

It seems what matters is only a commitment to deep austerity and a weakened government. This ideology has achieved a dangerous manifestation in the sequester, which has been the Republican policy all along, and which, as I have pointed out in the past, was included in their Cut, Cap and Balance bill passed in July of 2011, when 229 Members of their caucus voted for sequester as an option.

Now we have further evidence the sequester is their policy, as Republicans double down on these irrational cuts and refuse to negotiate.

There is, however, Mr. Speaker, an alternative. That is a balanced bill that will replace the sequester entirely. The ranking member of the Budget Committee, Mr. VAN HOLLEN, has put forward a proposal that deserves a vote.

The Speaker so often says, "Let the House work its will." In fact, he has asked for a vote on it six times, VAN HOLLEN has, and will ask for a seventh time at the Rules Committee today, but Speaker BOEHNER and Republican Leader CANTOR have so far said, no, the House cannot work its will; the House cannot consider this option.

The American people deserve to see where their representatives stand on a balanced alternative to the sequester, and they deserve a Congress where real compromise proves stronger than partisan maneuvering.

If the Van Hollen alternative were to come to the floor for a vote, I would hope that a majority of Members would vote for it. A majority of Democrats certainly would and I believe a substantial number of Republicans who are concerned about our fiscal future.

HAL ROGERS, in fact, the chairman of the Appropriations Committee, has opined how much pain the sequester would be causing and how much dysfunction it would be causing. It's exactly the kind of compromise approach we need, the Van Hollen alternative.

All we're asking to do, in the immediate term, is for Speaker BOEHNER to let the House work its will and have a vote on Mr. VAN HOLLEN's alternative, and to follow regular order and agree to go to conference. That's what they said they wanted to do. That's what they said they would do, but they're not doing it.

It's time for Democrats and Republicans to work together, in a bipartisan way, to rise to our budget challenges and set our country back on a sound fiscal path.

Let us have regular order. Let us have a vote, and let us restore sanity to this House, and replace the sequester with a balanced solution.

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THE "SOME LIVE AND SOME DIE"
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The SPEAKER pro tempore. The Chair recognizes the gentleman from California (Mr. McCLINTOCK) for 5 minutes.

Mr. McCLINTOCK. Mr. Speaker, last week, the Nation learned of the plight of Sarah Murnaghan, the 10-year-old who will die within weeks unless she gets a desperately needed lung transplant. There are no pediatric lungs available, but there may be adult lungs, which her doctors say would be entirely satisfactory for her condition. But because she's nearly 11 years old and not 12, the bureaucratic regulations prohibited it.

As Secretary of Health and Human Services, Kathleen Sebelius could have modified those regulations to conform to the judgment of the doctors, but she wouldn't. Her warm words of sympathy for Sarah and her family at a Congressional hearing last week were horrific: "some live and some die." Fortunately, a Federal judge intervened and concluded what Sebelius wouldn't, that the regulations are arbitrary and capricious. Thank God, Sarah is now on the adult transplant list, but the incident provided all of us with a chilling look at what health care will be like when bureaucrats like Kathleen Sebelius are making more and more of our health care decisions.

Sebelius constructed a straw man to argue with. She said that we shouldn't have public officials making these choices, and a lung provided to Sarah necessarily means a lung denied to someone else. That is utterly disingenuous. Sarah's family, joined by many Members of the House, were not calling for Sebelius to pick winners or losers but, rather, were calling for her to place the judgment of the doctors ahead of the rigid one-size-fits-all diktats of the Federal bureaucracy in all such cases, not just this one.

The fact is, Ms. Sebelius is picking who lives and who dies. The difference is that she is doing so not by deferring to the judgment of doctors but, rather, by conforming to the cold and rigid regulations that cannot discern between individual cases.

This is the process to which we are about to consign every American as government dictates every detail of their health coverage: sorry, you're a few months too young or too old. Tough luck, some live and some die.

My chief of staff grew up in the Soviet Union where the first question asked when an ambulance was called was, "Well, how old is the patient?" That's what bureaucracies do. They choose who wins and who loses, who lives and who dies, and they do so in a blind, cold, unthinking, and unreasonable manner.

The fact is we don't want officials making these choices, which is exactly what Ms. Sebelius is doing. Those decisions should not involve the government but, rather, should be determined by the individual judgment of the professional physicians directly involved. Until the court stepped in, that's what this administration was impeding. And that shouldn't surprise us. This is the same administration that has substituted the individual medical insur-

ance choices once made by families with the one-size-fits-all mandates of the very same Federal officials who dismissively tell dying 10-year-olds "some live and some die."

Mr. Speaker, this incident was a dire warning to us all of the danger that lies ahead for every American. Remember that the same IRS that abused its fearsome authority to harass and intimidate ordinary Americans for political reasons next year will have the power to enforce the regulations over our families' choice of health plans under ObamaCare.

Mr. Speaker, each of us as Americans may one day face the same peril as Sarah Murnaghan because of what we set in motion by empowering this government to take an ever-widening role in our health care decisions. We have taken a process that once was determined by individual choice and was once guided by the professional judgment of the physicians who actually gathered around the patient's bed and turned those decisions over to the likes of Kathleen Sebelius.

I'm afraid in coming years we will pay dearly for that duplicity as we move ever closer toward the "Brave New World" of bureaucratically controlled health care that we can already see so clearly through a 10-year-old's life-or-death battle with the Federal bureaucracy.

STATE ETHICS LAW PROTECTION ACT

The SPEAKER pro tempore. The Chair recognizes the gentleman from Illinois (Mr. QUIGLEY) for 5 minutes.

Mr. QUIGLEY. Mr. Speaker, I rise today to announce my reintroduction of the State Ethics Law Protection Act. At a time when indictments and allegations of ethics violations of our elected leaders have become all too common, now more than ever we must use every tool at our disposal to fight corruption.

Unfortunately, the Federal Government is currently preventing numerous States from using one of the most important tools we have to fight cronyism, corruption, and waste. My home State of Illinois, which is no stranger to these issues, along with several other States around the country, has taken a stand against corruption by passing laws to eliminate shady pay-to-play contracting.

Pay-to-play politics is the practice of trading campaign contributions for lucrative government contracts. Pay-to-play practices erode the integrity of our public works projects and allow individuals to profit at the expense of American taxpayers. It is the most common example of government corruption.

Fortunately, it is also one of the easiest to solve. Anti-pay-to-play laws are designed to ensure that the competitive bidding process for government contracts is open and fair, not rigged or otherwise biased by lining the