

Parliamentarian, the Committee on the Budget, and the Congressional Budget Office to be certain their amendments comply with the rules of the House and the Congressional Budget Act.

If you have any questions, please contact Chairman DREIER or the Rules Committee staff.

**REMOVAL OF NAME OF MEMBER  
AS COSPONSOR OF H.R. 1081**

Mr. WILSON of South Carolina. Mr. Speaker, I ask unanimous consent to be removed as a cosponsor of H.R. 1081.

The SPEAKER pro tempore (Mr. WESTMORELAND). Is there objection to the request of the gentleman from South Carolina?

There was no objection.

**REPEALING MANDATORY FUNDING  
FOR SCHOOL HEALTH CENTER  
CONSTRUCTION**

The SPEAKER pro tempore. Pursuant to House Resolution 236 and rule XVIII, the Chair declares the House in the Committee of the Whole House on the state of the Union for the further consideration of the bill, H.R. 1214.

□ 1825

**IN THE COMMITTEE OF THE WHOLE**

Accordingly, the House resolved itself into the Committee of the Whole House on the state of the Union for the further consideration of the bill (H.R. 1214) to repeal mandatory funding for school-based health center construction, with Mr. SIMPSON (Acting Chair) in the chair.

The Clerk read the title of the bill.

The Acting CHAIR. When the Committee of the Whole rose earlier today, all time for general debate had expired.

Pursuant to the rule, the bill shall be considered for amendment under the 5-minute rule, and shall be considered read.

The text of the bill is as follows:

H.R. 1214

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

**SECTION 1. REPEALING MANDATORY FUNDING  
FOR SCHOOL-BASED HEALTH CENTER  
CONSTRUCTION.**

(a) IN GENERAL.—Subsection (a) of section 4101 of the Patient Protection and Affordable Care Act (42 U.S.C. 280h-4) is repealed.

(b) RESCISSION OF UNOBLIGATED FUNDS.—Of the funds made available by section 4101(a) of the Patient Protection and Affordable Care Act (42 U.S.C. 280h-4(a)), the unobligated balance is rescinded.

The Acting CHAIR. No amendment to the bill shall be in order except those received for printing in the portion of the CONGRESSIONAL RECORD designated for that purpose in a daily issue dated May 2, 2011, and except pro forma amendments for the purpose of debate. Each amendment so received may be offered only by the Member who caused it to be printed or a designee and shall be considered read.

**AMENDMENT NO. 1 OFFERED BY MS. JACKSON  
LEE OF TEXAS**

Ms. JACKSON LEE of Texas. I have an amendment at the desk.

The Acting CHAIR. The Clerk will designate the amendment.

The text of the amendment is as follows:

In section 1, add at the end the following:

(c) NOTICE OF RESCISSION OF UNOBLIGATED FUNDS.—Not later than 10 days after the date of the enactment of this Act, the Secretary of Health and Human Services shall post on the public website of the Department of Health and Human Services a notice of—

(1) the rescission, pursuant to subsection (b), of the unobligated balance of funds made available by section 4101(a) of the Patient Protection and Affordable Care Act (42 U.S.C. 280h-4(a)); and

(2) the amount of such funds so rescinded.

The Acting CHAIR. The gentlewoman from Texas is recognized for 5 minutes.

Ms. JACKSON LEE of Texas. Mr. Chairman, I ask my colleagues to join me in supporting this amendment. I appreciate very much my friend and colleague from Texas, and I believe that this is an amendment that Republicans and Democrats can join on, maybe for different reasons.

I have indicated that I believe the repealing of the support for school-based health clinics and construction thereof is an unfortunate act on behalf of America's children.

My amendment is very simple. It requires the Department of Health and Human Services to post public notice on its official Web site that the mandated funds from Section 4101(a) of the Patient Protection and Affordable Care Act, including the amounts of the funds, will be rescinded. It explains to the American public just what we are doing and it gives them a line-by-line, dollar-by-dollar impact of what happens when they take money away that is already being invested, that will be invested, to help build a health care infrastructure in their neighborhood, so that children like this young man and many others who may not have access to health care can have a school-based clinic. The amendment will provide the public with important information about mandatory school-based health center funding that will no longer be available for them to receive these preventative care services.

This amendment also assists my good friends on the other side of the aisle by permitting them to easily show the American public that they are cutting public spending. But yet we must weigh the balance—cutting spending, or alleging that you are going to benefit from these cut funds, and undermining the health care system of America.

□ 1830

When the Congress passed the Affordable Care Act in 2010, and the President signed it into law, the Department of Health and Human Services was given a mandate to provide funding for expanded and sustained national health investment in school-based health cen-

ter construction programs to improve clinical preventive services and help restrain the growth in private and public health costs. Nearly every State has school-based health centers. There are about 2,000. It provides mandatory funds for building and improving school-based health centers. There are now 350 applications for 46 States with shovel-ready projects. It couldn't be all bad.

If H.R. 1214 is passed, it will kill those funds. It will repeal it. And yet this particular amendment will point out Sophie's choices—not really good choices—to take away from our children good health care under the pretense of cutting the deficit. The majority of the funding that is being cut by my friends is from discretionary services, few dollars that represent only a small portion of the Nation's budget, appropriations, and deficit.

And so I ask that we support this amendment because truth is in the pudding. Let's see what they're doing and how you can get good health care and cut school-based clinics.

Let me quickly say this. We're trying to make sure that we have places in neighborhoods for people to evacuate to—schools that are secure enough and strong enough that you could run or you could evacuate or you could be safe in place. School-based clinics, health clinics, provide places to take the wounded from a hurricane or tornado or a disaster unforeseen—or a man-made disaster.

So I would ask my colleagues to vote for this amendment, to support this amendment, because it shows the light of what we should and should not be doing.

With that, I reserve the balance of my time.

The Acting CHAIR. The gentlewoman may not reserve her time. The Committee is operating under the 5-minute rule, in which case the gentlewoman is recognized for 5 minutes.

The gentlewoman still has 1 minute and 10 seconds remaining.

Ms. JACKSON LEE of Texas. And I am trying to reserve my time.

The Acting CHAIR. The gentlewoman cannot reserve her time.

Ms. JACKSON LEE of Texas. Let me make the point that in earlier debate today, the Chair allowed me to reserve, and so I take issue with the ruling. And what is the basis of the ruling?

The Acting CHAIR. Under the 5-minute rule, the gentlewoman has to use her time or yield back her time. She may not reserve her time.

Ms. JACKSON LEE of Texas. Can I have an explanation as to why I was allowed to do so previously?

The Acting CHAIR. The Chair would tell the gentlewoman that the Committee is operating under the 5-minute rule and the time is not controlled.

Ms. JACKSON LEE of Texas. So to my parliamentary inquiry, the answer is that we're under the 5-minute rule?

The Acting CHAIR. That is right.

Ms. JACKSON LEE of Texas. Let me just indicate that school-based clinics