, 2 years ago, we thought socialism was the solution to all of our problems. Today, we know that it's not, and, in fact, it has failed miserably.

However, they passed socialized medicine in 1948, and even though Mr. Churchill came in in 1950 and said that socialism had failed, that was almost 60 years ago, they've still got socialized medicine. It failed then and it's failing now. Ronald Reagan said the hardest, closest thing to eternal life on the face of the Earth is a government program. Once it's created, you never get rid of it.

So, as to the government-run health care plan, once it becomes law—that's why they're in such a hurry to do it this week. We don't have any time. The sky is falling. We can't wait 30 more days to discuss this problem that's going to change America as we know it, that's going to completely change the way we do health care as we know it. We can't have just 30 more days to talk about it back home with our constituents. We can't kick this ball down the road.

We've got to do it when it really came to the center portion of this House 2 weeks ago. Most of the committees that reported it out reported it out last week. We've been told if we don't do it by Friday, we'll keep you Saturday and Sunday. If you don't do it Saturday and Sunday, we'll keep you next week or the week after, but you're going to do it before you go home for the August recess.

That's fine. I stood up here most of last August, talking in a dark Chamber because they turned off the lights and wouldn't let us talk, so we just talked in the dark. So I don't mind. I'll stay up here the whole August recess if that's what's supposed to happen. They're trying to hurry because the closest thing to eternal life seen on this Earth is a government program, and once these government programs are in place, you'll never get rid of them. That is the consequence of being in a hurry.

I'll just point out that we got in a hurry on TARP, that we got in a hurry on Fannie Mae and Freddie Mac, and that we got in a hurry on the stimulus bill. We got in a hurry on cap-and-trade. We've been in a hurry on everything we've done this year, and I think everybody is seeing the results of not thinking things out and of not doing what we're supposed to be doing.

I love it when somebody says we're the greatest deliberative body on Earth. Then let's deliberate. You know, I've had juries deliberate longer on an issue than we're dealing with on health care for America. I mean, I had a jury deliberate for 2 weeks. We're in the second week this week, and not one committee has marked up and reported out a bill yet. The biggest committee and arguably the most important committee, Energy and Commerce, has not sent us a completed bill. Yet we are expected to finish it this week.

I had a jury deliberate, I believe it was 2 and maybe 3 weeks, close to 21 days, on a water tank and on a water system in Taylor, Texas. So this has got to be a little more critical to the American people than that.

It's about freedom. It's about liberty. It's about your liberty and my liberty to rely upon. The Bill of Rights and the First Amendment of the Bill of Rights says that this Congress shall not impose upon freedom of speech in America.

I thank the Speaker for his time. I yield back the balance of my time.

CONGRESSIONAL BLACK CAUCUS: HEALTH CARE

The SPEAKER pro tempore. Under the Speaker's announced policy of January 6, 2009, the gentlewoman from Ohio (Ms. FUDGE) is recognized for 60 minutes as the designee of the majority leader.

GENERAL LEAVE

Ms. FUDGE. Mr. Speaker, I ask unanimous consent that all Members be given 5 days to revise and extend their remarks on the subject of this Special Order.

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

There was no objection.

Ms. FUDGE. Mr. Speaker, I would like to just set the record straight. I've listened to my colleagues from across the aisle, and I do want to make clear to the American people that, if you have health insurance now and you want to keep it, you can. You don't need to change.

I also want to say to the American people that this plan is, one, about choice. It's not about government-run anything. It's about choice. It's about making sure that we spend more time worrying about the people than we do about the insurance companies. So I just want to make sure that people understand.

I'm very curious to understand and to know what my colleague meant when he kept saying ''they,'' ''they,'' ''they.'' I don't know if he was talking about retirees or about the working poor or if he was talking about minorities or if he was talking about people who have been laid off or about people who have lost their jobs because their companies have closed. I don't know who ''they'' is, but certainly, at some point, I'd like to know who that is.

Now to my remarks, Mr. Speaker.

The Congressional Black Caucus, the CBC, is proud to present this hour on health care. The CBC is chaired by the honorable BARBARA LEE from the Ninth Congressional District of California. I am Representative MARCIA L. FUDGE from the 11th Congressional District of Ohio. I am the anchor of this CBC hour.

The vision of the Founding Fathers of the Congressional Black Caucus to promote the public welfare through legislation, designed to meet the needs of millions of neglected citizens continues to be a focal point for the legislative work and for the political activities of the Congressional Black Caucus today.

□ 2100

Tonight, the CBC will focus its attention on health care reform. I am proud to serve on one of the three House committees that authored H.R. 3200, the America's Affordable Health Choices Act of 2009.

The public health insurance option—also known as the Public Plan—is an essential part of H.R. 3200. The Public Plan is an innovative tool that will move America's health insurance system beyond the status quo and into a system that provides choices and forces private insurance companies to compete. Competition guarantees that all Americans will be able to access quality coverage while preserving what works in today's system and expanding choices and containing costs.

Some argue there is no need for a public plan, as did our colleagues on the other side of the aisle. Others say that a public plan will put private insurance companies out of business. I say this: Today's health insurance companies are operating in a manner that is making health coverage increasingly out of reach for the average American. Premiums are soaring higher and higher, and health insurance choices are becoming fewer and fewer.

For example, in my home State of Ohio, since 2000, the average family premiums have increased by 92 percent, that's 9–2, 92 percent. When faced with such an increase, you would think that Ohioans would have a number of choices and could decide to move to another insurer that offers a more competitive premium.

Well, it's not that easy, Mr. Speaker, because the choice of insurance companies is severely limited in the State of Ohio and across America.

In Ohio, the top two insurance providers controlled 61 percent of the health care market in 2008. In fact, 94 percent of the metropolitan areas in the United States are highly concentrated, meaning that one insurance company or a small group of insurance companies dominate the majority of the market.

And the problem is even worse for small businesses. In Ohio, the top 5 insurers control 85 percent of the market that provides health insurance to small businesses. This is what we call a consolidated health insurance market. There is no real competition. So the companies that are monopolizing the market are setting the prices and the standards that have led to more than 1 million uninsured Ohioans and 46 million uninsured Americans.

A public plan will be one of several options within H.R. 3200, the new health exchange that it will provide that is needed to reform our health insurance market.

As I mentioned earlier, H.R. 3200's public plan offers competition. Currently, our health insurance system is inefficient and expensive. Without competition, private insurers have no incentive to improve. By forcing market reforms in the area of administrative costs and through better delivery of services, the public plan will serve as a real competition and set the standard by which other insurers are measured.

The public plan will operate as a guaranteed backup that will ensure everyone that everyone has access to affordable health care no matter what happens. A public plan will give millions of hardworking families peace of mind. Both the public plan and competing private plans will offer a standard benefit package that covers essential health services such as inpatient and outpatient hospital care and maternity and mental health services. The package will also offer preventative services like Well Baby and Well Child Care and screenings for diseases like diabetes and hypertension.

Preventative care is a benefit that is important to cutting the cost of health care. Providing preventative care will allow us finally to spend less by keeping healthy people healthy, instead of waiting until someone is very ill and then providing more costly treatment.

Under the standard benefit package, patients will no longer pay for preventative services, and the annual dollar amount spent on health care by consumers will be limited to $5,000 for an individual and to $10,000 for a family. Therefore, no one should ever again face bankruptcy from health care costs.

The private insurance market must be reformed. We cannot afford to do nothing. $100 billion of America's $2.5 trillion in health care spending goes to the cost of administering private insurance. Projections have shown that it is possible to save more than $3 billion in 2009 alone and $40 billion over 10 years simply by reducing administrative spending in health care.

The status quo is unacceptable, Mr. Speaker. Things will only get worse if we continue to let private insurance companies set the standards. Every American risks losing their health insurance and/or seeing their costs skyrocket without action. Families will continue to spend a disproportionately large amount of money on health care expenses.

The cost of an employer-sponsored family health insurance plan will reach $24,000 in the year 2016, an increase of 84 percent if we do nothing to fix our broken system. American businesses will continue to fall behind. Employers' spending on health care premiums will more than double to $885 billion in the year 2019. And one in five employers will stop offering health benefits altogether because of rising costs in the next 3 to 5 years.

Further, our government will not be able to keep up with the rising cost of health insurance. As Americans lose their private insurance, many will be added to the already strained government programs. Combined with the rising cost of care, spending on Medicare and Medicaid will double from $720 billion in 2009 to $1.4 trillion in 2019.

It is time to level the playing field with the public plan.

The public plan will be required to meet the same benefit requirements and comply with the same insurance reforms as private plans. Individuals and families will qualify for financial assistance in purchasing health insurance and will have the option to choose among the private carriers and the public plan.

Today's health insurance companies can either be more efficient and provide the coverage that Americans need

or make way for the insurers that will agree to be responsive to the financial and health care needs of millions of Americans.

In closing, I would like to highlight two important pieces of health reform legislation. The first, to address the needs of the poor and those with low incomes, I recently introduced the Health Information Technology Public Utility Act of 2009 to facilitate nationwide adoption of electronic health records, particularly among America's free clinics. Although health care IT funding was included in the American Recovery and Reinvestment Act of 2009, America's free clinics are not eligible for funding under the Act. This piece of legislation has also been introduced in the Senate by Senator JOHN ROCKEFELLER, a Democrat from West Virginia.

Lastly, recognizing the health care needs of our Nation's underserved populations, the CBC introduced the Health Equity and Accountability Act of 2009 under the leadership of delegate DONNA CHRISTENSEN. Along with other CBC Members, I urge our colleagues to include this legislation in the America's Affordable Health Choices Act of 2009.

With that, Mr. Speaker, I would now like to yield to the distinguished Member from the Virgin Islands, my friend and colleague and an expert in health care reform, Representative CHRISTENSEN.

Mrs. CHRISTENSEN. Thank you, Congresswoman FUDGE. Thank you for yielding. Thank you for being so steadfast in anchoring this special order every Monday night. I know many times I have wanted to join you and have not been able to be here and to support you in it, but you have managed to keep it going and to provide good information on many, many topics to the people who are listening across America.

I also want to thank you for your very clear explanation of what the public plan really is. We've heard a lot of misinformation about that public plan, as Congresswoman FUDGE says, one of many plans that will be in the exchange that will offer choice. And it is not a single-payer, it's nothing like the Canadian plan—not to disparage the Canadian plan; I think they have a good system—but ours will not be that. It will be an exchange where you, the American public, will have choices and can choose a public plan or a private plan. So thank you for making that clear.

And as we meet, Mr. Speaker, the Democratic Caucus is probably finishing up downstairs discussing the health care reform, America's Affordable Health Choices Act, going through it section by section; and there is nothing about abortion in it. There have been many complaints about the bill, and some of them are rather weak and just plain wrong. Some people complain that they don't know what's in the 1,000-page bill. Well, the basic outline of that bill has been available for almost 4 weeks now, and the bill itself for over a week. I think that has given enough time for everyone and their staff to have the opportunity to read the bill if they wanted to. And as important as that bill is, I hope everyone has taken the time to read it.

Other complaints are of regional disparities in Medicare and Medicaid reimbursement. They've been a big issue for us. It's one that may now be solved satisfactorily—at least on the regional level—and poor and minority communities, which have also had historically disparate and low reimbursement rates, will also see that fixed in H.R. 3200.

But no one has more of a disparity than the people that I represent and those in the other territories who are not getting equal treatment in Medicare or Medicaid and who, as of now, are not even in the insurance exchange. And yet, despite all of that, because of the overall good this bill will do for us in the territories and our fellow Americans, I fully support this bill.

I want to also address some of the myths that are out there. No bill is perfect. Especially not one that has to do as much as this will have to do to fix the longstanding systemic malfunctioning of our health care system.

But what we have produced after many meetings, many preliminary hearings, followed up by a week of daylong hearings where over 50 people and organizations testified, it's a good bill. And we can get it out of the Energy and Commerce Committee this week. If we can do that, we're not going to bring it to the floor and keep everyone in here, but we would like to get it through this week so that when we go home, we'll have time to read the final product, discuss it with our constituents at home, and come back prepared to pass it when we return in September.

But I firmly believe that we have to keep moving forward. If we don't, it won't be a President Obama loss or Speaker PELOSI loss or even a Democratic Party or Caucus loss. It will be a serious loss of the American people, especially to the more than 46 million who are uninsured and the millions more who are underinsured or intermittently insured. As well, it will be a loss to the poor, rural, and minority communities in our country.

Too many of the under- and uninsured are people of color, so this is an important issue for the Congressional Black Caucus. That's why we've devoted four or more of our special order times here on the floor of the House to this issue and to urging support and passage of the health care reform bill in the House. It's why we met with Speaker PELOSI last week, why we're going to sit down with the President, and why we've written or discussed our concerns with chairmen and ranking members of the relevant committees in the House and the Senate. In many of our efforts, we are joined with the Congressional Hispanic Caucus and the Congressional Asian and Pacific Islander Caucus as a Tri-caucus in support of this bill.

To go back to some of the gross misrepresentations and to explain the real provisions of the bill, let me say that one erroneous criticism that's often heard is that this bill will put Washington bureaucrats in between the patient and the doctor or other health care provider. Nowhere is there anything in this bill that would do that.

□ 2115

Yes, your Members of Congress, the Democratic Members of Congress, want to include a public plan. Yes, we want to ensure that every insurance provides a comprehensive, basic package of services, that they must accept you for coverage, that they do not exclude you if you have a preexisting disease, that they cannot drop you if you get sick, and cannot put a limit on how much they will pay over a year or over your lifetime.

What we in Washington want to do in this bill, and will do when we pass it, is to make sure that there is no obstacle between you and your doctor. And yes, we want everyone to be able to get the important preventive care without having to pay for it. We want you to be the healthiest you can be. And again, we are taking down important barriers that stand in the way of your getting the health care you need.

Preventive care, such as mammography, colonoscopy, immunizations, and others, will cost you nothing. And we insist that if you have insurance or a provider you like, as Congresswoman FUDGE said, you can stay with those, you can keep that provider and that insurance carrier. We do not put government between you and your doctor.

Many of you either have or work for a small business. You are the target of much of the fear-mongering that is out there. Rather than raise taxes on small businesses, as the opponents of your getting your health care would have you believe, this bill makes it easier for small businesses to provide or continue to provide insurance because of the exchange, because of the public plan and the tax credit that they will get if they provide insurance for their workers. And smaller businesses which aren't able to pay high salaries or have less employees will be exempted from having to provide that insurance, but their employees will have access to the exchange and be able to have their insurance premiums subsidized so that it won't take a big chunk out of your already stretched salary.

Some of you, like many in my district who are Medicare or Medicaid beneficiaries, have difficulty finding a doctor or provider who will give you the services that you need. Some of you live in communities which don't have a hospital and have to travel many miles to one because the one that was there was not able to keep its doors open because of low reimbursement rates in your community. The

House health care reform bill, H.R. 3200, will increase reimbursements. Many of our congressional districts lose over $100 million every year in uncompensated care, and that compromises the ability to get the quality of care you need and deserve.

First of all, with this bill, your local hospital will be able to survive, maybe even return, because when it is passed, they will be paid for every patient that they take care of.

Secondly, Medicare will pay more, especially to primary care providers and those providers who come together to make sure that your care is better managed and more complete in groups called accountability care organizations or medical homes. And if the community you live in can demonstrate that they not only provide good care but improve your health, the reimbursement will also be increased.

So this legislation that we want to see passed will not only increase payment to help make sure the providers you need are there in your communities, but those providers will be supported and encouraged to take the time needed to listen to you and to coordinate your care to ensure that you will be healthier. This is a real win-win.

Those of us who become health care providers choose this life of service to help individuals and communities have a better quality of life and help individuals live long enough and well enough to see and enjoy their grandchildren. The new payment structure and the eliminated copayments for preventive care will help us to do what we went into our professions to do in the first place.

And then, as we have always said, for those who have not had the ability to be fully a part or fully utilize the health care system for many reasons, just providing insurance, as important as that is, is not enough. And for African Americans and other people of color who are the most disenfranchised in the current system of health care delivery, the additional services and support are critical if we are ever to close the health gaps that cause us to die prematurely from preventable causes, that causes our life expectancy to be 7 to 8 years shorter than other Americans, and that causes over 86,000 excess deaths that should never have happened every year in this rich country.

And so the bill includes a major expansion of community health centers, more National Health Service Corps scholarships to help more of our young people enter the health profession, more loan forgiveness, especially for those who are going to be a primary care provider, the main doctor or nurse practitioner you see to get and manage your health care.

There will be funding to help more students better prepare for medicine, for nursing, for pharmacy, allied health and other health professions, and support for institutions that train underrepresented minorities. This is important because, although there is a need for many more primary care providers, it is just as critical that they come from all communities, including communities of color, which make up more than 30 percent of our population.

The Congressional Black Caucus has always taken the position also that communities know best what they need, and the way to ensure that when health information and care is provided, it is done in a way that will be understood, accepted, and effective. We have, therefore, been able to have community-based and -driven programs included in the bill.

These provisions are patterned after our health empowerment zones, which provide the technical assistance and funding to enable communities to not only meet their specific health care needs with respect to specific diseases, but to also be able to address the social and economic determinants of our health: housing, economic opportunities, safety, the environment, nutrition, and others.

Also included are provisions to ensure that data is collected which includes race, ethnicity language, and other socioeconomic factors, and also provisions that provide that language differences would not be a barrier to getting health care.

This bill, H.R. 3200, America's Affordable Health Choices Act, must pass and must not be allowed to be derailed by any group or industry that does not have our best interests at heart. The basis of the opposition has nothing to do with better health for all of us who live in this country. We recognize, as the gentleman said, this effort is about change, and change is what the people in this country voted for. It is about major change, which is always difficult. But this is change that must happen, and it must happen now.

Sure, there will be losses to some in the interest of providing more to everyone to ensure that the benefits of this country will be more fairly shared; that is a basic tenet on which this country was founded, and in no place is this more important than in our health.

This country has the best and most advanced health care services, expertise, and technology, but because so many are not able to access it, we lag behind the rest of the industrialized world in life expectancy, maternal and infant mortality, and health in general. Closing the insurance gap, as well as the racial and ethnic minority gaps, will make this country the true leader in health that we ought to be.

So my plea to those who are listening outside of the beltway is do not let the misinformation and the self-serving propaganda steer you wrong and away from supporting this important legislation that many of the best minds in this country have guided to ensure that your right to health care will be protected and delivered.

This bill is important to the African American community. It is important to the Native American community and all communities of color. It is important to rural areas, And it is important to every American. With your help and support, it can also provide more equity to your fellow Americans in the U.S. territories.

Passing H.R. 3200 is important to all of us, our families, and our communities. We cannot lose this great opportunity that President Barack Obama has worked so hard to bring this far. As he has said to us, it is not if we can afford this bill or if we can afford health care reform, the real issue is we cannot afford not to do it.

Covering everyone, providing increased access to preventive care and disease management, will surely reduce health care spending because prevention saves. But most importantly, it will improve and save lives. So I join my Congressional Black Caucus colleagues in saying, let's pass this bill. Let's get it out of the Energy and Commerce Committee. Let's give the American public a bill before we leave for our recess, and then let's come back in September and pass it and provide quality health care to every American.

I yield back the balance of my time.

Ms. FUDGE. Thank you very much. Let me just, again, thank my colleague, Dr. CHRISTENSEN.

I just have to say that there are so many of us in this House who look to you not just because you are a physician, but certainly because you have studied health care for many, many years and have advocated for reform. And we thank you for your work and certainly want to support your efforts in making sure that this gets done the way that it should.

We have now been joined by our colleague and friend from the great State of Texas. I would now like to, Mr. Speaker, yield to the Honorable SHEILA JACKSON-LEE, the gentlelady from Texas.

Ms. JACKSON-LEE of Texas. Let me thank the gentlelady from Ohio. And I appreciate her anchoring this Special Order in order to pursue a very important discussion on the leadership of the Congressional Black Caucus and the Health Task Force, along with the work of so many of our Members who are on the jurisdictional committees, and also, as I indicated earlier, the importance of the CBC Health Task Force, of which I have served on for a number of years.

I, too, want to add my appreciation to that task force, to the chairwoman of the Congressional Black Caucus, Congresswoman BARBARA LEE, and as well the chairperson of the Health Care Task Force and Health Reform Task Force, Dr. DONNA CHRISTENSEN, who was just on the floor, thanking her for leading us through the years. I have worked with her through the years as we were able to get the CHIPs program and a number of other steps toward complete health care reform, and I am glad to have been able to do so.

I have an idea, and we have entered into some discussions, to add to the

TriCaucus, which includes the Hispanic Caucus and the Asian Pacific Caucus, the Progressive Caucus, for which I serve as the vice Chair. I am also part of the Progressive Caucus negotiating team on health care reform, and we have done that. We have found that we have had now maybe a quadruple caucus that has overlapping issues equaling more than 100-plus Members, maybe upwards of 200 Members who have a common goal dealing with health disparities as well as dealing with the question of public option.

So I would like to, just for a moment, Congresswoman FUDGE, go through some of the important issues.

I think we should reestablish the fact that there are 47 million uninsured Americans. Many people want to break that down. There are people who don't want insurance. There are others who have other problems. Why don't we just say that we have 47 million uninsured who have not been given any other option, so they are uninsured? And who knows, if they were presented a plan that addressed their needs within a reasonable cost, small businesses included, which of course hire or are, in fact, the employers, small businesses, of upwards of 50 million-plus individuals—I think the number is larger than that. If we gave small businesses, if we gave the uninsured—because many of the people are working, they are in small businesses, they are uninsured; not because they don't want that opportunity, but because they have invested every single cent that they have in that small business, and many of the small businesses are sole proprietors.

I believe the work that the Congressional Black Caucus and this quadruple caucus conglomeration, along with our caucus, really is emphasizing how we expand these various aspects of ensuring that Americans get insurance.

Now, you could point to the fact that maybe one poll would not be accurate, maybe two polls, but we have four polls here that say that people want a public health insurance option. And the interesting thing is, as this is a very strong element of the Congressional Black Caucus, is that the public option has three elements to it: It has the basic plan, the premium plan, and the premium plus. It means that this is not a second-class plan. And I think most Americans realize—the highest number is the NBC WSI poll, 76 percent; CBS poll, 72 percent. The EBRI poll, which speaks about the public option having 83 percent of the support of the American people because they know that we are not constructing a second-class plan. We are constructing a plan that will give the option for so many different people to be engaged.

In addition, one of the emphases that we have had is this question of reducing health disparities. This is enormously important. And included in that, we have the Secretary of HHS is required to conduct a study that examines the extent to which Medicare providers utilize or make available information on various aspects of disparities, which I think is very important.

This legislation also provides for promoting primary care, mental health services, and coordinated care, key elements. We all know that we passed the mental health disparities bill. This keeps that in place, but it also has provisions to promote and support the increased primary care physicians, which means that we are trying to get people to the doctor before they are, in essence, ready to be admitted to a hospital. This is a very important aspect of preventative care. You come for a checkup, not come to be admitted to the hospital. And this is an element of that.

And one of the disappointments I had is that the Congressional Budget Office, which is only language that people inside the beltway understand, called the CBO—in headlines across America you hear the term ''CBO''—has not given us a real figure for how much money we will save by upping the amount of preventative care. And I think that is key and something that the members of the TriCaucus, and now with the addition of the Progressive Caucus, have in fact supported emphasizing.

□ 2130

I want to go to the question of this economy. We inherited this economy, and I think it's important to own up to the facts. Some people may argue that this administration has been overly busy, has done a mountain of legislative initiatives. What more are they going to do?

Well, the facts are that our economy was crumbling when this President took office. The bailout structure was already in place. The TARP moneys were already in place. The automobile industry was already collapsing. And we simply had to come in as the Red Cross, as the Boy Scouts and the Girl Scouts and try to make our camp better than we found it. That's what we are doing here today.

And part of the work that is being done by this number of caucuses, including the Congressional Black Caucus, with the emphasis on preventative care and the public option will do this: the program will ensure early and periodic screening, diagnosis, and treatment; case management for chronic diseases; dental and mental health services; and even language access services. So we are getting ahead of the problem. We are diagnosing what the problem is. These percentages show that the American people understand where we are trying to go.

And I just want to add this, as I talk about the President and his whole concern on this question of the economy, to make mention of the fact that the economy generates unemployment. In my district I hosted this past Saturday a Federal job fair because I believe that since we know that there are about 600,000 Federal jobs, we need to break outside the beltway and get out in America and tell Americans what options there are for public service first and, two, to work for the United States Government.

We had an organized effort, a very open facility that had free parking. But we were expecting about a thousand to come. Over 3,000 Houstonians came in the heat of the day to be able to access U.S. Federal jobs. I would guesstimate that the large percentage of those who came do not have health care. And that's why we are here on the floor today. Unemployment equals not having health care for yourself or for your family. Many of those were long-term workers, some of those were recent graduates, and some of those were people who had been chronically unemployed for a period of time through no fault of their own.

But they came because they want to work, but they have no health insurance. What we are doing now is on the basis of responding to that need.

And let me tell you a component of this health reform that I believe we need to work a little harder on, and that is to recognize the value of what we call physician-owned hospitals. In a recent meeting, a Member got up and explained in the far reaches of New England how physician-owned hospitals are crucial in instances where there are no hospitals for miles and miles around and particularly where there is no other competition.

As we stand today, physician-owned hospitals under the current health reform bill, 104 physician-owned hospitals underdeveloped, 42 of which are scheduled to come online by the 2010, would have to be shut down. We have a simple fix. It's to change the date which these hospitals will be grandfathered in to the date of enactment of this bill.

And what that would mean is that you would keep 104 hospitals which are at risk right now, 20,000 new jobs would be lost in 21 States and over 40 hospitals in my own home State as well. At least $5 billion in current investments will be lost. It will also affect hospitals that were built to serve working men and women with little or no insurance. This is not a partisan issue. This is about providing more care through the physician-owned hospitals. And as well, it would highlight the work that physicians do to maintain health care, because if they are invested, they are obviously concerned about their work product.

As an example, I just want to cite St. Joseph Medical Center. In August 2006, over 80 medical staff members out of 500 elected to purchase a stake in the hospital to keep it from closing. Because of this partnership, St. Joseph Medical Center remains today as a viable institution caring for hundreds of thousands of patients each year through the various services of this general acute care inner-city hospital with an emergency room, the only downtown hospital with 4 million workers in that surrounding area.

Nearly 5,000 new Houstonians are born annually at this hospital, the first maternity hospital in Houston.

So as we look to ensure that we have value in our health care reform, I believe that we are going in the right direction. I believe we should do this now. But as we do so, let us not leave out institutions that have been very helpful in the past and let us look to our physicians who have both the management aspect of a hospital and really the caring part of it, the nurturing, the medical aspect of it, what a wonderful partnership, and not close those hospitals in 21 States because we have an arbitrary date of January 1, 2009.

It is, of course, something I think can be resolved just as I believe that we can resolve the issue dealing with home health care. More and more of us of all economic levels are finding it more fiscally responsible to have our care at home. Whether you are ethnic, African Americans, Hispanics, or Asian, or whether you are in the majority, these are resources that can provide the kind of comfort of care at home. Let us not undermine the home health care. Let us make it more fiscally responsible. Let us make it more efficient. But let us not undermine it.

Let me conclude my remarks by making sure we emphasize, as I move this chart, that people want a public health insurance option. Don't let any media or any advertising that is bias that is going to tell you that this is going to take away your own private health insurance, that it is going to be second class or third class. The American people know what they want. They understand that the public option will have to be competitive.

Be reminded in 1965, prior to that we did not have Medicare, and we saw the mortality rates, the passing away of Americans at a younger age over and over again. If you take the statistics of what age you passed that before 1965 because of poor medical care, you see the distinctive difference in today where we have centenarians, those who are living past 100 years, those who are in their 80s, and might I say they are living well because they have Medicare. The American people understand that.

But as I close, I think it is important to note that when we look to our friends who are on the other side of the aisle or trying to oppose working together in a collaborative way, it says the organizational chart of the House Republican health plan, and it's very colorful, but it is full of questions because we don't know what the plan is.

We do have to make sacrifices. We have to make sacrifices to work together on preserving physician-owned hospitals. It's not just St. Joseph Charity Hospital in Houston, Texas, in the inner-city with 1,800 full-time jobs that adds to the economy, paying millions of dollars in taxes, providing $40 million of uncompensated care each year. It says Sisters of Charity, $40 million in uncompensated care. That means that's what they give to the indigent. This is a chart that says nothing will happen.

I believe it is important for the efforts to be made in collaboration with the Congressional Black Caucus, which really was out front on this question of inequities in health care, the disparities in health care. We have a decade-long history on working on disparities in health care, and it is economic disparities as well. It means people who have less means are not getting access to good, quality health care.

I don't know what the answer is with this plan. It's all questions. I don't know what the answer is to preexisting disease. I don't know what the answer is to home health care. I don't know what the answer is to providing a huge segment of preventative care or producing more primary care doctors or nurse practitioners. I don't know what the answer is here.

But we in the Congressional Black Caucus want to make sure that we move this legislation forward, that we have an opportunity to make people whole, and that we look on the fact that any State that is looked upon such as Texas as not being vulnerable to unemployment, that we are supposed to be the shining example of not having problems, then you can imagine what is happening across America. People are unemployed. We know that we are going down in the economy before we go up. The stimulus is going to work, but we must have a public option plan that America wants, and we must have it now.

I want to thank the gentlewoman from Ohio for allowing me to participate and to be able to emphasize the importance of moving forward on this health care reform with viable changes that will make it better for all Americans and particularly to thank the Congressional Black Caucus for starting out 10 years ago on this question of disparities, this question of access to health care, and this question of recognizing the need for 47 million uninsured Americans to cease and desist.

And might I say the American people are wise because they know if we do not do it today, it will be 47 million, 57 million, 67 million, maybe upwards of 100 million who will not be insured and not have the ability to take advantage of good health. That is what this Special Order is about.

I thank the gentlewoman for yielding.

Ms. FUDGE. Mr. Speaker, I just want to again thank Representative JACKSON-LEE. She is always well prepared. She understands the issues, and she talks very clearly to the American people.

So I thank you again for participating.

I now yield to our colleague, the gentlewoman from California, who this, I think, may be her first time joining us in the last couple of months, Representative DIANE WATSON; and we are looking forward to her remarks.

Ms. WATSON. I thank the gentlewoman for yielding.

Mr. Speaker, I am so pleased to be here to join my colleagues with the Black Caucus. We spent a day in a seminar so that we would understand every single provision in the bill that will be in front of us at the end of the week. It is so important that we come together because we have a golden opportunity to plant the sapling of health care reform. And I want to remind all my colleagues that America's Affordable Health Choices Act is just the beginning of a better national health care structure. Together we can work to make it grow. We must plant this sapling now before it is killed by the wayside as it has so many times been done before.

Our efforts to tackle health care began under the leadership of President Harry S Truman, who attempted to include universal health insurance under the Fair Deal reforms. Hillary Clinton in 1993 spearheaded this effort. Now, thankfully, President Barack Obama has made it one of his top priorities.

We have known our options for years. Just because our Republican colleagues began to listen only recently does not mean that we have not carefully considered what is at stake. We are not rushing through deciding the fate of millions of Americans. Rather, we have taken too long to deliver what is necessary.

The naysayers have rallied around the cost of this health care reform. Please recall that we have spent tens of billions of dollars in Iraq, $15 billion a month factually. And if we would take that money, we could have the most thorough and the most beneficial health care system in the world.

My city, the City of Los Angeles, alone has spent $9 billion and the Nation has spent $890 billion since the start of this unauthorized war. I agree that the $1 trillion price tag of health care is hefty, but it is a better use of our taxpayers' money than a war in Iraq. I would rather reform the system now and reduce the costs that my constituents must bear directly.

Employer-sponsored health insurance premiums have more than doubled in the last decade. This is four times faster than the average wage increase. Middle class Americans have seen the average annual family contribution for employer-sponsored coverage rise to $3,354 in 2008 from $1,619 in the year 2000. For a family earning $50,000, health premium costs now consume 7 percent of their pretax income. Incomes are not rising to keep up with these costs especially in an economy where so many people are losing their jobs.

□ 2145

If this reform fails, we will have little hope of reining in the skyrocketing costs of health care for the middle class. To reduce the cost of health care for the average middle class working family, we have to reform the system and introduce a public option.

Mr. Speaker, the public option is a necessary and pivotal part of health care reform. With it in place, Congress introduces competition into the health care system. With fair price competition, we introduce efficiency and quality, not bureaucracy. Your government is not going to stand in between you and your doctor. Your government is providing an opportunity for you to choose your insurance.

I want to make this crystal clear: We have close to 390 million people in the United States. We are focusing now on the 48 million without health insurance. The rest of Americans who have their insurance and like it are not affected. They can keep whatever they have. We are focusing on those who don't have it, so that we will see to the health care of all Americans.

With the basic benefits guaranteed in the exchange, I hope that insurance companies and the government will be left outside of the examining room. It is a fallacy to believe that we are going to get in between a doctor and a patient.

With the public plan, we offer Americans personal patient choice. Let me repeat that: We offer personal patient choice, and the freedom to stay healthy. I want to say that once more. This reform is about the freedom of choice. Our plan offers Americans the choice to keep their health insurance, if they choose to keep it.

In the public plan, we are only offering the public in the exchange the option to choose the plan that is created by the government—created by the government. The public plan may not be perfect, but it establishes a strong framework that we can build upon.

Bringing health care to the floor means that Congress is ready to ensure that Americans have health insurance. We are making small businesses more attractive by providing them with a means with which to offer their employees health insurance. We are reducing the crushing cost on our large employers, and we are providing the people with more choices.

I truly hope that with the understanding of what is being presented and with the multitude of hours put in by many committees, many Members and staff, this will be the historic first step on the road to making health care for all Americans possible.

Mr. Speaker, I look forward to voting with my colleagues on this issue, and I would like to see it done at the end of the week so there is not a meltdown and the naysayers take the day. So let's do the right thing for the American people, and let's ensure that this country remains a strong, healthy country in perpetuity.

Ms. FUDGE. Mr. Speaker, I do indeed want to thank my colleague and friend Representative WATSON from California. Certainly she presented to us information that I think is important to the American people, well thought out and well said. I thank you so much for being a part of this hour.

Mr. Speaker, I yield to Representative JACKSON-Lee from Texas.

Ms. JACKSON-LEE of Texas. I enjoyed having the opportunity to be here with Congresswoman WATSON from California. I know that she has been steady on these issues, and I think it is extremely important that we do work together.

One of the points I think we will have an opportunity to engage in discussions on as we continue to make our way through the putting together of this bill is to ensure that we each have an opportunity to reflect on some of the concerns that can help make the bill better. Here are some of the issues that I think will help make the bill better.

I am interested in grants to high schools and middle schools that would increase health care professionals, particularly those in underserved communities. I mentioned a week or so ago that I was visiting in New York and met a nurse who started the program through his hospital where he would go to middle schools and high schools and allow the children to dress up in scrubs and participate in mock operating sessions or operating rooms. What a difference it makes. It is almost like our children would dress up as firefighters or police officers. That would incentivize the children to think of the medical profession as something they are interested in. I am looking at hopefully submitting a proposal for that.

Next, an amendment that will address the question of providing incentives for the development of community health care centers that are housed in healthy green buildings, because we will be seeing a large amount of money going out to increase the number of community health centers, qualified Federal community health centers. I think they are excellent sources of health care. Why not incentivize them to make sure they are put in green buildings that are free of various toxins that would probably undermine the good health that people are coming there for.

Tax credits for employers who not only provide good health care benefits, but encourage their employees to utilize these benefits. So education, outreach, making sure that employees have information about accessing their health care.

A pilot program to study and demonstrate the benefits of proven alternative medical techniques and medicines. These are simply to look at holistic ways of being healthy as well as making sure people have access to the information.

A program to study this ongoing problem of people who seek to overutilize prescription drugs. That is, to work with doctors, nurses, clinics, hospitals and other health professionals to educate us about the issue of using prescription drugs.

So I am hoping as we make our way through and as we continue to work with the Congressional Black Caucus on these very important issues of a public option, of ending health disparities, of ensuring that we have universal health care, as Americans seemingly have come together to rally around, I believe we will have a better product by listening to the Members who have some constructive thoughts and proposals that don't undermine the basic structure of the bill; not undermining the public health option. Not taking away large sums of resources so that we cannot in the right way give quality plans, but various small proposals that would enhance the bill is the way I think we should go, and keep the basic structure of what we are all committed to, the public option and complete health care reform that will help the American people.

Ms. FUDGE. I thank the gentlewoman.

Mr. Speaker, in closing, I would like to say just two things.

One, of course, is we all know health care needs to be reformed. We all know that the time is now to do it. We know that the cost to not do it is going to be significantly higher the longer we wait.

I just want to say that, people who think that those who are uninsured shouldn't be given an opportunity—nine million of the uninsured today are children. We need to do something about that. Many uninsured are seniors, and we need to certainly do something about that.

So I would hope that all Members of this House would look at the needs of the people we represent and move to do the right thing.

FAULTS IN THE DEMOCRATS' HEALTH PLAN

The SPEAKER pro tempore (Mr. MAFFEI). Under the Speaker's announced policy of January 6, 2009, the gentleman from Iowa (Mr. KING) is recognized for 60 minutes.

Mr. KING of Iowa. Mr. Speaker, I appreciate the privilege of being recognized to address you here on the floor of the House.

Having been able to listen to some of the dialogue in the previous hour, I think it is quite curious that there would be a chart that went up with question marks on it that would be described as the Republicans' health care plan. There are all kinds of question marks in this Democrat health care plan that we have.

This is the censored flowchart, Mr. Speaker. This is the chart that the Franking Commission, I think after having been leveraged by House leadership, decided that it couldn't be mailed to the constituents of the Members of the House of Representatives because they didn't want this to say ''government-run health care,'' because that is pejorative, or ''the Democrat health care plan,'' because that is pejorative. So, instead, the Democrats put up question marks on the floor of the House and they say Republicans don't have a plan. They don't know.

Well, there are all kinds of questions about the Democrat plan. First of all, why is it so sensitive that you have to censor the truth? Secondly, let's see, we can go through a whole list of questions about the Democrat plan, great big question marks.

How much does it cost? Oh, we don't know, someplace between $1 trillion and maybe $2 trillion, or a little more than $2 trillion dollars. We don't know. We are not even within a trillion dollars on how much we think that is going to cost. That is the Democrat response.

How much deficit will it create? Well, maybe a minimum of $239.1 billion, but it could be well over that. It could run into $600 billion or $700 billion. Some answers there.

Who will get to keep their health care? Who can you actually guarantee and point to them and say you can keep your, more correctly, health insurance program? And no one can be actually promised that, even though the President has said so. He can't guarantee that promise.

So, as the questions go on and on and on, what insurance companies would survive after we have this plan? And looking at this scary flowchart, this schematic, Mr. Speaker, there are 31 different new government agencies that are created in this plan.

First I am going to take us back to 1993. I think it is instructive. This is the 1993 HillaryCare plan, and this is the chart that hung in my office in my construction company during those years, hung in my office all the way through the nineties. I didn't take it down. I think this chart, that showed this great growth in government, all of these configurations here, government agencies, programs, this whole list, a lot of these acronyms I don't recognize anymore, all of these little flows in the drug pricing, they actually call this a scheme, ''drug pricing scheme.'' I just called it a schematic, but they actually called it a scheme, drug pricing scheme.

How about the global budget? That is in here. As you read this through, the configuration between the President, the National Health Board, the State governments, the Regional Health Alliance, the Corporate Health Alliance, the ombudsman, who is there to smooth out all the things and make sure when you have trouble dealing with government, Mr. Speaker, that there is an ombudsman there who will take care of that for you, because we know how difficult it is to find your way through the maze of paperwork that is created when government is involved.

This chart, Mr. Speaker, was enough to scare the Americans off of the Clinton health care plan, commonly known as HillaryCare. This chart came in black and white, it didn't come in Technicolor, but it showed you all of these agencies and this creation. And people understood that they were being offered in place of their own health insurance program, they were being offered a government maze that swallowed up all of the things that were private and completely took it over for government.

The American people loved their freedom in 1993, and they rejected giving up their freedom to purchase a health insurance plan of their choice, to control their health care decisions themselves. They rejected it. This is an HMO provider plan. That is another piece that is not so popular today.

But the American people were scared away from the Clinton plan by simply looking at this chart and listening to Harry and Louise. Some of them, that is all the further they went. But they knew they didn't want a government option when it was going to be the only option. They didn't want to have their options taken away and put in the control of a government bureaucrat, a government-run plan, a Democrat health care plan. That is what it was then, that is what it is now.

The difference is, this is in full color, Mr. Speaker, as opposed to the black-and-white chart from 1993. This chart is flat-out accurate, and it does describe 31 new agencies created by the bill. Anything you see in white are existing agencies, and the things you see in color, in green and yellow and orange and red and blue, those are all new agencies. If you count these dots that are colored, there are 31 of them, Mr. Speaker.

One can get animated about having to wade through that massive government red tape, but when you wade through it down to the bottom is where I get the most concern, and that is, I go down to this little square right here, Mr. Speaker, traditional health insurance plans. That is those plans that insure the majority of the American people today, any private health insurance plan. There are over 1,300 companies that provide health insurance plans, and generally they have multiple plans out there, so we don't know how many plans there are to choose from.

□ 2200

But a reasonable estimate might well be 100,000 separate plans by the time you figure the options on the deductibles and the different things that are there so that people can get a health insurance plan that serves them at a price that they can best settle to. All of those, 100,000 plans, roughly, 1,300 companies, all dumped into this little box right here. And that's how our health insurance is provided for and paid for and administered and funded is all right here in the traditional plans.

But under—I don't know exactly how to describe this—the Democrat government proposal, all of these health insurance plans, if they were going to stay in business after that, would have to qualify. They'd have to become qualified health benefits plans. That's this little purple circle here closest to me. There are two identical circles in size, but the qualified health benefits plan would be where all the private health insurance companies go if the bill is passed and the President signs it, which he'll sign anything that says ''national health care'' on it.

And I suspect that's the case. He wants a bill, and they want to start this down the path because they believe that this will morph into a single-payer plan. That's what he really wants. That's what the Speaker wants. That's what the liberals in the Congress want. They want to take away the American people's 100,000 policies and roll them eventually into one government, one-size-fits-all plan over here.

So these 1,300 companies, 100,000 policies in this square box, if they were going to do business after the bill was signed, they have to get qualified. They would be qualified if they met the new government standards. The government would tell them, You have to cover maternity. You have to cover mental health. You have to cover abortion, Mr. Speaker. That's the standard that is coming out of the White House these days.

If the White House doesn't tell you that they're opposed to forcing Americans to pay premiums to fund abortions, then you know that if it comes the way they plan it, there will be abortions funded by the American people through the dollars they would pay to these premiums. There isn't any history in this country of this government not funding abortions unless there was an explicit exemption written into the language of the bill. There is no explicit exemption written into the language of any of the bills that are working here before this Congress now, which should tell anybody that's studied this and watched this issue since Roe v. Wade in 1973, that they plan to take the tax money and the premium money from the American people and use it to kill babies. That's going to be in this plan.

And all of these health insurance policies here will have to pay for it the same way the government intends to pay for it over here in the public health plan, and many Americans are going to object to that. But what they do is, when they require that these health insurance policies have to cover everything they think it should cover and they write so many mandates into it that the health insurance premiums will go up, and so will the copayments and so will the deductibles go up, and as they go up, then it will be easier for the public health plan, the Obama health insurance plan, to compete with the private sector.

And they will do two things with these two purple circles here. One of them is they will regulate the traditional private providers to where they become mirrors of the government plan and then have to compete with the premiums that the government plan will charge. And the other thing that they will do is they will subsidize the government plan so that they can keep

those premiums down long enough to compete with the private plan, and that will squeeze out the private plans.

And you can expect, Mr. Speaker, that there will not be private health insurance in America in a relatively short period of time, whether that be—probably not 5 years. By 10 years, we'll see the picture. By 15 to 20 years, it should be settled in if this happens. We can look around the world and see where they have made these mistakes.

In Great Britain, they have a completely socialized medicine program that was implemented into law in 1948. In Germany, they have the world's oldest socialized medicine plan that went in under Otto von Bismarck in the late 1800s. That plan provides for private health insurance, and today, about 90 percent of Germans are under the public plan and about 10 percent are under the private plan, and those that are on the private plan are generally self-employed people that have some means to try to provide a plan that they think gives them a little better access and maybe even a little better quality health care than the 90 percent of Germans that are under the public plan.

But one thing that they have in common in the United Kingdom and in Germany is they wait in line. Their care is rationed, and the quality isn't what it is in this country. The survival rates for cancer in the United States versus that of United Kingdom or the European Union are some four times greater here in the United States than they are in those countries that have socialized medicine. And now, Mr. Speaker, we can also look to the north to Canada, and understand what went on up in Canada.

When Canada passed their socialized medicine program, it was set up to compete with the existing privates, and eventually they were all squeezed out. And today there exists a law in Canada that prohibits anyone from jumping ahead of the line or going to create a new line. One size fits all. Everyone, all Canadians have to comply with the same health care programs. Government-run socialized medicine in Canada.

And now, thinking about what that means, the Canadians lost their freedom when they decided to go for a little security and still try to keep some freedom. They lost their freedoms on their health insurance, and maybe they are a little bit more secure, but the quality of their health care doesn't match up to the quality here in the United States.

And so what we know is that, let's just say the cancer survivors in Canada, their numbers look better than the people in the United Kingdom or the European Union that have been diagnosed with cancer. More Canadians survive with cancer than do the other countries that have a socialized medicine program. And I don't know the numbers, and I probably won't get time in this debate over the next week or maybe a little more to drill back into this and be able to compare the statistics.

Mr. Speaker, I'm going to suggest that a factor involved is the Canadian proximity to American health care has helped Canadians live longer. It's helped their survival rate. It's helped in such that when people get diagnosed with cancer and can't get treatment in places like the United Kingdom, Germany, across Europe, they die sooner than they do in Canada, and they die sooner in Canada than they do in the United States.

People live longer here after they've been diagnosed with a cancer than any of those countries that I have mentioned, and I've seen no data for any others. And I'm going to suggest that the Canadians' access to American health care helps their life expectancy because at least they can sneak across the border and get in line down here, even if they have to pay for it out of their pocket. Those would be the factual circumstances involved.

And so we have Democrats asking the question, what's the Republican health care plan? I'll ask the question, what do we know about the Democrat plan? We know it'll cost a lot. We can guess within 1 trillion, maybe 1 trillion or $2 trillion. We know it's going to create a deficit; 239.1 billion on up to 600, 700, $800 billion in deficit. We know it's going to create lines. Lines are rationing. People do die in line.

We know it's going to discourage doctors and specialists for taking the years necessary to be trained so that they can be proficient enough to provide the quality of health care that we have. So we'll have fewer doctors. We'll have fewer nurses. Fewer people will want to go into the industry because the government will be telling them how they are going to treat patients. There isn't going to be any way that the Democrats in this Congress will agree to pull the government out of the relationship between the doctor and the patient.

There was an amendment that was offered in the Energy and Commerce markup that specifically said that the government would not interfere with the doctor-patient relationship, and that's a short summary, and it was voted down except for one, all on a party line, all but one Democrat voted no. Every Republican voted yes. We want the doctor-patient relationship to be maintained. Democrats do not.

We also have the rules that will be squeezing out these private carriers, these 1,300 companies. There will not be 1,300 that will qualify. There will be substantially less, and they'll be squeezed out by the public option here, this public health plan, this government-run health insurance plan, but the regulations will be written by the Health Choices Administration.

□ 2210

It has got a nice little acronym—HCA, Health Choices Administration. You know that the people who wrote this are for choice, right?

So they have named that there will be a commissioner of the Health Choices Administration. That commissioner is the modern, fancy name for ''czar.'' We have 32 czars. The American people are fed up with czars, so now we're going to start calling them ''commissioners.'' Some said, well, ''commissars,'' but the commissioner—not commissar—will be calling the shots on what these health insurance plans are, and he will decide what they will cover and what they will not. He will also be the one who probably makes a lot of the decisions on how much health care is rationed in America. The results, again, will be long lines. How do we know this? They exist in every country that has socialized medicine.

I ran into an individual at a home improvement place in my district, oh, about a year ago. He was a legal immigrant from Germany who'd had a hip replacement over there. In order to get his hip replacement, he had to travel to Italy because the lines were too long in Germany. They were a little shorter in Italy, so he got himself in the line in Italy. He traveled down there and got a hip replacement. He didn't think a lot of the system that they have in Europe. That was just a little anecdotal discussion that took place in a home improvement center.

I will tell you, Mr. Speaker, a week ago Thursday night, we had a doctor who practiced medicine in Michigan and in Canada. He has written a book, at least one that I know of. He was our guest speaker at the Policy Committee a week ago Thursday night. He told a story. He was working in the emergency room in Canada. It must have been the first he'd been up there to work, is my guess, and he probably hadn't anticipated what kind of a bureaucracy they have. They brought a patient in who had a knee joint that was all torn up, I believe from a sports injury, but I don't know. He had a torn meniscus and a torn ACL, an anterior cruciate ligament. That knee was all swollen up. It was wrecked. He examined it; x rayed it.

He told the young man, You need surgery and you need it right away. I'll schedule you for surgery in the morning.

Well, he didn't realize how difficult it was. This is an American doctor working in Canada. He began to schedule the surgery the next morning, and he found out that there had to be a specialist who evaluated the knee and then that they had to file the forms. Then they had to get him in line. Then they had to get him approved so he could go ahead and have the surgery. Well, the examination, the secondary examination that had to take place by the doctor who does the approving for the surgery, in order to hold down costs, mind you, wasn't able to see this patient right away, so they put a brace on this patient's knee that was blown up like a cantaloupe, and they put him on crutches. After a while, he left the

hospital, waiting for his examination by the doctor who works for the bureaucracy and who decides who goes into the line.

Well, that examination didn't take place the next day, Mr. Speaker, or the next week or the next month. The examination that if he passed would approve him for surgery took place 6 months later. In America, he would have had surgery the next day, and he would have been in rehab. In a couple of months or even less than that, he'd have been back to work. He spent 6 months on crutches, 6 months with a leg brace, 6 months with a torn meniscus and a torn ACL. Then he went in for the examination, Mr. Speaker.

After the examination, one might think that the examining doctor came to the same conclusion that the ER doctor from Michigan did, which is that he should have surgery the next day. Well, maybe that doctor did come to that conclusion, but they didn't have room for him, not for a day or two or a week or a month, Mr. Speaker, but for 6 months.

No, I didn't say 6 months from the injury to the surgery. I said 6 months from the injury to the examination and another 6 months from the examination to the surgery. We know, if you have a patient who is hobbling around on crutches for a year, his unused leg atrophies, and the rehab takes longer. It takes a long, long time to get a patient back to speed after surgery, when and if the surgery is successful, which I guess I don't know.

This is the circumstance right here across the border into Canada. Many Americans live along the border, and they see the Canadians come down to the United States for their health care. It happens in Maine; it happens in Michigan; it happens in Minnesota. The Mayo Clinic at Rochester takes a lot of patients from Canada. Some companies in Canada will write into their employment contracts with their employees that they have extra good health insurance programs for them. If they are hurt or if they need emergency surgery, heart surgery, for example, in the employment contracts, they will have policies set up that will actually fly a Canadian employee to Houston for heart surgery.

Now, if you have a health insurance and health care program that is in such a condition that employers write it into their employment contracts that they will export their employees out of State to come to America, to come to the United States to access high-quality health care, that should tell us something about what we should not design. I would think it would be very clear.

So the White House and the liberals in Congress—maybe they don't want to say, House Democrats' health plan. Maybe I should say, liberal House Democrats' health plan. This plan is very similar to the plan that was unrolled in Canada where they had private health insurance for a while before it was squeezed out by the public health plan, which swallowed up everything.

In Canada, they passed a law that prohibited anyone from starting a new line or from jumping in front. Some provinces in Canada enforce it more than others, but the Federal law in Canada is that you are stuck with the same health care as everybody else. There's no jumping ahead in line. There's no creating a new line. You can't open up a clinic if you're a doctor and serve patients unless you're approved by the government. The government will require you to strap on their harness and pull in exactly the patient load in exactly the way they describe it; whereas, in America, if you license yourself as a physician, you can open up a clinic and can start taking care of patients wherever the demand is.

Now think about the difference between that where you have individual entrepreneurs who are seeking to serve a marketplace. Maybe they're working for hospitals, and they look around and decide that there need to be other services in that they're not able to take care of the patients who are there. Maybe they see a population demographic or an age demographic that needs to be better served, so they'll open up clinics or hospitals or surgery centers or they might go out and pick up some medical technical equipment and deploy that to locations where it's needed or they'll go out to the rural hospitals and go ride the circuit, so to speak, and stop in and maybe once a week do the scheduled orthopaedic surgery that's there.

It happens with OB as well. They'll schedule some of that as best they can, at least the examinations. The births come along on their own unless they're by Caesarean.

Remember, HillaryCare actually called this schematic, or at least one component of it, a scheme. This color-coded schematic should scare the daylights out of the American people, and they should be worried about all of the question marks in the Democrat plan, that plan that will give us socialized medicine in America. We can understand that, Mr. Speaker.

That's where it's going, and it will bust the budget, and it will take away our freedoms, and it will prohibit a doctor from opening up a clinic where he sees the demand. It will prohibit a doctor from charging more or less—I suppose there may be some opportunity to charge less, but that wouldn't last very long—because they're going to squeeze these resources down.

Today, Medicare is only reimbursing at 80 percent of the cost that it takes to deliver it. In my State, in Iowa, we are the lowest out of the 50 States. We have the lowest Medicare reimbursement rate of all of the States in the Union.

□ 2220

And yet, the proposal here in this flow chart is to squeeze maybe as much as half a trillion dollars out of Medicare. And now all for what? What is the purpose of all of this, Mr. Speaker? Why would America, why would this Congress consider upsetting, destroying, wrapping up packaging and throwing away the best health care system in the world? Why? What would be the purpose?

And I will submit, Mr. Speaker, that the argument is that there are the uninsured. Now, they continue to blur the words between ''health care'' and ''health insurance.'' They don't seem to know there is a difference between the two.

Everybody in America has health care. Everyone in America can walk into the emergency room and be treated for an injury or an illness. Everyone has that opportunity. We don't have people in America that are denied health care. Everybody in America doesn't have health insurance. And before I go down that path a little, I want to point out that we do spend a lot of money on health care in America between health insurance and providing that health care. And it's about 14½ percent of GDP. And in some of the European Union countries, socialized medicine countries, it's around 9½ percent of GDP. So maybe 5 percent more, half again more.

So our health care here costs us 3 bucks. It costs them 2. Is our health care that's provided in this country worth half again more? Maybe. We're willing to pay it today. But perhaps not in the long run, Mr. Speaker, and we can do a lot of things to reduce the cost of health insurance and health care in America. And there is a difference

A number of those things would be: Address the medical malpractice, the irresponsible litigation that's taking place, the suing of doctors and clinics and hospitals and providers all for an opportunity to try to cash something in rather than correct something that's wrong. And perhaps the word ''all'' is not the right one, because there are cases where someone has had the misfortune of being a victim of medical malpractice.

We pushed legislation and passed it through the Judiciary Committee a few years ago and off the floor of the House of Representatives that limited the medical malpractice settlement and capped the noneconomic damages at $250,000 and still took care of the patients who had unfortunately been subject to medical malpractice. Paid the patient's doctor bills, paid them loss of income. Paid them pain and suffering. Just didn't pay punitive damages, that $7 million for the cup of coffee that the lady spilled in her lap. That's the punitive damages that we call it out in the layman's world. It's called noneconomic damages in that bill. Those are capped at $250,000. That's the model that California has that has been relatively successful. That's one of the things we can do to hold down the cost.

Another one would be provide for 100 percent deductibility for everybody's

health insurance premium, for a corporation to purchase health insurance and pay the premiums and fully deduct those premiums, but if someone goes and buys that same policy, they can't deduct it from their taxes. A self-employed person can't deduct their health insurance premiums fully like say an employer can for their employees. So if you are a sole proprietorship and you have high health insurance premiums and you haven't formed a corporation, you might be paying $11,000, $15,000 a year in high health insurance premiums. Let's say it's $15,000 a year. You can get around that lack of deductibility by forming a corporation and paying yourself a salary, and part of the salary package would be the health insurance premiums. Then you can deduct them.

Those are a lot of hoops to jump through to try to meet a government regulation when there should be no particular advantage for one company over another, one individual over another. If we have someone who is self-employed or someone who is independently wealthy and they are responsible enough to go out and buy their health insurance and pay the premium, every dollar that's deductible by a corporation should be deductible by an individual. All of those health insurance premiums should be deductible.

We should raise the maximum amount for health savings accounts so we can be sure that people that are young today, when they arrive at Social Security age, will have enough money in their health insurance, in their health savings account, to be able to purchase a paid-up Medicare replacement policy and take the difference, the hundreds of thousands or perhaps more than a million dollars, take the cash in the difference on their HSA tax-free if they're willing to take themselves off of the entitlement rolls of Medicare by buying replacement policy. That's something else we can do in the long term.

So expand our HSAs, provide for full deductibility on our health insurance, limit the liability for these doctors so we can hold down the costs of medical malpractice premiums and the cost of the extra tests that are there in order to protect themselves from the litigation that's bound to come when you ambulance-chasing lawyers are chasing doctors around. What percentage of this 17 percent of our economy is going to the trial lawyers in America? I say, Mr. Speaker, it is significant.

So there really aren't questions about what Republicans are for. There are a lot of questions about what comes out with this chart, but the idea that the Franking Commission, which appears to be controlled by the Democrat majority in this Congress, would censure this document and tell Members of Congress they can't send this off to their constituents, they can't package it up and put it in an envelope and mail it to their constituents because the Democrats didn't like the idea that it says ''House Democrat Health Plan.'' And they don't like the idea that it says ''government run.''

Well, it is government run, and it is the House Democrats' health plan. There are bipartisan programs here when it comes to health care in this Congress. The bipartisanship is in opposition to this kind of a government-run plan, and that's what Democrats and Republicans that oppose this today—I cannot find a single Republican that supports this plan, and I don't think that individual exists in the United States Congress.

So that would be my component of the speech here that has to do with this schematic that should scare the living daylights out of the American people, and they should rise up. And, Mr. Speaker, the American people should rise up. And in August when their Members of Congress come home and they start doing parades and townhall meetings and corn boils and whatever else is going on, crab fries or whatever they do in the East Coast, this chart should be out in front and the American people should go see them and say, Vote ''no,'' be a ''no,'' oppose this plan, oppose this plan. Give people their freedom, and we can do so in the fashion that I've described.

Now, there is another huge entity that's taking away our freedom. Right here, Mr. Speaker, this is a picture that I took of the headquarters of ACORN, and this is down in New Orleans, Louisiana, at 2609 Canal Street, New Orleans. This is a fortified building. I mean, these bars are heavier the lower you go. This is up on the second or third floor of the building.

And I just zoomed in on this window because something caught my eye. ACORN's national—maybe even international—headquarters, where they have 174 or more corporations running out of this single building, four or five stories, glass, with bars, the most fortified building in the whole neighborhood.

But inside that window you can see at least two posters there. This one says ''Obama '08.'' ACORN is to be, and is registered as, a 501(c)(3) corporation, a not-for-profit corporation, a nonpolitical, nonpartisan organization organized as a corporation. If this is their headquarters and they have ''Obama'' posters inside—it's clearly displayed in the window so people can go by on the street and look and see that. And in the State where I come from, we call that electioneering. If you are a not-for-profit, nonpartisan corporation, 501(c)(3), you don't do any electioneering. You certainly don't post an ''Obama'' sign in the front window of the national headquarters of the Association For Community Organization Reform Now, ACORN.

□ 2230

And if anybody wonders about where this picture came from—and I've got the pictures of the address and everything, but over here is the flag that hangs outside. It is kind of a faded red flag. It is clearly, and you can read it, that is the ACORN logo.

So the ACORN logo on this flag hanging outside the window at the national headquarters of ACORN, and the Obama sign in the middle of the window displayed so people can see it, is it intentional? Either that, or stupid. Is it okay to say that something happened that was stupid in America, Mr. Speaker? I'm a little concerned about that. It seemed to be not a very good tactic for the President, but I see his name inside this window at ACORN at their headquarters and I see the ACORN logo, and here is where it is, 2609 Canal Street.

Now, this is an interesting turn of events. I took this picture just before the 4th of July. And last week, on Thursday, about the close of business, there was released a report, and this is a nonpartisan report from the U.S. House of Representatives Committee on Oversight and Government Reform. The ranking member is Congressman DARRELL ISSA, California's 49th District. The subject of this report—and Mr. Speaker, I hold this up. It is what the cover of it looks like. The United States House of Representatives.

The subject of this report is this question: ''Is ACORN Intentionally Structured As a Criminal Enterprise?'' This report is dated July 23, 2009. And if anyone should like to look this report up and read it, I believe if they googled, ''Is ACORN Intentionally Structured As a Criminal Enterprise,'' they will be able to find it, or if they go to the Government Reform Web site—I know that it is on Mr. ISSA's Web site and it soon will be on mine.

I have here the executive summary. It is 88 pages long. I have read carefully through the first two-thirds of it. It has in it a list of 361 affiliated corporations. I have listed 174 in the amendments I have offered that were designed to eliminate Federal funding to ACORN. ACORN has received at least $53 million in taxpayer funds to operate their criminal enterprise. And I have the executive summary here.

And just to go into it a little ways, Mr. Speaker, this executive summary of this report out of the Government Reform House of Representatives that asks the question, ''Is ACORN intentionally structured as a criminal enterprise?'' July 23, 2009, the executive summary reads, in part, like this:

''The Association of Community Organizations for Reform Now, ACORN, has repeatedly and deliberately engaged in systemic fraud. Both structurally and operationally, ACORN hides behind a wall of paper, of nonprofit corporation protections to conceal a criminal conspiracy on the part of its directors to launder Federal money in order to pursue a partisan political agenda and to manipulate the American electorate.''

Corporate protections to conceal a criminal conspiracy on the part of its directors and launder money. That is the first paragraph.

Then it reads, ''Emerging accounts of widespread deceit and corruption raise the need for a criminal investigation of ACORN. By intentionally blurring the legal distinctions between 361 tax exempt and nonexempt entities, ACORN diverts taxpayer and tax-exempt monies into partisan political activities.

''Since 1994, more than $53 million in Federal funds have been pumped into ACORN, and under the Obama administration, ACORN stands to receive a whopping $8.5 billion in available stimulus funds.

''Operationally, ACORN is a shell game played in 120 cities, 43 States, and the District of Columbia through a complex structure designed to conceal illegal activities to use taxpayer and tax-exempt dollars for partisan political purposes and to distract investigators. Structurally, ACORN is a chess game in which senior management is shielded from accountability by multiple layers of volunteers and compensated employees who serve as pawns to take the fall for every bad act. The report that follows presents evidence obtained from former ACORN insiders that completes the picture of a criminal enterprise.''

So they describe them as a criminal enterprise, and they describe them as to conceal a criminal conspiracy. A criminal enterprise, a criminal conspiracy. And these are some of the headings under the executive summary.

''First, ACORN has evaded taxes. ACORN has obstructed justice, engaged in self-dealing, and aided and abetted a coverup of the embezzlement by Dale Rathke, the brother of ACORN founder Wade Rathke.''

And that embezzlement was $948,607.50, Dale Rathke embezzlement covered up by his brother, the founder, Wade Rathke, whom it appears provided misinformation to the counsel for ACORN and redirected—and it appears to be willful—to string it out and delay any kind of punitive action that would come to visit his brother, his brother Dale, who did embezzle the $948,607.50. And it seems to be beyond question that that happened, that some of the money was misappropriated to fill the hole in their accounting system. That is the first point.

The second point is, ''ACORN has committed investment fraud, deprived the public of its right to honor services, and engaged in a racketeering enterprise affecting interstate commerce.'' Committed investment fraud. That is the second point.

Third point, ACORN has committed a conspiracy to defraud the United States by using taxpayer funds for partisan political activities by having the equivalent of a slush fund, where dollars were moved around from corporation to corporation, affiliate to affiliate, resulting in get-out-the-vote efforts that may have had—and likely did have—501(c)(3) not-for-profit taxpayer dollars invested in them, but used for political and partisan purposes, Mr. Speaker.

It says, ACORN forged both formal and informal connections with former Illinois Governor Rod Blagojevich, also formal and informal connections with Ohio Senator SHERROD BROWN, and formal and informal connections with President Barack Obama, among others. ''Each of these campaigns received financial and personnel resource contributions from ACORN and its affiliates as part of a scheme to use taxpayer monies to support a partisan political agenda.'' A scheme to use taxpayer monies to support a partisan political agenda, Mr. Speaker. ''These actions are a clear violation of numerous tax and election laws.''

Another point, the fourth point, ''ACORN has submitted false filings to the Internal Revenue Service and the Department of Labor, in addition to violating the Fair Labor Standards Act, FLSA. Committee investigators have tracked ACORN's numerous failures to comply with Federal laws that required the payment of excise taxes on excess benefits to Dale Rathke. SEIU Local 100—the Service Employees International Union—under the direction of ACORN founder Wade Rathke—filed bogus reports with the Labor Department in order to conceal embezzlement.''

Now, all of this off of this report, this nonpartisan House of Representatives report that asked the question, ''Is ACORN intentionally structured as a criminal enterprise?'' dated July 23, Mr. Speaker.

And fifth, ''ACORN falsified and concealed facts concerning an illegal transaction between related parties in violation of the Employee Retirement Income Security Act of 1974 (ERISA).'' ACORN falsified and concealed facts concerning an illegal transaction between related parties in violation of ERISA.

Findings go on. They should pierce the corporate veil and do an investigation. Justice needs to do an investigation. And something that they point out is that, when ACORN crosses the line—which I don't think anyone questions they do—the individuals harmed are the low to moderate income workers whom ACORN was founded to protect. They hurt the very people that they were founded to protect. Dale Rathke's, the brother of the brother, embezzlement and the cover up are violations of ACORN's corporate duties, and they are fraud. The identities and roles of those involved must be disclosed.

This goes on, Mr. Speaker. I have poked through this report. I have spent hours and hours over the last 4 to 5 years tracking ACORN. This report lists the 361 affiliates, and in there will be information on campaign contributions, who received what money. It will be easier to take that information and cross-reference it back to the FEC documents and follow the money. It will tell us a lot about what is going on.

□ 2240

I think there's an indicator here that is pretty interesting. I have in my hand the ACORN celebration of 39 years. ACORN was founded in 1970. They held a celebration on June 17 of this year. And the celebration takes place at the National Education Association Atrium, probably birds of a feather. That is at 1201 16th Street Northwest, Washington, D.C. This is a celebration of 39 years of ACORN. And it is interesting that some of the people that are less than enthusiastic about doing the investigation of ACORN are invited to be headliners there at the ACORN celebration of 39 years. Now, I remember 39 years might be Jack Benny's year to celebrate, but 39 years is not a year ending in a zero or a five; so this must be the annual celebration of ACORN's founding.

Who is there in the headline? Who is honored? Well, let's see, Senator CHARLES SCHUMER, New York, the number one headliner for the ACORN celebration, their annual celebration. I don't know that CHARLES SCHUMER has demonstrated a lot of enthusiasm to investigate ACORN. I can't imagine that would happen.

The next one on the headline is Representative LUIS GUTIERREZ, Chicago. Chicago politics. Chicago ACORN. Let me see, President Obama made his first political reputation in Chicago as an employee of Project Vote. He also represented ACORN in court a couple of times, some said pro bono. But in any case Project Vote, according to this report, this U.S. House of Representatives nonpartisan Government Reform Committee Congressman DARRELL ISSA report, dated July 23, 2009—according to this report, it's indistinguishable between Project Vote and ACORN. They commingled their funds. They had dozens of accounts, and one affiliate that managed all the funds of all the affiliates, according to the report. But President Obama, according to all reports, Democrats and Republicans, made his political reputation working for Project Vote in Chicago. Project Vote, inseparable from ACORN, thought of as ACORN, and the head of Project Vote was also a top officer of ACORN in Chicago.

Chicago politics. Remember Rod Blagojevich? He's listed in this report. Well, Chicago politics are listed in this annual celebration that ACORN held in this city in Washington, D.C., June 17, this summer, headlined by Senator CHARLES SCHUMER; Representative LUIS GUTIERREZ; Representative MAXINE WATERS, who stood before an ACORN celebration and told them all that they were all going to get together and vote the Republicans, some certain part of their anatomy, out of office. So she has, in a partisan way, spoken before that supposedly nonpartisan organization. Now, of course, we know they are a partisan organization.

ACORN is a get-out-the-vote machine. It's a fund-raising machine. It

writes campaign checks by its affiliates to candidates, and the three people who headlined this, on the top of the list, CHARLES SCHUMER, Senator; Representative LUIS GUTIERREZ; and Representative MAXINE WATERS, all tightly affiliated with ACORN, none of whom are very interested in investigating ACORN.

And if we go down through the list, Kathleen Kennedy Townsend. Interesting. A number of interesting names. John Podesta, Henry Cisneros of the Clinton administration, recognized and patted on the back for their affiliation with ACORN.

It is a sad day, indeed, when we see the corruption of our election politics, Mr. Speaker, and we see it done by an organization that is set up now with 361 affiliates. And, strangely, the Congress doesn't have enough curiosity in order to do an investigation, and the Justice Department doesn't have enough curiosity to do an investigation, and ACORN themselves admit that they produced over 400,000 fraudulent voter registrations in the last election cycle.

Their goal was to register, they said, I believe, 1.3 million, and they admitted to producing and turning in over 400,000 fraudulent voter registrations. ACORN is under investigation in 12 to 14 States. Across those States, there have been at least 70 ACORN employees that have been convicted of some type of fraudulent activity. Most of it is voter registration fraud. ACORN itself in Nevada is under investigation/indictment for election fraud.

This isn't something that is an anomaly; this is a pattern. This is the MO, the mode of operations, of a criminal enterprise that is corrupting our election process. And we know it's for political gain. We know it's for the money machine that gets churned. They are linked together with the SEIU. I read that part.

There is more to that as well. Those dollars pour into the coffers of Democrat candidates, not Republican candidates. ACORN then hires people and gets volunteers to go to the streets to turn out the vote, turn out the vote for Democrats, not for Republicans. I don't know of a case where we have ACORN out supporting a Republican unless it would be—let me just say for tonight I don't know of a case, although I've got something in mind.

This is the headquarters, ACORN's headquarters, 2609 Canal Street, an Obama sign in the window, an ACORN sign on the outside.

President Obama got his start in politics, in Chicago-style politics, with Project Vote, an arm of ACORN, that was registering people and turning out the vote. And he has since hired ACORN to turn out the vote. It was an ACORN affiliate to the tune of $800,000. And that fungible money, some of it was commingled into the same accounts and distributed out as if it's their own personal slush fund, Rathke's own personal slush fund, to build power in a power-based width.

We have also the White House having reached out and signed an agreement with ACORN to help with the consensus.

Now, any organization that can produce 400,000 fraudulent voter registrations can't be trusted to count the American people, not when there is political gain involved. This can be done without ACORN.

There has since been a statement issued by the Census Bureau that they were not going to use ACORN. I have to see that to believe it. Are they not going to use any one of the 361 affiliates that are listed in this Government Reform report? I think it's going to be hard to see, no, they aren't. Are they not going to use any of the employees that work for them, Mr. Speaker?

So let's not forget President Obama has been tied to ACORN since the first days of his political life in Chicago. He has worked for them; they have worked for him. He has hired them with campaign money, and they have contributed campaign money to him. President Obama is part and parcel ACORN.

When the chairman of the Judiciary Committee, JOHN CONYERS, took interest in investigating ACORN and made such remarks in a Judiciary Committee meeting a couple of months ago, I was given heart that perhaps we would start to investigate ACORN. But 3 weeks later, the chairman came back in a public statement and he said the powers that be decided that there isn't enough evidence there to investigate ACORN.

Now, who would the powers that be be that are more powerful than the chairman of the House Judiciary Committee? Would it be Speaker PELOSI or President Obama?

Mr. Speaker, I am not convinced that it's necessarily Speaker PELOSI. But I point this image out. This is the cover of National Review magazine from March 23, 2009, this year. They put this image out here, Mr. Speaker, and I have just removed the letters so that it doesn't blur the image. It just says National Review on top, the date on the bottom, and whatever their headline story was. I take note to the logo on the shirt pocket of the polo shirt. That says it all, I think, Mr. Speaker.

This is what we have going: we have a criminal enterprise that is being hired by the White House to help run the census that helped put the President in the White House, a massive organization that reaches into 43 States and the District of Columbia, that has engaged in a number that approaches a million dollars in embezzlement and covered it up for 8 years, 400,000 fraudulent voter registration forms, Federal tax violations, and violations of not-for-profit conditions on 501(c)(3) corporations that are being used for partisan purposes.

And, Mr. Speaker, we have the image, we have the logo, and we have the national headquarters here at 2609 Canal Street, New Orleans, Louisiana, with the Obama sign in the window and the ACORN flag out on that side.

□ 2250

Mr. Speaker, we have to investigate this organization. We have to bring the Judiciary Committee to bear and the Government Reform Committee to bear. We need the Justice Department to drill into this. No one single entity can unravel this spider web of 361 corporations. It must happen, or it will corrode and destroy this great constitutional Republic, the United States of America.

SPECIAL ORDERS GRANTED

By unanimous consent, permission to address the House, following the legislative program and any special orders heretofore entered, was granted to:

(The following Members (at the request of Ms. WOOLSEY) to revise and extend their remarks and include extraneous material:)

Ms. LEE of California, for 5 minutes, today.

Ms. WOOLSEY, for 5 minutes, today.

Ms. KAPTUR, for 5 minutes, today.

Mr. SPRATT, for 5 minutes, today.

(The following Members (at the request of Mr. POE of Texas) to revise and extend their remarks and include extraneous material:)

Mr. MCCOTTER, for 5 minutes, today.

Mr. MACK, for 5 minutes, July 28.

Ms. ROS-LEHTINEN, for 5 minutes, July 29 and 30.

Mr. MORAN of Kansas, for 5 minutes, July 30 and 31.

Mr. BOOZMAN, for 5 minutes, today.

Mrs. BACHMANN, for 5 minutes, today, July 28, 29, 30 and 31.

Mr. BROUN of Georgia, for 5 minutes, today.

(The following Member (at his request) to revise and extend his remarks and include extraneous material:)

Mr. LUJÁN, for 5 minutes, today.

LEAVE OF ABSENCE

By unanimous consent, leave of absence was granted to:

Mr. CUELLAR (at the request of Mr. HOYER) for today on account of travel delays due to weather.

Mr. DAVIS of Illinois (at the request of Mr. HOYER) for today.

Mr. LYNCH (at the request of Mr. HOYER) for today.

Mr. ORTIZ (at the request of Mr. HOYER) for today on account of travel delays due to weather.

Mr. RODRIGUEZ (at the request of Mr. HOYER) for today on account of travel delays due to weather.

Mr. CRENSHAW (at the request of Mr. BOEHNER) for today on account of a family medical issue.

ENROLLED BILLS SIGNED

Lorraine C. Miller, Clerk of the House, reported and found truly enrolled bills and a joint resolution of the House of the following titles, which were thereupon signed by the Speaker:

H.R. 2245. An act to authorize the President, in conjunction with the 40th anniversary of the historic and first lunar landing

by humans in 1969, to award gold medals on behalf of the United States Congress to Neil Armstrong, the first human to walk on the moon; Edwin E. ''Buzz'' Aldrin, Jr., the pilot of the lunar module and second person to walk on the moon; Michael Collins, the pilot of their Apollo 11 mission's command module; and, the first American to orbit the Earth, John Herschel Glenn, Jr.

H.R. 2632. An act to amend title 4, United States Code, to encourage the display of the flag of the United States on National Korean War Veterans Armistice Day.

H.R. 3114. An act to authorize the Director of the United States Patent and Trademark Office to use funds made available under the Trademark Act of 1946 for patent operations in order to avoid furloughs and reductions-in-force, and for other purposes.

H.J. Res. 56. Joint Resolution approving the renewal of import restrictions contained in the Burmese Freedom and Democracy Act of 2003, and for other purposes.

ADJOURNMENT

Mr. KING of Iowa. Mr. Speaker, I move that the House do now adjourn.

The motion was agreed to; accordingly (at 10 o'clock and 50 minutes p.m.), under its previous order, the House adjourned until tomorrow, Tuesday, July 28, 2009, at 10:30 a.m., for morning-hour debate.

EXECUTIVE COMMUNICATIONS, ETC.

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

2826. A letter from the Acting Administrator, Risk Management Agency, Department of Agriculture, transmitting the Department's final rule — Common Crop Insurance Regulations; Grape Crop Insurance Provisions and Table Grape Crop Insurance Provisions (RIN: 0563-AC09) received July 21, 2009, pursuant to 5 U.S.C. 801(a)(1)(A); to the Committee on Agriculture.

2827. A letter from the Director, Defense Procurement and Acquisition Policy, Department of Defense, transmitting the Department's final rule — Defense Federal Acquisition Regulation Supplement; Clarification of Central Contractor Registration and Procurement Instrument Identification Data Requirements (DFARS Case 2008-D010) (RIN: 0750-AG05) received July 13, 2009, pursuant to 5 U.S.C. 801(a)(1)(A); to the Committee on Armed Services.

2828. A letter from the Director, Defense Procurement and Acquisition Policy, Department of Defense, transmitting the Department's final rule — Defense Federal Acquisition Regulation Supplement; Peer Reviews of Contracts (DFARS Case 2008-D035) (RIN: 0750-AG28) received July 13, 2009, pursuant to 5 U.S.C. 801(a)(1)(A); to the Committee on Armed Services.

2829. A letter from the Director, Defense Procurement and Acquisition Policy, Department of Defense, transmitting the Department's final rule — Defense Federal Acquisition Regulation Supplement; Protection of Human Subjects in Research Projects (DFARS Case 2007-D008) received July 13, 2009, pursuant to 5 U.S.C. 801(a)(1)(A); to the Committee on Armed Services.

2830. A letter from the Director, Defense Procurement and Acquisition Policy, Department of Defense, transmitting the Department's final rule — Defense Federal Acquisition Regulation Supplement; Government Property (DFARS Case 2007-D020) (RIN: 0750-AF92) July 13, 2009, pursuant to 5 U.S.C. 801(a)(1)(A); to the Committee on Armed Services.

2831. A letter from the Assistant Inspector General, Communications and Congressional Liaison, Department of Defense, transmitting the Department of Defense Inspector General Semiannual Report, October 1, 2008 — March 31, 2009, pursuant to Section 5(a) of the Inspector General Act of 1978; to the Committee on Armed Services.

2832. A letter from the Associate Director, PP&I, Department of the Treasury, transmitting the Department's final rule — Persons Contributing to the Conflict in Cote d'Ivoire Sanctions Regulations — received July 16, 2009, pursuant to 5 U.S.C. 801(a)(1)(A); to the Committee on Foreign Affairs.

2833. A letter from the Chairman, Council of the District of Columbia, transmitting a copy of D.C. ACT 18-137, ''Boys and Girls Club of Greater Washington Property Acquisition Temporary Act of 2009'', pursuant to D.C. Code section 1-233(c)(1); to the Committee on Oversight and Government Reform.

2834. A letter from the Chairman, Council of the District of Columbia, transmitting a copy of D.C. ACT 18-138, ''Commission on Uniform State Laws Appointment Authorization Temporary Act of 2009'', pursuant to D.C. Code section 1-233(c)(1); to the Committee on Oversight and Government Reform.

2835. A letter from the Chairman, Council of the District of Columbia, transmitting a copy of D.C. ACT 18-139. ''Closing of a Paper Alley in Square 5401, S.O. 07-121, Act of 2009'', pursuant to D.C. Code section 1-233(c)(1); to the Committee on Oversight and Government Reform.

2836. A letter from the Deputy Assistant Administrator For Regulatory Programs National Marine Fisheries, Department of Commerce, transmitting the Department's final rule — Fisheries of the Northeastern United States; Recreational Management Measures for the Summer Flounder, Scup, and Black Sea Bass Fisheries; Fishing Year 2009 [Docket No.: 090211163-9795-02] (RIN: 0648-AX69) received July 21, 2009, pursuant to 5 U.S.C. 801(a)(1)(A); to the Committee on Natural Resources.

2837. A letter from the Acting Director, Office of Surface Mining, Department of the Interior, transmitting the Department's final rule — West Virginia Regulatory Program [WV-115-FOR; OSM-2009-0006] received July 10, 2009, pursuant to 5 U.S.C. 801(a)(1)(A); to the Committee on Natural Resources.

2838. A letter from the Acting Director, Office of Surface Mining, Department of the Interior, transmitting the Department's final rule — Pennsylvania Regulatory Program [PA-148-FOR; OSM-2008-0014] received July 10, 2009, pursuant to 5 U.S.C. 801(a)(1)(A); to the Committee on Natural Resources.

2839. A letter from the Acting Director, Office of Surface Mining Reclamation and Enforcement, Department of the Interior, transmitting the Department's final rule — Civil Monetary Penalties [Docket ID: OSM-2009-0004] received July 1, 2009, pursuant to 5 U.S.C. 801(a)(1)(A); to the Committee on the Judiciary.

REPORTS OF COMMITTEES ON PUBLIC BILLS AND RESOLUTIONS

Under clause 2 of rule XIII, reports of committees were delivered to the Clerk for printing and reference to the proper calendar, as follows:

Mr. GEORGE MILLER of California: Committee on Education and Labor. H.R. 3221. A bill to amend the Higher Education Act of 1965, and for other purposes; with an amendment (Rept. 111–232). Referred to the Committee of the Whole House on the State of the Union.

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. ANDREWS:

H.R. 3345. A bill to amend titles 5, 10, and 32, United States Code, to eliminate inequities in the treatment of National Guard technicians, and for other purposes; to the Committee on Armed Services, and in addition to the Committee on Oversight and Government Reform, 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. FRANK of Massachusetts (for himself and Mr. KANJORSKI):

H.R. 3346. A bill to amend the Sarbanes-Oxley Act of 2002 to permit the sharing of confidential supervisory information with foreign auditor oversight bodies; to the Committee on Financial Services.

By Mr. McCOTTER:

H.R. 3347. A bill to withdraw normal trade relations treatment from the products of foreign countries that do not maintain acceptable standards of religious freedom and worker rights; to the Committee on Ways and Means.

By Mr. CAO:

H.R. 3348. A bill to amend the Digital Television Transition and Public Safety Act of 2005 to extend the interoperable emergency communications grant program through fiscal year 2012; to the Committee on Energy and Commerce.

By Ms. HERSETH SANDLIN:

H.R. 3349. A bill to grant a Federal charter to the National American Indian Veterans, Incorporated; to the Committee on the Judiciary.

By Ms. JENKINS (for herself, Mrs. BLACKBURN, Mrs. CAPITO, Mrs. MILLER of Michigan, Mr. BOREN, Mr. ALEXANDER, Mr. DAVIS of Kentucky, Mr. BOUSTANY, Mr. KINGSTON, Mr. KING of New York, Mr. GOHMERT, Ms. GINNY BROWN-WAITE of Florida, Mr. McCARTHY of California, Mr. RYAN of Wisconsin, Mr. PAUL, Mrs. LUMMIS, Mr. MORAN of Kansas, Mr. COLE, Mr. SULLIVAN, Mr. COFFMAN of Colorado, Mrs. BIGGERT, Mr. SHIMKUS, Mr. CONAWAY, Mr. TIAHRT, Mr. GOODLATTE, and Mr. SOUDER):

H.R. 3350. A bill to amend the Congressional Budget and Impoundment Control Act of 1974 to require roll call votes acknowledging the effect of the costs of legislation on the National debt; to the Committee on Rules, and in addition to the Committee on the Budget, 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 Ms. KILROY:

H.R. 3351. A bill to amend the Securities Exchange Act of 1934 to provide shareholders with a non-binding vote on executive compensation; to the Committee on Financial Services.

By Mr. SABLAN:

H.R. 3352. A bill to amend title 10, United States Code, to expand certain restrictions relating to the overhaul and repair of vessels in foreign shipyards to the Commonwealth of

the Northern Mariana Islands; to the Committee on Armed Services.

By Mr. SABLAN (for himself, Mr. FALEOMAVAEGA, Mrs. CHRISTENSEN, and Ms. BORDALLO):

H.R. 3353. A bill to provide for American Samoa and the Commonwealth of the Northern Marianas to be treated as States for certain criminal justice programs; to the Committee on the Judiciary.

By Mr. SENSENBRENNER:

H.R. 3354. A bill to amend the Internal Revenue Code of 1986 to repeal the 7.5 percent threshold on the deduction for medical expenses; to the Committee on Ways and Means.

By Mr. ALTMIRE:

H.R. 3355. A bill to direct the Secretary of Transportation to carry out a program to improve roadway safety infrastructure in all States to enhance the safety of older drivers and pedestrians, and for other purposes; to the Committee on Transportation and Infrastructure.

By Mr. MCCOTTER (for himself, Mr. KING of New York, and Mr. KING of Iowa):

H. Res. 680. A resolution calling upon President Obama to retract his initial public remarks and apologize to Cambridge, Massachusetts, Police Sergeant James M. Crowley for having unfairly impugned and prejudged his professional conduct in this local police response incident; to the Committee on the Judiciary.

By Mr. HUNTER (for himself, Mr. BILBRAY, Mr. FILNER, Mr. ISSA, Mr. SOUDER, and Mrs. DAVIS of California):

H. Res. 681. A resolution expressing condolences to the family and loved ones of Agent Robert Rosas and standing in solidarity with the brave men and women of the United States Border Patrol as they remember the service and sacrifice of Agent Rosas and continue their mission to preserve and defend our borders; to the Committee on Homeland Security.

ADDITIONAL SPONSORS

Under clause 7 of rule XII, sponsors were added to public bills and resolutions as follows:

H.R. 39: Mr. TIERNEY and Mr. PAYNE.
H.R. 122: Mr. FORTENBERRY.
H.R. 182: Mr. TOWNS.
H.R. 197: Mr. AKIN.
H.R. 239: Mr. ROTHMAN of New Jersey.
H.R. 265: Mr. ISRAEL.
H.R. 268: Mr. CARTER.
H.R. 272: Ms. RICHARDSON and Mr. SPACE.
H.R. 275: Mr. CARNEY and Mrs. MILLER of Michigan.
H.R. 303: Mr. DONNELLY of Indiana and Mr. FLEMING.
H.R. 406: Mr. GARRETT of New Jersey.
H.R. 422: Ms. SCHWARTZ.
H.R. 442: Mr. RADANOVICH and Mr. AKIN.
H.R. 483: Mr. SESTAK.
H.R. 615: Mr. WHITFIELD.
H.R. 699: Mr. WEXLER.
H.R. 853: Mr. FRANK of Massachusetts.
H.R. 949: Mr. KILDEE.
H.R. 953: Mr. BARRETT of South Carolina and Mr. ALTMIRE.
H.R. 1032: Mr. MILLER of North Carolina.
H.R. 1053: Mr. MORAN of Virginia.
H.R. 1086: Ms. FOXX.
H.R. 1177: Mrs. EMERSON.
H.R. 1182: Ms. CLARKE and Mr. WITTMAN.
H.R. 1203: Mr. GRIFFITH and Mr. JONES.
H.R. 1255: Mr. MASSA.
H.R. 1264: Mr. JONES.
H.R. 1265: Mr. PATRICK J. MURPHY of Pennsylvania.
H.R. 1362: Mr. POSEY.
H.R. 1382: Mr. SESTAK.
H.R. 1407: Ms. SCHAKOWSKY and Mr. LOEBSACK.
H.R. 1428: Mrs. BLACKBURN.
H.R. 1441: Mr. SPRATT.
H.R. 1443: Mr. ABERCROMBIE and Mr. SESTAK.
H.R. 1447: Mr. GARRETT of New Jersey.
H.R. 1490: Mr. KILDEE, Ms. JACKSON-LEE of Texas, Mr. SPRATT, Mr. ACKERMAN, Ms. HARMAN, Ms. ZOE LOFGREN of California, Mr. COHEN, Mr. KIND, and Mr. GRAYSON.
H.R. 1608: Ms. SCHAKOWSKY.
H.R. 1618: Mr. ACKERMAN.
H.R. 1691: Mr. ADERHOLT.
H.R. 1822: Mr. BARTLETT, Mr. INGLIS, and Mr. TIAHRT.
H.R. 1826: Mr. KAGEN and Mrs. LOWEY.
H.R. 1831: Mr. MURPHY of New York, Mr. HODES, Mr. CAO, Mr. ALEXANDER, Mr. STUPAK, Mr. TIM MURPHY of Pennsylvania, and Mr. MATHESON.
H.R. 1844: Mr. FILNER, Mr. WEXLER, and Mr. PLATTS.
H.R. 1894: Mr. TERRY.
H.R. 2000: Ms. HERSETH SANDLIN.
H.R. 2017: Ms. FOXX and Mr. ETHERIDGE.
H.R. 2024: Mr. YOUNG of Alaska.
H.R. 2058: Ms. TITUS and Mr. STUPAK.
H.R. 2060: Ms. SCHAKOWSKY.
H.R. 2109: Mr. WOLF and Ms. DEGETTE.
H.R. 2160: Mr. HINCHEY.
H.R. 2254: Mrs. BLACKBURN, Mr. WILSON of Ohio, Mr. DAVIS of Tennessee, Mr. BUTTERFIELD, Mr. MINNICK, Mr. YOUNG of Florida, and Mr. PASCRELL.
H.R. 2266: Mr. THOMPSON of California.
H.R. 2267: Mr. THOMPSON of California.
H.R. 2269: Mr. SESTAK.
H.R. 2296: Mr. RADANOVICH, Mr. YOUNG of Florida, Mr. SCHOCK, and Mr. DEFAZIO.
H.R. 2304: Mr. POMEROY.
H.R. 2381: Mr. OBERSTAR.
H.R. 2398: Mr. SKELTON.
H.R. 2406: Mr. BURTON of Indiana and Mr. PLATTS.
H.R. 2418: Mr. GRAYSON.
H.R. 2443: Mr. STUPAK and Mr. HASTINGS of Washington.
H.R. 2455: Mrs. CHRISTENSEN, Mr. COHEN, Mr. CONNOLLY of Virginia, Mr. FARR, Mr. FRANK of Massachusetts, Mr. JACKSON of Illinois, Mr. JONES, Ms. LEE of California, Mr. MORAN of Virginia, and Ms. WOOLSEY.
H.R. 2478: Mr. COHEN and Mr. HONDA.
H.R. 2519: Mr. MEEK of Florida, and Mr. LEWIS of Georgia.
H.R. 2529: Mr. HINOJOSA.
H.R. 2533: Mr. GARRETT of New Jersey.
H.R. 2555: Mr. CAMPBELL and Mr. MOORE of Kansas.
H.R. 2575: Mr. DENT.
H.R. 2681: Mr. MEEKS of New York.
H.R. 2709: Ms. BORDALLO.
H.R. 2740: Mr. FRANK of Massachusetts.
H.R. 2773: Mr. SESTAK.
H.R. 2808: Mr. LAMBORN and Mr. MCCLINTOCK.
H.R. 2811: Ms. WASSERMAN SCHULTZ.
H.R. 2835: Ms. SCHAKOWSKY.
H.R. 2913: Mr. YOUNG of Florida.
H.R. 2937: Mr. WITTMAN.
H.R. 2941: Ms. ZOE LOFGREN of California, Mr. RYAN of Ohio, and Ms. KAPTUR.
H.R. 2966: Mr. GRIJALVA.
H.R. 3006: Mr. PAYNE.
H.R. 3042: Mr. MCDERMOTT.
H.R. 3044: Mrs. SCHMIDT, Mr. CULBERSON, Mr. BARTLETT, Mr. WILSON of South Carolina, Mr. COURTNEY, Mr. AL GREEN of Texas, Mr. SMITH of Texas, Mr. SIMPSON, and Mr. MCCLINTOCK.
H.R. 3068: Ms. SCHAKOWSKY.
H.R. 3080: Mr. WEXLER.
H.R. 3127: Mr. HINCHEY.
H.R. 3129: Mr. KING of Iowa, Mr. CHAFFETZ, and Mr. CONAWAY.
H.R. 3135: Mr. PAULSEN.
H.R. 3136: Mr. PAULSEN.
H.R. 3138: Mr. STUPAK.
H.R. 3140: Mrs. LUMMIS, Mr. PAUL, Mr. SAM JOHNSON of Texas, Mr. WILSON of South Carolina, Mr. BISHOP of Utah, Mr. STEARNS, Mrs. BLACKBURN, Mr. MACK, Mr. BARTLETT, Mr. CANTOR, Ms. FOXX, Mr. HALL of Texas, Mr. CAMP, Mrs. MYRICK, Mr. HELLER, Mr. HERGER, Mr. BROWN of South Carolina, Mr. NEUGEBAUER, Mr. AKIN, Mr. OLSON, Mr. GINGREY of Georgia, Mr. MCKEON, Mr. BURTON of Indiana, Mr. ADERHOLT, Mr. SMITH of Texas, Mr. KINGSTON, and Mr. MORAN of Kansas.
H.R. 3190: Mr. BOUCHER.
H.R. 3218: Mr. SCALISE.
H.R. 3221: Mr. PASCRELL, Mr. WEXLER, Mr. ABERCROMBIE, Mr. SIRES, Mr. TOWNS, and Mr. SHERMAN.
H.R. 3232: Mr. CAPUANO.
H.R. 3245: Mr. KUCINICH, Ms. CORRINE BROWN of Florida, Ms. SCHAKOWSKY, Mr. MEEKS of New York, Ms. FUDGE, Mr. CARSON of Indiana, and Mr. HASTINGS of Florida.
H.R. 3246: Mr. LEVIN.
H.R. 3251: Mr. BURTON of Indiana, Mr. SAM JOHNSON of Texas, and Mr. GARY G. MILLER of California.
H.R. 3257: Ms. KILPATRICK of Michigan.
H.R. 3286: Mr. PETERSON, Ms. BORDALLO, and Mr. RYAN of Ohio.
H.R. 3287: Ms. SLAUGHTER.
H.R. 3289: Mr. HELLER.
H.R. 3295: Ms. ZOE LOFGREN of California, Ms. BALDWIN, Mr. CLEAVER, Mr. CAPUANO, and Ms. SCHAKOWSKY.
H.R. 3307: Ms. KOSMAS.
H.R. 3308: Mr. DREIER, Ms. FOXX, and Mr. HOLDEN.
H.R. 3328: Mr. AL GREEN of Texas and Mr. MCDERMOTT.
H.J. Res. 26: Mr. QUIGLEY.
H.J. Res. 44: Mr. WITTMAN and Mr. WOLF.
H. Res. 6: Mr. ALTMIRE, Mr. BOREN, Mr. CONAWAY, Mr. KIND, Mr. CARDOZA, Mr. LIPINSKI, and Mr. BARROW.
H. Res. 111: Mr. YOUNG of Florida, Mr. BERRY, Mr. THOMPSON of California, and Mr. HALL of New York.
H. Res. 225: Mr. ROONEY, Mr. PUTNAM, and Mr. GARRETT of New Jersey.
H. Res. 255: Mr. SESTAK, Mr. MORAN of Virginia, and Mr. STUPAK.
H. Res. 449: Mr. CAO.
H. Res. 494: Mr. BROWN of South Carolina.
H. Res. 508: Mr. SNYDER.
H. Res. 513: Mr. ALEXANDER, Mr. BROWN of South Carolina, Mr. JONES, Mr. MINNICK, Mr. PASTOR of Arizona, Mr. ROE of Tennessee, Ms. ROS-LEHTINEN, and Ms. SCHAKOWSKY.
H. Res. 554: Mr. CARNEY, Mr. EDWARDS of Texas, Mr. CHANDLER, Ms. KAPTUR, Mr. COHEN, Mr. MARSHALL, Mr. MICHAUD, Mr. BRIGHT, Mrs. DAHLKEMPER, and Ms. GINNY BROWN-WAITE of Florida.
H. Res. 558: Ms. FUDGE, Mr. MEEKS of New York, Mr. GORDON of Tennessee, and Mr. BUTTERFIELD.
H. Res. 561: Mr. ISRAEL, Mr. ENGEL, Mr. NADLER of New York, Mr. MURPHY of New York, Mr. MASSA, and Mr. HALL of New York.
H. Res. 562: Mr. ISRAEL, Mr. ENGEL, Mr. NADLER of New York, Mr. MURPHY of New York, Mr. MASSA, and Mr. HALL of New York.
H. Res. 563: Mr. ISRAEL, Mr. ENGEL, Mr. NADLER of New York, Mr. MURPHY of New York, Mr. MASSA, and Mr. HALL of New York.
H. Res. 649: Mr. BLUMENAUER, Mr. FORTENBERRY, and Mr. DOGGETT.
H. Res. 677: Mr. BURTON of Indiana.