

U.S. AND THE WORLD EDUCATION ACT

(Ms. LORETTA SANCHEZ of California asked and was given permission to address the House for 1 minute and to revise and extend her remarks.)

Ms. LORETTA SANCHEZ of California. Mr. Speaker, I rise today to urge my colleagues to support the U.S. and World Education Act which I will be introducing today. My bill addresses the critical need to raise student achievement levels in the national education arena which is vital in order to compete in a world that is rapidly changing.

My bill will raise the international education competence and literacy levels of elementary and secondary students. My bill will also create an international education research repository which will greatly enhance the international education curriculum taught in our schools as well as teaching methods.

I firmly believe that our schools today do not focus enough on preparing our youth to interact and to communicate with other countries and cultures. And given the current economic crisis, future generations must be equipped with a skill set that will help them to excel academically and contribute to our Nation's economic recovery.

I urge my colleagues to cosponsor the U.S. and World Education Act.

GOVERNMENT SHOULD NOT COME BETWEEN DOCTOR AND PATIENT

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

Mr. LEWIS of California. Mr. Speaker, excellent health care begins with a great personal relationship between a physician and his or her patient. Government should not attempt to get between them. America has a health care delivery system second to none. Problems such as portability and covering preexisting conditions can be underwritten actuarially without throwing out a system that works for the vast percentage of Americans.

Every American family knows excellent care does involve some costs. While we pay our doctors fairly for their service, government should not get in the way.

NOW IS THE TIME

(Ms. WATSON asked and was given permission to address the House for 1 minute and to revise and extend her remarks.)

Ms. WATSON. Mr. Speaker, I'm so excited because now is the time for America's health insurance reform, and we got a report on Friday from the CBO that affirmed that the insurance reforms in our bill are deficit-neutral over the next 10 years and will even create a \$6 billion surplus. More than

80 major groups have already expressed support for America's Affordable Health Choice Act, including the American Medical Association, AARP, Main Street Alliance—and it's a small business group—and numerous medical specialty groups.

I just spoke to 3,000 members of the National Medical Association. I went through the outline of our bill and there was no question that I could not answer for them and they are 100 percent supportive of it.

We need a uniquely American solution.

THE AMERICAN PEOPLE DESERVE A BIPARTISAN APPROACH ON HEALTH CARE

(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, the House Democrat leadership remains opposed to working in a bipartisan effort to cure what ails our health care system. This is unfortunate because this has caused bipartisan opposition to their Big Government, job-killing, debt-producing, tax-hike health care plan. The American people deserve better to create jobs.

The American people know better than to believe that the government is best to run our Nation's health care system or keep costs down. The Democrat plan does not lower the cost of health care. It just raises taxes on small businesses and cuts Medicare by half a trillion dollars. Those tax increases and Medicare cuts do not even cover the costs producing an estimated \$239 billion more added to the deficit. Taxing small businesses and knocking seniors off their current health care plan is no way to reform health care.

Republicans stand ready to work with our Democrat colleagues to develop commonsense reform.

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

UNIQUE SOLUTIONS TO HEALTH CARE

(Ms. HIRONO asked and was given permission to address the House for 1 minute.)

Ms. HIRONO. Mr. Speaker, we've been grappling with how to provide all of our citizens with access to affordable, quality health care since President Truman's time. With health care costs being 18 percent of our GDP and growing and 47 million uninsured, we need to take action now. My Education and Labor Committee spent 22½ hours in a 24-hour period debating H.R. 3200, a historic bill.

In 1974, the State of Hawaii enacted historic legislation of its own called the Prepaid Health Care Act. This law requires employers to provide health care coverage to full-time employees. After 35 years, the Prepaid Health Care

Act remains the only employer mandate law of its kind in our country.

An economist at the University of Hawaii estimates that per capita, health expenditures in Hawaii have been about 7 percent lower than the national average. The economist believes that Hawaii's wider health insurance coverage and support for preventive health care led to this outcome.

Hawaii's Prepaid Health Care Act has been the major driver in the health and well-being of our residents.

HEALTH CARE

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

Mr. PITTS. Mr. Speaker, with Congress deep in negotiations over the substance of health care reform, I'm increasingly concerned about the President's recent unhelpful remarks.

In his remarks last week, he maintained that a pediatrician treating a child with a recurring sore throat may recommend removing tonsils merely to increase the reimbursement from an insurance company. To insinuate that doctors are ordering unnecessary surgeries on children for a few more dollars in reimbursement is deeply offensive to millions of doctors who work each day to help us raise healthy children. Over the weekend, I was approached by several constituents in the health profession who said those remarks were insulting to them.

I worry that the President may have an unrealistic view of the medical community and the overwhelming and vast number of hardworking doctors and nurses that are concerned first with the health of patients. While we're not trying to do nothing, we're not arguing for the status quo. As we reform our health care system, we should be careful. We're not trying to fix some things that aren't broken and in the process break other things that currently work for millions of American.

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HEALTH CARE REFORM FOR OLDER AMERICANS

(Mr. MAFFEI asked and was given permission to address the House for 1 minute.)

Mr. MAFFEI. Mr. Speaker, earlier today I welcomed to the Capitol Dr. Sharon Brangman from my district, who was recently named the next president of the American Geriatrics Society. This morning she told me and other Members how physicians who work with the elderly are spending an overwhelming majority of their time providing primary care often without appropriate compensation through the current Medicare formulas. The extra year of training and additional expertise actually mean less pay, which is one of the reasons why we have an acute shortage of geriatricians in America.

Mr. Speaker, baby boomers entering into the later stages of life will cause America's older population to double in the next few years. We must reform our health care system to adequately compensate doctors for providing preventative and coordinated care to patients in every stage of life. If we do it right, it will save money because many superfluous and harmful treatments will be eliminated and seniors will not only live longer but better lives.

HEALTH CARE BILL AN IMPEDIMENT TO JOB CREATION

(Mrs. MILLER of Michigan asked and was given permission to address the House for 1 minute and to revise and extend her remarks.)

Mrs. MILLER of Michigan. Mr. Speaker, many of my Republican colleagues and I have been coming down to this floor and asking the question, where are the jobs? Because the stimulus package has failed to deliver on the promise of 3 million jobs that it said it would, and instead our economy has actually lost over 3 million jobs.

And now we will soon be asked to vote on a health care reform package that places even more hurdles to jobs and growth of job creation. The health care plan being debated puts an onerous new tax on individuals and small business job creators through a surtax on income. It adds a new 8 percent tax on payrolls for companies that don't provide health care, Mr. Speaker.

Does anyone actually believe that the addition of this new tax will encourage job providers to either raise their workers' pay or to create new jobs when both of these actions actually lead to higher taxes?

In the rush to pass the stimulus, the Democrats put \$1 trillion of new debt on our children and on our grandchildren and did not create the jobs that we need. In our rush to pass a new health care bill, we will now put new hurdles to job creation and economic growth.

Where are the jobs? Clearly not in this new health care package.

THE RECOVERY ACT IS WORKING

(Mr. SCHRADER asked and was given permission to address the House for 1 minute.)

Mr. SCHRADER. Mr. Speaker, for the past couple of weeks, Members from the other side of the aisle have come to the floor, as we have heard today, and rhetorically asked, where are the jobs? Assertions have been made the Recovery Act was ineffective and hasn't created any jobs. Well, that simply isn't the case in my district. I would like to give one example, Mr. Speaker.

As Oregon families prepare to send their children back to school, let's talk about what the recovery dollars are doing in our local school districts, often the heart of our communities. In my district, recovery funds are saving the equivalent of 145 teaching and sup-

port jobs in one school district alone, the Salem/Keizer School District, in the 2009–2010 school year. These are positions that would have been eliminated without this critical funding and are crucial to the core academic growth and development of our students.

These same recovery dollars are also preventing the equivalent of a district-wide, class-size increase of 2½ students and preventing an 11-day reduction in the school year. Money well spent.

We don't spend enough time in this building talking about the jobs that are saved and families that are benefiting from these recovery dollars. Without the recovery package, more teachers would have lost their jobs and our students would have suffered.

SITTING ON THE SIDE OF THE ROAD

(Mr. POE of Texas asked and was given permission to address the House for 1 minute.)

Mr. POE of Texas. Mr. Speaker, Sammy Mahan is a small business entrepreneur. He owns and operates Sammy's Wrecker Service in Baytown, Texas. He owns 7 trucks, employs 5 drivers, a dispatcher, and people who work the wrecker yard. His drivers work on a commission, and he cannot afford to furnish them health insurance.

He told me how the new government health care plan that mandates employers provide employee health benefits would affect him. Leaving out his colorful language, he said, "I am worried to death. This government health care bill and the new taxes on energy and small business will ruin me. I will have to lay off my drivers. They're all young, some with young families, and then they will have no jobs. I will be the lone survivor of the business. Then I won't be able to sell the wreckers I can't use. Who would buy them? I will be putting the trucks on the side of the road next to the kids who have signs saying 'free kittens' and offering 'free wreckers.'"

Now, Sammy has a point. The government-run health care plan will cost jobs and put workers on the street or, shall we say, sitting on the side of the road.

And that's just the way it is.

THE GENOCIDE IN THE DARFUR REGION

(Ms. MOORE of Wisconsin asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Ms. MOORE of Wisconsin. Mr. Speaker, I rise today to draw awareness to the unconscionable human tragedy that is still taking place in the Darfur region. It has been 5 years since the United States Congress declared genocide in Darfur, but thousands continue to perish.

Today I join activists in 34 countries who started fasting in April when eight

organizations were kicked out of Darfur by the Sudanese President, leaving 1.1 million innocent civilians without basic access to food, water, and medicine.

From sunrise to sunset today, I will consume only water to demonstrate solidarity with the people of Darfur. It is an insignificant act relative to the magnitude of the tragedy unfolding there. But I join thousands in this simple act and hope that a critical mass will prick our global consciousness, keep us focused on the hundreds of thousands who have lost their lives.

I especially want to thank the Plymouth United Church of Milwaukee, Wisconsin, members of the Faith Darfur Coalition, who are joining me today.

My fast won't stop the tragedy unfolding in Darfur, but I hope it will carry me deeper into thought and to help me reflect on how to end this tragedy.

DON'T RUSH HEALTH CARE; GET IT RIGHT

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

Mr. PAULSEN. Mr. Speaker, health care is one of the most important issues that Congress will address this year. We need to make sure we take the time to get it right.

However, congressional leaders have other plans. Rather than taking the time to get it right, they want to spend another \$1.6 trillion on a government health care plan that includes \$500 billion in cuts in Medicare for seniors. And regardless of any arm twisting, no one can change the fact that this plan will slide our Nation deeper into debt. In fact, just 2 days ago, the non-partisan Congressional Budget Office ascertained and confirmed that the proposed health care plan would cause a massive spike in the Federal budget deficit, adding as much as \$1.6 trillion over the next 10 years.

Mr. Speaker, more runaway deficits are something that Americans cannot afford. Let's reform our health care system the right way without raising taxes on small business and without adding new debt on our children and our grandchildren.

HEALTH INSURANCE REFORM

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

Mr. ELLISON. Mr. Speaker, the time is now. Members on the party opposite say we need more time, slow down.

But what about six decades of demanding that we fix health care in America? What about the 45 hours of bipartisan debate in three separate House committees on this legislation? What about the 79 House hearings that we've had? What about those people who today face being turned down because they have a preexisting condition? What about those folks who got a