

## PERSONAL EXPLANATION

Mr. DOLD. Mr. Speaker, due to district business, I was unavoidably back in my Congressional District on March 20, 2012. Had I been present, I would have voted "yea" on H.R. 665, the Excess Federal Building and Property Disposal Act of 2011, and "yea" on H.R. 2087, "To remove restrictions from a parcel of land situated in the Atlantic District, Accomack County, Virginia."

APPOINTMENT OF MEMBERS TO  
THE JOINT CONGRESSIONAL  
COMMITTEE ON INAUGURAL  
CEREMONIES

The SPEAKER pro tempore. The Chair announces the Speaker's appointment, pursuant to Senate Concurrent Resolution 35, 112th Congress and the order of the House of January 5, 2011, of the following Members of the House to the Joint Congressional Committee on Inaugural Ceremonies:

Mr. BOEHNER, Ohio  
Mr. CANTOR, Virginia  
Ms. PELOSI, California

REPEAL THE AFFORDABLE CARE  
ACT

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

Mr. THOMPSON of Pennsylvania. Mr. Speaker, just last week the non-partisan Congressional Budget Office served a devastating blow to President Obama's most frequently uttered promise during debate over the Affordable Care Act: "If you like your present coverage, you can keep it."

The CBO predicted the law would lead to a net loss of employer-based insurance coverage for between three and five million people each year between the years of 2019 and 2022, with as many as 20 million Americans losing their current insurance plans.

Now, as we approach the second anniversary of the Affordable Care Act, the full impact of this law remains unknown. However, a few things are quite clear. Supporters said it would lower costs. It hasn't. They said it would improve quality. It hasn't. The President said you can keep your current plan if you like it. This clearly is not the case.

By the administration's own estimates, the new health care regulations will force most firms, and up to 80 percent of small businesses, to give up their current plans by 2013.

Mr. Speaker, the American people can't afford another year of the so-called Affordable Care Act.

RECOGNIZING THE BETH DAVID  
CONGREGATION'S 100TH ANNI-  
VERSARY

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

Ms. ROS-LEHTINEN. Mr. Speaker, today I rise to recognize the 100th anni-

versary of the Beth David Congregation in my congressional district. This Saturday, March 24, Beth David will hold its centennial celebration to honor its congregation and its founding members.

For the last century, Beth David has been the cornerstone of the south Florida Jewish community. What started out as a congregation of just a handful of dedicated Jewish families has become a dynamic, thriving institution that is the cultural and educational epicenter for Judaism in south Florida.

But Beth David does not just have an incredibly rich history of outstanding service to the Jewish community. No, the congregation has been at the forefront and actively engaging our entire community, tirelessly working to repair the community one mitzvah at a time. And for that I congratulate Beth David, and I thank all of the congregation for everything they have done and everything they have meant to our south Florida community.

I wish them continued success and 100 more years.

REPEAL IPAB

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

Mr. FLEMING. Mr. Speaker, we now have reached a landmark, 2 years since the passage of ObamaCare. More and more, the American people have been hearing about something called IPAB, the Independent Payment Advisory Board—the centerpiece to ObamaCare and its inevitable rationing of health care.

This is a board of 15 unelected, unaccountable and not necessarily health care-experienced individuals who will have more power than even Congress, itself, when it comes to deciding what care every American will receive. The board members will not be under congressional oversight and will not answer the phone when you call to complain. Americans agree by 57 percent to 38 percent margins ObamaCare and IPAB should be fully repealed.

So far, Democrats have been unwilling to listen to the outcry from the American people. They will have yet another chance to respond to "we the people's" unhappiness with ObamaCare by voting with Republicans this week to repeal IPAB. And, hopefully, they will be willing to vote to repeal ObamaCare, itself, in its entirety when it is brought up for a vote sometime in the future.

□ 1730

IPAB

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

Mr. ROE of Tennessee. Mr. Speaker, tomorrow we begin debate on a bill that would eliminate the Independent Payment Advisory Board, one of the

most toxic components of President Obama's Affordable Care Act. This denial-of-care board is comprised of 15 unelected, unaccountable bureaucrats that will be empowered to cut Medicare in order to meet arbitrary spending targets.

Not only will this result in seniors being denied access to medical care they need, it will also put the government in the middle of the patient-doctor relationship.

Spending cuts proposed by the IPAB will automatically go into effect unless Congress finds alternative cuts of the same amount. And because implementation of the board's recommendations is exempted from judicial review, citizens can't even turn to the courts for help.

As a physician with over 30 years in practice, I can tell you that the President's proposal, which he has repeatedly defended, is wrongheaded and dangerous.

We must act to save Medicare from bankruptcy, which will come as soon as 2016, but IPAB is not and must not be the answer.

ONGOING HEALTH CARE DEBATE

The SPEAKER pro tempore (Mr. GOWDY). Under the Speaker's announced policy of January 5, 2011, the gentleman from Georgia (Mr. WOODALL) is recognized for 60 minutes as the designee of the majority leader.

Mr. WOODALL. I appreciate the majority leader giving me the time to come down here today, because I've got IPAB on my mind, Mr. Speaker. I say that like everybody knows what that is because we talk about it here in this Chamber all day long. IPAB, a word that was not even in the lexicon of America until the President passed his health care bill.

What is IPAB? I happened to bring down with me today, Mr. Speaker, the front page of the President's health care bill, the Patient Protection and Affordable Care Act as he describes it. This was the 900-page law that was passed that completely restructured a sixth of the American economy.

The question then is, when we're talking about the Patient Protection and Affordable Care Act and we're talking about how we change the individual health care decisions that every American gets to make, what do we get for it? What's the value added there? Because I think, Mr. Speaker, at the end of the day, when folks are talking about what motivates them, it really is affordable care. That's why we named the bill this way, the Patient Protection and Affordable Care Act. We want patients to be protected, to be able to make their own health care choices. We want care to be made available to folks at prices that American families can afford. There are 900 pages in that health care bill, Mr. Speaker.

Now, IPAB, how would we describe it? We would call IPAB the hammer in the health care bill, because there are