

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

(Mr. SALAZAR addressed the House. His remarks will appear hereafter in the Extensions of Remarks.)

THE PUBLIC'S OPTION

The SPEAKER pro tempore. Under a previous order of the House, the gentlewoman from New York (Mrs. MALONEY) is recognized for 5 minutes.

Mrs. MALONEY. Mr. Speaker, the American Medical Association has given a ringing endorsement of H.R. 3200, America's Affordable Health Choices Act. This legislation contains a strong public insurance option which would guarantee that quality, affordable health care is available to all Americans.

The AMA has not always been on board with health care reform. Many of us remember their opposition to President Clinton's efforts. Yet the AMA and the millions of doctors it represents now realize that the status quo system is broken. They understand the urgency of the problem, and they recognize that the pending bill is a major part of the solution.

The AMA's strong voice joins the chorus of Americans who want this Congress to pass a health care reform bill that includes a public option. Nearly three-quarters of all Americans want the option to participate in a government-administered health insurance plan that competes on a level playing field with private insurers. Popular support for the public option is not a partisan issue. Seventy-one percent of independent voters support the public option, and so do half of all Republican voters.

Americans want this bill. They want the public option, and they want us to act now.

Americans understand the critical role the public option plays in slowing skyrocketing health care costs. A government-administered plan can provide quality insurance at a low cost, leading by example to make the health care market more efficient.

Efficiency will save families money. If we fail to act, the cost of health care for the average family of four will rise by \$1,800 annually for years to come. The public option is not just important for families. It's also key to putting our Nation's economy on the road to a full and sustainable recovery. If we don't contain health care costs, then our Nation's budget deficit will continue to spiral out of control.

Let us be very clear. The public option is not an attempt to drive private insurers out of business. Some State governments already offer their employees a choice between public and private health insurance, and private insurers have fared just fine.

A public option is critical to containing the health care costs that weigh so heavily on our Nation's fami-

lies and on our Nation's economy. The public option does what a good private policy should do. It promotes primary care. It caps out-of-pocket spending so that a family medical crisis no longer means a family financial crisis. It establishes shared accountability between doctors, patients and the insurer. It institutes new payment structures to promote critical reforms. It will ensure that patients are able to get the medically effective treatments their doctors recommend. In short, it provides high-quality care at an affordable price.

Just like private plans, the public option will be financially self-sustaining, receiving no special government funding beyond a loan to get it off the ground. The public plan will be bound by exactly the same rules that regulate private insurers. In other words, the public plan will compete on a level playing field with private insurers.

Some powerful industries have spoken out against the public option. They prefer the status quo where decisions about treatment a patient receives are determined according to a company's bottom line rather than according to what a patient needs.

On the side of meaningful reform, the most important voice of all is calling for the inclusion of a public option. That loud chorus is the voice of the American people. Now is the time to listen to them. Now is the time for health reform with a strong public option.

DEMOCRAT CENSORSHIP OF GOP VIEWS OF HEALTH CARE REFORM

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from California (Mr. DANIEL E. LUNGREN) is recognized for 5 minutes.

Mr. DANIEL E. LUNGREN of California. Mr. Speaker, when I served in this House the first time around, the Cold War was still ongoing, and there was a term that often appeared in the press. It was called Samizdat, S-a-m-i-z-d-a-t. That word was used to describe communications which conveyed the opinions of people disfavored by an oppressive regime. It was the personally published commentary among peoples who felt they were oppressed in Communist countries. Why? Because their opinions were not allowed to be expressed in the official press.

Today, we have a situation in this House in which Mr. HERGER, Mr. LAMAR SMITH, Mr. LAMBORN, Mr. BONNER, Mr. WESTMORELAND, Mr. OLSON, Mr. SHUSTER, Mr. ROSKAM, Mr. MCCOTTER, Mr. GINGREY, Mr. FLEMING, Mr. BOUSTANY, Mr. CONAWAY, and Mr. PRICE thus far have been refused by the majority permission to express their points of view with respect to one of the most critical issues facing our country, that of reforming our health care system.

One of the most distinguished Members of this body, a member of the Ways and Means Committee, Congress-

man KEVIN BRADY from Texas, in working with the Republican economic staff of the Joint Economic Committee, came up with this chart, outlining what we believe to be the bureaucratic nightmare contained in the majority's proposal for health care.

Now, the majority disagrees with our interpretation of the facts, and that's part of politics. That's part of this body, but the majority has now said we will not allow you in the minority to use any official communications mechanisms to share your views of the impact of this legislation on your constituents.

Now, why does this seem strange?

Well, it just happens that, in 1993, we were faced with what later became known as HillaryCare, an attempt by the Clinton administration to take over health care by the Federal Government. At that time, Republicans also came up with a flowchart that showed the bureaucratic morass that would result from that proposal. I have with me a copy of the permission from the franking commission at that time that this be allowed. The only difference I can see between the two charts is that one is in black and white and that one is in color.

What has happened in the interim? Well, HillaryCare was defeated. The President said we can't stand to defeat his particular proposal, that they somehow have all of the answers.

Now, some people may say, "Well, what is it that the franking commission is supposed to do? What are your rules?" The rules have been established essentially to make sure that Members do not abuse the right of communication by turning their publications into campaign pieces, so we limit the number of pictures one can have there, the number of references that can be made to the Member, himself or herself.

To give you an example of what we on the Republican side have approved, I have a newsletter that has gone out by one of the Members on the Democratic side in which the claim was made that the stimulus package has helped create and save 3.5 million Americans jobs. I think that's absurd; I think that is a point of argument, but I don't believe that we ought to stop a Member of Congress from the Democratic side from making that assertion to his constituents.

I have another one with me that was approved in which a Democratic Member has claimed that 3.5 million jobs nationwide have been created—215,000 jobs in New York and 7,200 jobs in her particular district.

Then I have a copy of a letter that was approved last year from the Speaker, herself, in which she says that the New Direction Congress—that's how she defines it—also fought to increase compensation for our troops in the face of opposition from the Bush administration. It then goes on to criticize the President even though he signed it.

We disagree with the characterizations that were in Speaker PELOSI's