

to avoid death from breast cancer is to have regular mammographic screening, said Dr. Blake Cady at a breast cancer symposium sponsored by the American Society of Clinical Oncology. Interestingly, in their article they cite some statistics, and I'll be honest, these are statistics that I knew but I had forgotten. The rates of cancer deaths in the current study, 25 percent of them occurred in women who had regular screenings. Seventy-five percent occurred in women who did not. That's a 3-to-1 risk ratio of dying from breast cancer between those who were screened and those who were unscreened. In fact, they go on to say that amongst women who were unscreened, the 56 percent mortality is the same overall mortality we used to see in breast cancer up until 1970 prior to the onset of widespread mammographic screening.

Another piece of information I wanted to share tonight is from the American College of Obstetrics and Gynecology from their president, Gerald F. Joseph, who wrote to me December 4 of this year:

As you know, the American College of OB-GYN expressed concern about the new breast cancer screening guidelines in a letter to the United States preventive service task force in May where we raised concerns that the C recommendation against routine screening mammography in women ages 40 to 49 would be misunderstood by clinicians, by patients, misunderstood by policymakers and insurers and ultimately this could prevent women in that age group from receiving important services. Immediately following the release of the new guidelines, the American College of OB-GYN instructed fellows of the college that it would continue to recommend routine screening for women in this age group.

Here is probably the most critical point of Dr. Joseph's letter. In his last paragraph, This is especially critical right now as we caution Congress against giving the United States preventive service task force authority over women's health in health care reform.

Today, these guidelines are simply that, they are just guidelines. Any doctor or patient is free to take them or disregard them, however it is their wish. Once this bill, as the gentlelady correctly pointed out, becomes law, no longer will that be an optional exercise. Those will be the mandated screening guidelines that will be established in law. And I will tell you as a physician, if an insurance company decides they're not going to cover something, the patient isn't going to get it done. It is just as simple as that. This is a step backward, as Dr. Cady pointed out. It is going back prior to 1970 when we had that 56 percent mortality prior to the institution of regular screenings. We don't need to do that. We don't need to do that as a country. We have the information, we need to act on the information, we need to

keep patients involved in their own health care. I cannot tell you the number of people who came to me ultimately who had a diagnosis of breast cancer who found the cancer themselves. I didn't find it on a clinical exam. They found it on a breast self-exam. It wasn't detected on a mammogram. It may have occurred in that 2-year period between screens, but the patient found it herself. The earlier diagnosis was made possible by the patient's involvement in her own care. And to say that we are unnecessarily alarming patients by teaching them to be involved in their own care I think does women a great disservice.

So I thank the gentlelady for bringing this to the floor of the Congress tonight. I am going to submit the letter from the American College of OB-GYN president for the CONGRESSIONAL RECORD, and I thank you for providing this very valuable service for women tonight on the House floor.

THE AMERICAN COLLEGE OF
OBSTETRICIANS AND GYNECOLOGISTS,
Ponchatoula, LA, December 4, 2009.
Hon. MICHAEL BURGESS, M.D.FACOG,
Cannon House Office Building,
Washington, DC.

DEAR DR. BURGESS: On behalf of the American College of Obstetricians and Gynecologists (ACOG), representing over 53,000 physicians and partners in women's health, thank you for your remarks at the December 2nd Breast Cancer Screening Recommendations hearing held by the Energy and Commerce Subcommittee on Health. Your opening statement and questions to the United States Preventive Services Task Force (USPSTF) panel highlighted both the importance of the doctor-patient relationship in making medical decisions, and the flaws in the USPSTF recommendations process.

Once again, your medical knowledge and expertise are proving invaluable to Congress' development of good health policy.

As you know, ACOG expressed concern about the new breast cancer screening guidelines in a letter to the USPSTF in May, where we raised concerns that the C recommendation against routine screening mammography in women ages 40-49 would be misunderstood by clinicians, patients, policymakers, and insurers and that ultimately, this could prevent women in that age group from receiving important mammography services. Immediately following the release of the new guidelines, ACOG instructed its Fellows that the College would continue to recommend routine screening for women in this age group.

Your questions to the panel effectively highlighted the flaws in the process by which the USPSTF makes recommendations. Lack of transparency and public input are part of the problem; there is no formal mechanism for the public to comment on proposed guidelines, and comments that the Task Force receives from experts are not often taken seriously. We also appreciate your comment that the USPSTF is comprised mostly of primary care doctors and includes only a limited number of ob/gyns and other specialists. This point is especially critical right now, as we caution Congress against giving the USPSTF authority over women's health in health care reform.

Thank you again for your remarks and for always standing up for women's health.

Sincerely,

GERALD F. JOSEPH, M.D.,
President, ACOG.

Mrs. SCHMIDT. Thank you so much because you are the medical expert in the field and I'm so glad that you came here to share your testimony this evening, my good friend from Texas. Because as we continue with this health care debate, the one underlying theme that I think the American public has is, will this interfere with their health. And I think what we're seeing from this task force's recommendations is that when the government takes over the health care, it has the potential ability to do just that—interfere with our health. This task force had a flawed document, it was driven to say that the risks for women were anxiety, but it also said in the report that costs outweighed, were looked at in looking at when you should have the mammographies and when you shouldn't have the mammographies. This report clearly was driven by the fact that it costs money to have good health care, no matter where you are.

□ 2200

And so it showed if you eliminate mammography for women under the age of 50, you eliminate a whole lot of cost. And for 556 women, that is okay. But that unlucky one that's after 556, she's the one that is going to be missed.

And so as we debate health care in this country, we should never put a price on it, and we should never allow government to interfere with our lives, especially when it comes to the care of our health and our family.

So I hope that we take what's out there in the bills in the House, in the Senate, and we delete them and we start over with a commonsense approach to solving the problems with health care in this country because quite frankly, we have the best health care in the world. It needs tweaking, but what we're doing right now potentially would change it and change it in a fashion that I don't think any American wants.

My good friend from Texas, if you don't have anything more to say, I think we will yield back our time.

I yield back our time, Mr. Speaker.

HEALTH CARE

The SPEAKER pro tempore. Under the Speaker's announced policy of January 6, 2009, the gentleman from Iowa (Mr. KING) is recognized for 60 minutes as the designee of the minority leader.

Mr. KING of Iowa. Thank you, Mr. Speaker. It's my privilege to be recognized and address you here on the floor of the House and pick up—I think, transition from the discussion that has taken place in the previous hour by the gentlelady from Ohio—and I appreciate the presentation that's been made here—and to fit the breast cancer issue in with the larger health care debate is what I will seek to do, Mr. Speaker.

And that is this: that the question about how breast cancer is treated and how it's tested fits back into the broader question of what happens if we end

up with a national health care act. What happens if we end up with socialized medicine? Do we get more of this or less of this? Do we get more government agencies that are laying out guidelines that are, as I believe—and I agree with the gentlelady from Wyoming and with the doctor from Texas—that do we get more government guidelines that cut down on the costs of the tests but raise the costs in lives? And do we get that in breast cancer, and do we get that on nearly every other aspect of health care?

This debate has gone on and on here on health care, and it reached its crescendo during the month of August in the aftermath of the cap-and-trade bill, the bill that no one read, not one single person read, not one Member of Congress read. I know that no one read the bill—I don't have to ask everyone here—because the bill was not available. When the bill was passed, it was not available in a form that resembled final form.

And I remember Congressman LOUIE GOHMERT come to the floor, Mr. Speaker, and raising the question, parliamentary inquiry, Is there a bill in the well? Is there a copy of the final bill, the one that we're debating and the one that we're voting on? But it's not in the well. Not an integrated bill, not with the amendments that were included in that.

And so the final question he asked after a series of them, Can we message a bill that doesn't exist to the United States Senate? Apparently that is what we could do, and that is what happened. That bill, cap-and-trade, sits over there now before the United States Senate, as does a national health care bill. And they are, of course, taking it up and debating it and fitting it around some of these things that they're doing. And it looks like this is the week that the United States Senate turns the focus on their national health care act.

Now, we have taken this argument, policy-by-policy, ideology-by-ideology through this House, but it comes down to this just as a refresher, Mr. Speaker, what brought this all about: increasing costs in health care in the United States and, around the world, a growing focus on health care.

But I think that a lot of it emerged during the Democrat primary for President when Hillary Clinton looked at one point like she would win the nomination. She's the one that led the argument and led the meetings—both open and closed door—for what a lot of America still remembers as HillaryCare back in 1993, 1994, in that era. And since Hillary Clinton knew a lot about health care and that was the centerpiece of her campaign, she brought that to the debate and used that in the primary campaign.

And as the contest for the nomination on the Democrat side for the President shook down to one of two people, Barack Obama or Hillary Clinton, the pressure that Hillary brought

into that campaign to raise the issue of health care made it a central issue in the Democrat primary. And it forced, in my opinion, Barack Obama—then-Senator Obama—to run a health care agenda of his own, something to match up to and counteract with and seek to win the debate on the Democrat side of the primary voting aisle. And I believe that the urgency that America has is not reflected exactly off of the data that's out there and the economics of it and the need.

But it's more reflected because there was a political gain to be had in the nomination process for President, especially on the Democrat side, and as that debate emerged, and Barack Obama was successful in winning the nomination and then ultimately the presidency, he carried that mantle of health care reform through the entire process—inspired by Hillary Clinton, I believe—and pushed to a high level of a priority, which I'm convinced, Mr. Speaker, that they believe that it is the highest priority in America. They have made it that. They must believe that, and I'm not challenging that approach. I'm just suggesting that because it was a primary issue in the nominating process for President on the Democrat side, it gained some momentum that it wouldn't have had if we were going to step back and look at the health care issue.

And so it became something that the President, when he was elected, saw as a mandate, a mandate to go in and pass some kind of a national health care act.

Well, you would think that you could go right down through the logic line and flip the toggle switches and get down to something that makes sense. And the principles that were laid out by Barack Obama as a candidate—and later as a President—came down to this. Health care costs too much money. The economy is in a mess, and it's in a downward spiral. We have to fix the economy—this is the President's philosophy, and we can't fix the economy unless we first fix health care that costs too much money. That's the rationale. It's threaded through a number of his speeches.

It never seemed rational to me. I couldn't follow the logic of "the economy's in a mess; we have to fix health care to straighten out the economy; we spend too much on health care, therefore we're going to fix it." I can get maybe that far, but then the rationale on my side of the aisle, among Republicans, would be, Well, if we spend too much money on health care, where are we spending it that we don't need to?

The President concludes it's a half-trillion dollars in Medicare, which would inappropriately punish many of the senior citizens in America—some of whom are being led by AARP, who will apparently make more money selling insurance if a bill is passed than they will serving their membership if it's not passed. So they have come out to support this bill.

But the President said, We're spending too much money; let's spend more. And he wants to keep the bill down under \$900,000 but the doc fix throws another \$243 billion, is the original number, at this and it takes it over a trillion. And if you look at some of the other numbers, if you evaluate this as JUDD GREGG did, Senator JUDD GREGG from New Hampshire, that they're doing the math on this bill in this fashion: 5½ or so years of expenses, 10 years of tax increase and income. So it shows up to only be a number that at some place around or a little bit under a trillion dollars, Mr. Speaker, in extra costs.

JUDD GREGG says it's \$2½ trillion once you take an objective look at the math and at the accounting. If you look at actually 10 years of expenses and 10 years of revenue, it is about a \$2½ trillion dollar bill.

□ 2210

So if the President's statement is that we spend too much money on health care, about 14½, and some will even say 16 or more percent of our GDP on health care, we spend too much money on health care, therefore we have to solve the problem by spending a lot more. This diabolical, Orwellian logic is something that the American people are still breathlessly amazed that a President and leaders in this country can get by with such statements. Health care costs too much money, so we will spend 1 or 2 or maybe even approaching \$3 trillion more, that will solve the problem, Mr. Speaker. If we spend too much money, let's spend a lot more.

Another one of the points is there are too many uninsured in America. Now, over the last 3 or so years, there has been an intentional effort to conflate the two words of "health care" and "health insurance," and the effort has been on the part of the people on the left to blur the subject matter of the difference between health care and health insurance. They will say we have too many people that don't have health care in America. But they don't take into account that what health care really means is, do you get treated by doctors and nurses in clinics, hospitals and emergency rooms or don't you? If you get sick or get injured, can you get treatment? The answer to that is yes, everywhere. That's essentially what the law says.

So, according to statute and practice, the health care providers provide everyone access to health care. What we don't have are everybody in America that has their own personal insurance policy. And a lot of people on this side of the aisle have conflated the two terms and said, "people don't have health care" when they really mean, "people don't own their own health insurance policy." And so it has been morphed and blended into this idea that somehow there is a right, and some would even argue that within the Constitution there is some kind of a

right that everyone would own their own health insurance policy.

And so they set about to grant or provide a health insurance policy to every American, legal or illegally, lawfully present or not, people that will take care of their own responsibilities and people even that have refused to take care of their own responsibilities, and impose a health insurance policy on them all. And if they are not willing to write a check and pay for the premium or go to work for somebody that will do that or sign up for Medicaid, or, of course, those that are eligible for Medicare, if they are not willing to do that, the IRS will come in and audit them and levy a fine for not having health insurance.

And if this gets bad enough, you can end up in jail for the first time in the history of this country. The Federal Government is putting together a product called a health insurance exchange and approved health insurance policies or the public option, government-run health insurance plan, and if you fail to buy a policy within the statutory guidelines, those that are approved by the Health Choices Administration Commissioner, the czar, the IRS can come in and levy a fee against you, and eventually one could go to jail for tax evasion technically, but not buying a government-imposed health insurance policy actually. It would be the first time in the history of America that the government has produced a product, compelled its citizens to buy the product, and if they refused or failed to, then levy a fine, eventually lock them up in jail. It is the equivalent of debtors' prison for not buying the government-approved version of health insurance. It will be the first time in America.

And the President has said, and this is out of the House version, Mr. Speaker, and I understand the Senate has tweaked that a little bit and maybe taken the jail time out, so now they just put a lien on your house and sell your house. Never fear, though. There is a special way you can get a cheap mortgage in America that has been set up to take care of those people. The government has their fingers in everything.

This has been the most giant leap into socialism that we've had ever since the preparations for the transition that began on the 20th of January of this year. And the President has said, we have too many uninsured. And when you go through the list, they use the number 47 million uninsured. So from that 47 million, I begin to subtract the numbers of people who are eligible under their own employer but just don't opt in, or opt out; and those who are eligible under a government program like Medicaid, and subtract from that number those who are unlawfully present in the United States, where if ICE or the Department of Homeland Security had to deliver them their health insurance policy, they would be compelled to deport them to a

foreign country, or those who are lawfully present in the United States but by law are barred for 5 years from having public benefits, and we keep subtracting out of that list those who make over \$75,000 a year and don't have their own health insurance. And now with that list, we take the 47 million and we subtract all those in that list that I talked about, those eligible under their employer without it, those eligible for the government, those that make over \$75,000 a year, and those who are ineligible because they are illegal aliens or immigrants, and now that 47 million magically becomes 12.1 million, Mr. Speaker; and this 12.1 million Americans without affordable options for health insurance now isn't this massive number that tells us we have a national problem. What it really is, is less than 4 percent of the American population. And we are down to 4 percent of the American population, and the proposal is to change 100 percent of America's health insurance program and America's health care delivery, all of that to try to reduce this number of less than 4 percent down to something that may approach 2 percent after it takes over 100 percent of the program.

With the insurance competition that the President has called for, he said, well, the insurance companies are greedy. He always has to have a straw man to kick over. The insurance companies are greedy. Was it today or yesterday he said, the fat cat bankers, and then sat down and had a meeting with them today. Somebody has to be demonized before we can move forward here. We can't just simply have people with divergent interests that can be brought together that are altruistic and want to engage in the economy and help people. We have 1,300 health insurance companies in America and about 100,000 different policy varieties that can be purchased in the various 50 States, and that isn't exactly that many different companies and policies available to every American because we don't allow Americans, at this point, to buy health insurance across State lines.

It is an easy fix, we tweak that here, John Shadegg's bill that's been out here for about 4 or more years to allow people to buy health insurance across State lines, and magically all 1,300 companies compete against each other, unless they happen to be the same company that's operating in different States, and when that happens, and magically these 100,000 policy varieties become available to everybody in the United States.

And so the idea the President proposes of creating a government-run health insurance company and government-approved health insurance policies to produce more competition for the health insurance companies, if you want more competition, just let people buy insurance across State lines. Magically you've got 1,300 companies competing, 100,000 policies to choose from, and it is far more effective from a com-

petition standpoint than it is to put the government involved and have the government limit, write, regulate and control every health insurance policy in America. And when the President says, Don't worry, if you like your health insurance policy you get to keep it, have you noticed that he hasn't said that in a long time? It has been weeks and weeks, at least by my recollection, that the President has reiterated, if you like your health insurance policy, you get to keep it. The truth is, get ready to lose it. If you have a policy today, under the House version of the bill or anything that I understand under the Senate version of the bill, that policy would have to be cancelled some time between 2011, by 2011 or 2013. It would be cancelled, and there would be a new policy that would have to be issued that met the Federal guidelines. There is no policy in America that the President of the United States with confidence can look at and point to and say, you, Joe the plumber, or you, Sally the doctor, are going to be able to keep the health insurance policy that you have, that you love, that you paid for, because the government may decide that it doesn't have the right benefits to it, it doesn't have the right mandates, and maybe it doesn't cover all the things that they think government should cover.

And so that is just some of the basis for this, Mr. Speaker. There is so much more. And as this debate ensues down on the Senate side of the aisle, right down through those doors, straight across through the Capitol, we are watching a dramatic, and I think a titanic, colossal clash taking place in the Senate right now, and I mean in this period this week. As this unfolds, we need the American people to rise up. We need the American people to speak up. We need the American people to pick up their telephones. We need them to come to this Capitol building. We need them to fill up the Senate. We need them to surround this place and stand here and call out for freedom, call out for liberty, call out for the rights that are in the Constitution and not somebody else's idea of transferring wealth across America and putting it into the pockets of others and taking away the benefits of the people that have been industrious and have been personally responsible.

We take care of everybody in America. Jimmy Carter once said that the people that work should live better than those that don't. I caught that. When he said that, it seemed a little odd to hear that from him. And I don't know that he really ever lived by it, but he said it, and I believe that as well.

□ 2220

This bill is another class level, or it's another take from the rich and give to the poor. It's a class-envy bill. It's born out of spite and born out of class envy and it's driven by ideology and it's driven by the idea of socialized medicine.

Today I was asked to answer a series of questions that were requested by a publication here on the Hill, and it was, What is the biggest problem Republicans have? Mr. Speaker, my answer is fighting off Marxists and socialists that masquerade as liberals and progressives. That's the biggest problem Republicans have now. This is a Marxist and socialist agenda, and that's one of the reasons why the Blue Dogs have gone underground and become groundhogs. The shadow of socialism has pushed them underground. And they're not out here fighting for truth, justice, the American way and a balanced budget and personal responsibility and constitutionalism. They seem to have disappeared from the scene. But 40 or so of them will get a pass from the Speaker of the House and be able to vote "no" on this bill if it comes back to this House because there are enough votes stacked up on the Democrat side that about that many will get a pass.

I see that my good friend, Dr. BURGESS, who took a small hiatus from the previous Special Order, is here with a brain full of information, Mr. Speaker, for you to absorb and pass along to our colleagues.

I would be very happy to yield as much time as he may consume to the gentleman from Texas, Dr. BURGESS.

Mr. BURGESS. I thank the gentleman for yielding.

The gentleman has done an excellent job at delineating where we've been, what's been happening, and perhaps where we're going. You know, this summer was truly a remarkable time in this country when the beauty of participatory democracy was on display literally from sea to shining sea, from border to border. I certainly felt it in my district. I know it was felt in a number of congressional districts. We've seen the results of that.

The gentleman is quite correct, the Blue Dogs, who were so active during the summer months leading up to the August recess, have really been under enormous pressure by their leadership on their side. And now we've seen, in the past several days, I think by my count, four retirements from that group. I don't know whether we will be seeing more, but it certainly is something that you cannot fail to notice.

Now, the gentleman from Iowa has correctly identified this to be a fight about ideology. You will notice through the discussions going on in the other body right now, there is really very little that's going on about health care, per se. There is very little talked about as far as health care policy. It is all a question about, well, let's get the numbers right. Let's get the Congressional Budget Office. Let's get the actuaries over at the Center for Medicare and Medicaid Services. Let's get these numbers right so we can then present this to the American people and stay within the President's prescription of delivering health care for all for under \$1 trillion.

Now, we know that to be a fantasy. The gentleman outlined the reasons why that is a fantasy. There are a number of things that have been taken out of this bill that will have to be added back at some point in the future, but this has become a fight about ideology just as the energy bill has been a fight about ideology. Cap-and-trade is no longer about the number of molecules of carbon dioxide in the atmosphere. This is about ideology. This is about holding the United States to \$3 trillion in ransom to the rest of the world and, oh, by the way, you've got to give up your ability to be in charge of our own future. You've got to give up your sovereignty along the way to Copenhagen. This is a fight about ideology.

The Financial Services bill that we passed on the floor of this House last week had nothing to do to prevent future problems with meltdowns in the financial industry. If it had, we would have seen something that would actually have made a difference. Instead, we got big carve-outs for big companies. The smaller community banks are still going to have to pay into a fund to bail out the big guys if they get in trouble again in the future. In fact, we've institutionalized the failure of those institutions who are too big to fail by this bill that we passed last week.

But again, it's not about what you know about financial policy; it's about ideology. That is where we are today over in the other body with this health care debate. Nobody is really interested in whether or not there is the right vaccine policy involved. No one is really interested in what the United States Preventive Services Task Force does. It's all about control of every facet of your life. And if we can control your health care, we can control more about you than we've ever been able to control in the past.

That is why it is so important that this be stopped. It's not because we want to prevent anyone from having health insurance. It's not that we want to prevent anyone from having health care, but we want to prevent this type of power grab that is going on at the level of the Federal Government over the lives of honest American citizens.

If we lose, if we are not successful in stopping this, ultimately it's not a Democratic win or a Republican loss. Ultimately, it's the American people who will lose in this transaction. It is transactional politics at its worst, and we've all seen that on display.

One year ago, we were faced, on our side, with the very stark realization that we had lost the White House, lost 20 seats in the House, lost a number of seats in the Senate, and in fact, when the eventual Senator from Minnesota was seated, the Democrats had a proverbial unstoppable majority of 60 votes over on the Senate side. This all happened very early in the calendar year 2009.

I would have thought, facing that kind of harsh reality, that many of

these things that we've talked about tonight—energy policy, health care policy, financial services policy—many of those things would have already been done; after all, what was to stop them? Were Republicans going to be able to stop much of anything? No. We didn't have the leadership, the money, or the ideas to put a stop to much of anything. In fact, I still believe to this day, had the President put health care ahead of the pork barrel spending that was present in the stimulus bill that they passed in February, if the President pushed health care to the front of that agenda, that would have been done in February. It would be the law of the land today, and there would have been nothing that anyone could have done to stop it. But they didn't. They didn't.

In fact, I still puzzle over why cap-and-trade was suddenly thrown into the mix at the end of June, sort of all at once. We passed it out of committee a month before and it sort of languished there. Everyone was uncomfortable about it, but it was never coming to the floor, after all, so we really didn't need to worry about it. Then suddenly, the last week of June, boom, here it is and it's going to pass, and Democrats' arms were twisted and hair was pulled and eyes were gouged in order to get this thing passed.

I don't know if the gentleman from Iowa recalls, but there was the instance where a Democratic Member from Florida sold his vote for \$30 million here on the floor of this House. The Democrats were going to usher in a new era of transparency. That was about as transparently transactional as I have ever seen on the floor of the House, but they got the bill passed.

And then what happened? We went home for 4th of July recess, marched in that 4th of July parade right behind the American Legion, just in front of the Cub Scouts. And from both sides of the parade route, people were yelling at their Member of Congress, What in the world were you thinking? Next time, read the bill. On and on it went along the parade route. By the end of the 4th of July parades, Members of Congress, both sides, Republicans and Democrats, were saying, Oh, my God, what have we done? What are we up against?

So we came back in July and said, We're not so anxious to pass this health care bill. In fact, the Blue Dogs, to their credit, ground things to a halt, starting about the 15th of July, when we finally got the bill—and remember, we got this 1,000-page bill and we were supposed to pass it before the August recess and go home and deal with the consequences, but not so fast. The Blue Dogs did slow things down. We did not have a bill passed by the August recess.

And then, it was a beautiful thing to watch, the participatory democracy that we saw again across this country came to bear and brought pressure to every Member of Congress, whether

conservative, liberal, Republican, Democrat. Every Member of Congress heard from their constituents.

Now, to be sure, the Speaker of the House labeled these individuals as Astroturf or rent-a-mob, but I've got to tell you, I had 2,000 people show up for a town hall in Denton, Texas, on a hot Saturday morning in August, and these were my friends and neighbors, a town where I grew up. I know most of the people in the town. And it was not an imported crowd to give grief to the poor Member of Congress. These were people who were legitimately concerned.

Just as the gentleman from Iowa accurately points out, we're trying to fix a problem for less than 5 percent of the American population and disrupt what 65, 70, or 73 percent of the American population sees as something that is working relatively well for them. Sure, they're concerned about costs for the future. Sure, they're concerned about what happens if they lose their job to their employer-sponsored insurance. But by and large, those that have insurance do want to keep it. That's why we don't hear that brought up anymore.

□ 2230

I thought we'd come back in September and hit the reset button—the pause, the replay. No. We hit the fast-forward button, and we pushed this thing through. Don't check the weather. We're going to fly anyway. The Speaker pushed it through in the early part of November, again, purely on a party-line vote, and now it's over in the Senate.

The people are asking, Well, what are you going to do to fix this? Sixty percent of the people do not want this to happen. So, Mr. Member of Congress, what are you going to do to stop this?

I do have to say that I am, once again, going to ask, going to call on, going to cajole, going to plead with Americans across the country who are looking at this happening right now: It's not hard to figure out who your Senators are as every State has got two. Most of the time, if you go to a search engine of choice and type in "Who is my United States Senator for the State of Iowa or Texas?" it will come back, and it will tell you. You can go to Senate.gov and can put the name of your State in, and it will tell you who your Senators are. It will, in fact, tell you how to contact them. It will give you their Washington telephone numbers and their phone numbers back home in the State. Your Senators need to hear from you in these coming days that are immediately ahead of us.

You know, if you think back to the days in May of 2005, there were a couple of Senators who decided they were going to do something that fundamentally would have changed the way this country dealt with problems surrounding immigration. The American people rose up as one and said, Not so

fast. Not so fast. We have a voice in this. We have a say in this. They stopped the Senate cold in its tracks.

The Senate, true to form, decided maybe that was a misnomer. Maybe they didn't really mean "not so fast." So they tried again. Once again, they heard "not so fast." Their switchboards shut down. Their servers crashed because of the volumes of information that were coming in, telling them "not so fast."

Well, I would submit to the gentleman from Iowa that he and I are going to be hard-pressed to stop this thing on the floor of the Senate in the days ahead. It is going to require participatory democracy on a level that we saw this summer, and then some, in order to bring this thing back to the realm of where, perhaps, we can actually deal with the problems that we're required to deal with.

Remember, it's all about ideology right now. It's about a hard left turn that has been taken by the administration and by the Democratic leadership in the House and in the Senate. That's where they want to go with this thing. If that's okay with you, stay silent. Have a nice Christmas. We'll see you next year. If that's not okay with you, if you feel like the gentleman from Iowa and I feel about this, your Senators do need to hear from you. Your Members in the other body need to hear from you. They need to hear from you straightaway.

I've got some other ideas which I'll be happy to share with the gentleman, but I've taken up enough of his time, and I'll yield back the time to the gentleman from Iowa.

Mr. KING of Iowa. Reclaiming my time, I thank the gentleman from Texas. He had me paying attention to those ideas.

From that standpoint on the immigration debate—and that's one that I've been engaged in for a long time—the effort that went out across this Nation to shut down the switchboard and to shut down the servers of the United States Senate sent a message. Yet, as the gentleman from Texas said, about 3 months later, they decided to try it again. They just didn't believe what the American people had told them, and they took another run at it.

On the immigration side of this, this was a bipartisan effort. It had the President of the United States—then President Bush—and significant numbers on the Republican and on the Democrat sides of the aisle. There were more Democrats than Republicans significantly, but this was a bipartisan effort, and it was something that was strategically driven by the White House. It still failed in the face of that effort because the American people rose up.

There isn't any reason, Mr. Speaker, for anybody to believe that the American people can't kill this socialized medicine bill. If they can kill comprehensive amnesty and do so twice in 1 year and do so in the United States

Senate, as difficult as it may seem and as determined as the President seems to be, this scenario is doable.

They have learned a few things, too, over there, down that hallway in the United States Senate and off into their office buildings on the side. They've learned how to shut their phones off, and they've learned how to shut down their fax machines, and they've learned how to, essentially, plug their ears and wait for the noise of the American people to settle down, and then we'll try to pass something.

I'm suggesting this, that the Senators need to have a personal experience. They and their staffs need to have a personal experience—a respectful, polite and nonthreatening personal experience. Especially if you're a Senator, you probably have your finger on the political barometer, and have a real sense of what the public's mood is. You can run a poll, and you can hire a pollster to find out where the American people are or you can make a lot of phone calls and can send out emails and can send out letters. You can listen to people or you can put the data together, but you also have to measure the intensity. The intensity is the other part.

If we have an issue out here that I'm ambivalent about—and I really haven't found that issue yet, Mr. Speaker, on which I am. Hypothetically, if I'm ambivalent about an issue and if, on the one hand, I'm for it and if, on the other hand, I'm against it and if half of the public is for it and if half of them is against it, how would one decide then which side of the issue to come down on?

You have to pay attention to the people who have intensity. I pay attention to the people in this Congress who come in who have intensity—to people like Dr. BURGESS who have intensity and to the people who have been elected to this Congress who are vocal and aggressive and who know what they believe because they've lived it. I pay attention to that level of intensity.

As to the level of intensity that needs to come from the American people, this is the week. This is the week for that intensity. So, if you're ambivalent, fine. You can sit home and send an email. If you care, you can make a phone call. If you care more, you can go down to your Senators' district offices. If you care more yet, you can come to Washington, D.C. At 1:30 tomorrow, there will be a large gathering in the park just north of the Senate Chamber. From there, we are going to see how much the American people care.

They've been called to rally to defend their liberty a number of times this year. We saw it on April 15 in a big way. We saw it on September 12 in a big way. We saw it here on November 5 and on November 7. On November 5, there were 20,000 to 50,000 or more people here outside this Capitol building, who came here and said, Don't take my liberty. Let me own my own health insurance policy. Don't tell me the

standards by which I can buy it. Let me have my own freedom, my own liberty. I don't need government-run health care in America.

That was the message. Of that whole group of people who was there—tens of thousands—any one of them would have fit just perfectly at my own church picnic. They are salt-of-the-Earth, American, liberty-loving, constitutionalist, fiscally responsible, family people from across America. They are the people who are this American family who don't want to see a socialized America. They understand we are a unique people and that we are not social democracy Europe.

The socialists, for the most part, stayed in Europe. Freedom-loving people came here. There is a certain vitality in Americans which is unique to the rest of the world. It was hard to get here. You had to take a chance and maybe be an indentured servant; but earn your way across the Atlantic, and you could settle in and maybe drive a stake in Iowa and homestead 160 acres. One of my great-grandparents was an indentured servant who worked in a stable in Baltimore for 7 years before he got his passage worked off. These were people with a dream, who just wanted to have a start because we had economic opportunity. We had liberty, and they could shape their own lives.

So we got the vitality from every donor civilization in the world. As for everybody who sends people here—every country—whatever would be the particular characteristics of their cultures, there is always that skim off the top, the cream off the top, which is the vitality of a culture, the vitality of a civilization.

One of the reasons America has such vitality is that we skimmed the cream, and they came here. They arrived in America with almost unlimited natural resources, low-income or no taxation, no regulation, manifest destiny, a Protestant work ethic—and Catholics got with it pretty good—and with a foundation rooted in Christian morality and work ethic. That giant petri dish created this teeming America that settled the continent from sea to shining sea in the blink of a historical eye.

We are not anybody else in the world. We are a unique people. We live in the unchallenged greatest nation on Earth, that the Earth has ever seen. I'm watching it be torn apart by people who don't understand what I've just said, by people who get out of bed every day and look around. They see these beautiful marble pillars of American exceptionalism, and they can't wait to get out their jackhammers and chisel away at those pillars of American exceptionalism, which are the foundation that made this a great nation.

So now we've seen eight huge entities nationalized, most of it under this administration but not all of it. There are three large investment banks; Fannie Mae and Freddie Mac, General Motors, Chrysler, AIG, all of that was

nationalized. According to a Wall Street Journal article, one-third of the private sector profits have been nationalized, mostly by this administration, without an exit strategy.

□ 2240

Right away they set up the payroll czar to go in and tell the banks and the other institutions that they are paying too much to their executives. Now we have BARNEY FRANK'S Financial Services bill, which is about ideology, as the gentleman from Texas said, as much as socialized medicine is about ideology and not about a practical application. In that bill it looks like they are going to be able to regulate all the financial institutions they take an interest in—with a little carve-out there—and tell those institutions what they are going to pay their people probably right on down to the person that scrubs the floor at night.

This freedom in this country has been dramatically diminished by the Pelosi Congress and the Obama presidency. This liberty that America needs to maintain our vitality is being quashed by the socialization, the nationalization of our economy, and the intentional creation of a dependency class of people that are designed to be the political base that will support those who will continue to do class-ency politics, share the wealth, so to speak.

By the way, that "share the wealth" phrase that came out of President Obama's mouth as a candidate in speaking to Joe the Plumber is in the mission statement of ACORN.

I am happy yield to the gentleman from Texas.

Mr. BURGESS. Well, I think the gentleman has summed things up very well. I cannot be nearly as eloquent as he is, delineating the history and what created greatness in this country. All I know is the people who seem to be making the decisions today are the people who have never held a job in the private sector. For those of us who signed more paychecks on the front than on the back, it is a startling thing to watch as we see, once again, the administration is going to lurch forward with a jobs-creation strategy when a jobs-creation strategy exists right before our eyes.

It's the small businessmen and women in America who have the capabilities of creating those jobs that we desire. What's happened to them today? They are scared to death. They are scared to death of this 8 percent payroll tax that we are going to slap on them for health care. They don't know what we are going to do in energy.

This Financial Services bill, they are going to be another several weeks trying to figure out what we just did to them last Friday night, late. Is it any wonder why small businesses across this country are holding back. They know about taking risk. That's what brought them to where they are now.

But when so many things are in flux, tax policy, health care, energy, finan-

cial service regulation, when so many things were in flux, what's in it for them to go out on a limb and go out and hire that extra one or two people that they might hire.

The problem is, not those one or two jobs in that one business, it's the vast number of jobs across the greater and broader economy that that one or two job hold-back that small business is making right now—that's where the jobs are. That's why this has been a jobless recovery, and why it will remain a jobless recovery until Congress, until Congress and the administration, stop making the environment and the prospects for the future seem so threatening that small businesses again feel comfortable in taking on the role of being the leader of job creation.

We don't need another Federal program to stimulate jobs. We just need to get out of the way.

I just have to reference an exchange I had with the Secretary of the Treasury a few weeks ago on our Joint Economic Committee when I asked him that very question. Wouldn't it be better if we, instead of making it a more challenging economic environment, brought some stability for small businesses in America, allowed them the freedom to do what they have done every time in the past with every other recession, which is create the jobs which provided the prosperity which allowed us to get out of the recession? Wouldn't it be better to do that?

The Secretary of the Treasury looked at me and said, That is the same broad economic philosophy that brought this country to the brink of ruin. Mr. Secretary, I just described market capitalism to you, and I am just a simple country doctor. You are the Secretary of the Treasury, you are supposed to know this stuff.

I was dumbfounded by the Secretary's response, the Secretary not understanding what it is that made this country great in the first place, has no clue, then, about how to do, how to set the tone and set the environment so this country can, indeed, recover from this economic downturn.

Of course, very famously, in that exchange earlier the other gentleman from Texas (Mr. BRADY) had encouraged the Secretary to resign for the sake of our jobs. I said I didn't think he should resign; I didn't think he ever should have been hired in the first place. It was a mistake a year ago. It was apparently a mistake today. Not only does he not know how to fill out his tax form, he doesn't know what creates jobs and wealth in economy and what makes this country great.

I appreciate the gentleman from Iowa letting me be here. I appreciate him doing this hour. I think it is so important to set the tone. These next couple of days are going to be extremely important in this country and the American people do need to be engaged. They do need to be paying attention. They do need to be responding to the cues that are being given to them by the gentleman in the other body.

Mr. KING of Iowa. I thank the gentleman from Texas.

It strikes me that the Secretary of the Treasury, I believe, is a natural-born citizen, not a naturalized citizen. Had he been a naturalized citizen, he would have had to pass the test. There are flash cards that are made available by USCIS, United States Citizenship Immigration Services. It's a stack of these glossy flash cards to train with so you can learn to pass a naturalization test.

In these flash cards it will be, for example on one side, when was the Declaration of Independence signed? Flip it over to the other side, July 4, 1776.

Who is the Father of our country? Flip it over. George Washington.

What is the economic system of the United States? Flip it over. Free enterprise capitalism.

You can't even be naturalized as a citizen of the United States unless you can pass that test. Apparently the Secretary of the Treasury says that free enterprise capitalism is what brought us to the brink of ruin.

It's an astonishing, breathtaking thing. It's no wonder we can't get this economy sorted out. I sent a letter to the Secretary of the Treasury after a hearing that we had, a joint hearing between Financial Services and the Department of Agriculture to deal with derivatives and credit default swaps. His question was this, that President Obama has been elected at least in part because he criticized President Bush for not having an exit strategy in Iraq.

Now, here is a list of the companies that have been nationalized by this administration and initiated in the previous administration, to be fair. I would like to know with each of these companies, Mr. Secretary, what is your exit strategy? How do you go about divesting the taxpayers' investment in these companies that were formerly private and get them, they are now managed and controlled, with influence control, if not majority control, how do you get them back into the private sector so that they can be allowed to succeed and fail?

It was a long time getting the answer back, and it took a long time to analyze the answer, but it boiled down to well, there really isn't a plan, but the Secretary will know when the time is right and take those steps when it's appropriate. That, I think, Mr. Speaker, tells us what's going on here.

If the Secretary of the Treasury believes that free enterprise capitalism brought us to the brink of ruin, I can't believe that he would be willing then to divest the Federal Government from the private sector, of their shares of investment in these formerly private-sector companies. That is, it is the socialization of our economy.

The 33 and so percent, as The Wall Street Journal said of the private-sector profits, and if they take on this health care industry, that's going to be another, another one-sixth of our economy. If that, if that goes on, that's

going to take us up to or greater than half of the private sector that we had in the past.

Mr. Speaker, I think it's important that we understand that there are a couple of different sectors to the economy. One of them is the private sector. It's the growth sector. It's where people produce goods and services that have value. There are about three different levels of the value that an economy needs to produce. First, the economy needs to produce things that people must have for survival. I mean, we have talked about it for more than 50 years and called it food, clothing, and shelter, the things that are necessary for the survival of mankind; you have to have food, clothing and shelter. They come from generally out of the Earth, one way or another. So that's the number one level of our economy, those necessities for survival.

The second level, and that's private sector. Government produces hardly anything that's necessary for survival. They regulate, and they slow down the actual efficient production of those things that we need for survival.

The second level, those things that improve our efficiency, technology, for example, information technology, industrial technology, that caused us to be more efficient. Those efficiencies help us produce more of the necessities of life. The second part of the economy that's gotten the most important value is the second level that produces the efficiencies in our economy.

The third level of the private-sector economy is the disposable income. That's the income that we use to go do the things that we enjoy, to give our life relaxation and travel on vacation, do those things, or we buy the things that we don't have to have, not necessities, but the extras in life.

Those three levels, all private sector, all rooted back in, if you chase them back, you cannot go on vacation, and you can pass up buying that fancy pair of shoes or that nice car or the cabin at the lake or the boat or whatever it might be, and then those are eliminating the things that are not necessities of life.

□ 2250

And you can actually sacrifice some of the things out of the second level of our economy that help with our efficiency, but when get down to the necessities, it's life itself. All of this is rooted in the private sector. The other side of this economy, the public sector of the economy, is where government comes in and they decide that they're going to redistribute wealth and they're going to provide services that they think that people need, and for some degree people have decided they would like to have government provide some of those services. But government regulates, government slows down and intimidates private sector commerce, and once you get to a certain place over the things that are necessary for

government. For example, we build roads with user fees and less so with general fund tax fees. So if you drive on the road, you pay the tax for your gallon of gas that goes in the tank and you help build the road. That's a user fee. But things that government provides that are necessary, military, for example, Department of Defense, that provides our safety and our security. Without it, we can't function. We can't have legitimate forms of government. Government provides other things that are legitimate; the judicial branch of government, for example, so that we can have law and order. And law enforcement, while I'm on the subject matter.

As we look down through government, the list becomes less and less of a necessity and more and more of a redistribution of wealth. At a certain point when your safety and security are there and they're secured and a line goes across to providing government services so we don't have to worry about them ourselves, every time we pay a tax dollar, we also give up a measure of our liberty, a measure of our freedom, because government makes the decision and the people that are producing in the private sector make less of a decision.

So I'll say these two sectors of the economy, the private sector, from which all new wealth emanates, and the public sector—when I'm in a crankier mood, I call it the parasitic sector—of government, the sector of government that sucks the lifeblood out of the private sector economy. The public sector—the parasitic sector—is growing and it's growing by leaps and bounds, by the trillions of dollars, and there are less and less decisions made by capital which always is rational and more and more decisions made by government. We had a car czar that had neither made a car nor sold one. I don't even know that he owned one. He's not with us anymore. But we have a government of people that haven't written out paychecks, that have not started a business, have not operated a business. If they've operated in the private sector, they started in up near the top of a department and never saw the inner workings of the bottom of what small business is like that we've got to have to grow us into the larger businesses.

We need to have the underpinnings of American exceptionalism put back underneath us again. We've got to refurbish those beautiful marble pillars of American exceptionalism. We've got to promote liberty and encourage the freedom that's necessary; and people have to be willing to take risks. Capital has got to be able to make a rational decision but capital also has to know—that's investors' money, Mr. Speaker—has to know that they will also, if they fail, they're going to lose their investment, and someone else will pick up a bargain and build it on what was left of the company that went under. I've stared that in the eye. I went through the eighties with my

construction company. We had our ups and downs. I know what it's like to live with a knot in my gut for 3½ years, to hold the company together. And we succeeded. Others around me did not. Some people got drug down and the load was heavy. And others succeeded significantly beyond a level where I did; and I'm glad that everybody had the opportunity to do that. And if the government comes in and then appoints an overseer, which is what the Barney Frank Financial Services bill does, and they go in and look at capital investments and business management and they decide who's going to make how much money with another regulator for our financial institutions, we have given up a big piece of our liberty, a big piece of our freedom.

But what we're focused on, Mr. Speaker, we're focused on this week, this national health care act, this socialized medicine act that barely passed out of the House of Representatives, that is down there now being debated in the United States Senate, and the issues as set before the Senate seem to be a couple of big ones:

One of them is the pro-life amendment. Here it was the Stupak amendment where 64 Democrats had the opportunity to vote, to put up a pro-life vote that they didn't believe that the taxpayers of America should be compelled to fund abortions through money that is extracted from them unwillingly. So, therefore, the Stupak amendment came up, and 64 Democrats voted for it. Sixty-four Democrats and, I believe, every Republican are on record saying I am pro-life and I don't believe, or at least we should not compel American taxpayers to fund abortion when they're funding a socialized medicine program. That was what the Stupak amendment actually was. Even though it made exceptions for rape and incest, even though it doesn't fit with the tenets of the Catholic Church, it was a subject that was raised and pushed through here.

Now with the Stupak amendment passing, now these 64 Democrats have cover. Now if a bill comes back down this hallway through the center of the Capitol, it's had that language, not necessarily stripped out. When Senator BEN NELSON offered similar and some said identical language to the Stupak pro-life amendment, it was defeated in the Senate. And so the Senate bill doesn't have a pro-life amendment in it. And if it comes back to this House, we will see, I think, a conference committee that is appointed and stacked by Speaker PELOSI and HARRY REID and I think they are likely to strip the Stupak amendment out and drop it back in here to the House; and what I think will happen will be some of those 64 Democrats that said, I'm pro-life, here's my vote for the Stupak amendment, I think they'll roll over and they'll say, I voted for the Stupak amendment, but on balance I think this bill is good, even though we're going to compel Americans to fund

abortions in the United States. That's what they're set up to do and that's the dynamics; and we need people in the Senate to kill this bill, so that this scenario doesn't play out here in the House.

Another piece is this public option, the public option that seems to be, or the government option that seems to be rejected by the Senate, but the liberals in the House insist that there be a government health care option; so they're trying to configure a way that they can define something that isn't necessarily a government option that can come to conference and be merged together. And right now the staff in the House and the staff in the Senate are merging these two bills, trying to get ready to drop something on and give America a Christmas that will be the least merry of anything in my lifetime. It will be something that dramatically erodes the liberty in America.

But those are the two big issues: Is it going to be a pro-life bill? And is it going to have in it a government option? I suggest that they will put together and construct a scenario by which they will be trying to compel taxpayers to fund abortions and compel taxpayers to buy government insurance because, as the gentleman from Texas said, it is about ideology, it's not about policy, it's not about producing the best result because if they did that, if they were for that, they would be for reforming medical malpractice abuse in America, lawsuit abuse reform, they would be for selling insurance across State lines, providing full deductibility for everybody's health insurance, transparency in billing.

The list of things that we can do that are constructive, that don't cost money, is long indeed. But tomorrow, Mr. Speaker, and every day this week until somebody loses their nerve, the United States Senate needs to be jammed, it needs to be filled up with people that come here respectfully and politely and follow the rules and follow the law. But give the Senators and their staff in Washington, D.C., in their district offices at home and their offices here a personal experience. It needs to happen this way, Mr. Speaker—the American people need to let these Senators know that there will be a reckoning if their liberty is taken from them and this socialized medicine bill is imposed upon them. I don't want to see it, I don't want to see it for my children, I don't want to see it for my grandchildren. I don't want to see it for America's destiny. I don't want to see America's destiny, the vitality of America's destiny stripped away piece by piece as we leap off the abyss into socialism and embrace the European version of a social democracy and more, a managed economy, managed health care, very limited freedom. The only budget that they didn't grow was the Department of Defense budget. Everything else has to have a 10 percent or more up. The idea that you can borrow from your grandchildren that have

not yet been born and compel them to pay debts today and spend money without any sense of responsibility, believing that that grows the economy, when we've established that even the Secretary of the Treasury believes that free enterprise capitalism is what brought this economy to the brink of ruin.

□ 2300

Mr. Speaker, we need new people with clear thought and a respect for America and the strength of America. We need the right people in charge in this country, because, as I have often said, you don't take a poodle to a coon hunt. You want to take a registered coonhound along. He's got it in his blood, he understands it. You can train a poodle to bark treed, but his heart's not in it. These people won't even bark treed, and we need the right people in charge. And tomorrow we're going to see the American people step up to this Capitol, and they're going to demand that we preserve their liberty.

With that, Mr. Speaker, I thank you for your attention, and I yield back the balance of my time.

ENROLLED BILLS SIGNED

Lorraine C. Miller, Clerk of the House, reported and found truly enrolled bills of the House of the following titles, which were thereupon signed by the Speaker:

H.R. 3288. An act making appropriations for the Departments of Transportation, and Housing and Urban Development, and related agencies for the fiscal year ending September 30, 2010, and for other purposes.

H.R. 4165. An act to extend through December 31, 2010, the authority of the Secretary of the Army to accept and expend funds contributed by non-Federal public entities to expedite the processing of permits.

H.R. 4217. An act to amend the Internal Revenue Code of 1986 to extend the funding and expenditure authority of the Airport and Airway Trust Fund, to amend title 49, United States Code, to extend authorizations for the airport improvement program, and for other purposes.

H.R. 4218. An act to amend titles II and XVI of the Social Security Act to prohibit retroactive payments to individuals during periods for which such individuals are prisoners, fugitive felons, and probation or parole violators.

LEAVE OF ABSENCE

By unanimous consent, leave of absence was granted to:

Mr. ABERCROMBIE (at the request of Mr. HOYER) for today and until 3 p.m. on December 15.

Mrs. BONO MACK (at the request of Mr. BOEHNER) for today on account of flight delays.

Mr. DAVIS of Illinois (at the request of Mr. HOYER) for today.

Mr. MACK (at the request of Mr. BOEHNER) for today on account of flight delays.

Mr. WOLF (at the request of Mr. BOEHNER) for today on account of a dental emergency.