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3 MARKUP ON H.R. 1213, TO REPEAL MANDATORY FUNDING PROVIDED TO

4 THE STATES IN THE PATIENT PROTECTION AND AFFORDABLE CARE ACT

5 TO ESTABLISH AMERICAN HEALTH BENEFIT EXCHANGES;

6 H.R. 1214, TO REPEAL MANDATORY FUNDING FOR SCHOOL-BASED

7 HEALTH CENTER CONSTRUCTION

8 H.R. 1217, TO REPEAL THE PREVENTION AND PUBLIC HEALTH FUND;

9 H.R. 1216, TO AMEND THE PUBLIC HEALTH SERVICE ACT TO CONVERT

10 FUNDING FOR GRADUATE MEDICAL EDUCATION IN QUALIFIED TEACHING

11 HEALTH CENTERS FROM DIRECT APPROPRIATIONS TO AN AUTHORIZATION

12 OF APPROPRIATIONS;

13 H.R. 1215, TO AMEND TITLE V OF THE SOCIAL SECURITY ACT TO

14 CONVERT FUNDING FOR PERSONAL RESPONSIBILITY EDUCATION

15 PROGRAMS FROM DIRECT APPROPRIATIONS TO AN AUTHORIZATION OF

16 APPROPRIATIONS; AND

17 H.R. 1343, TO RETURN UNUSED OR RECLAIMED FUNDS MADE AVAILABLE

18 FOR BROADBAND AWARDS IN THE AMERICAN RECOVERY AND

19 REINVESTMENT ACT OF 2009 TO THE TREASURY OF THE UNITED STATES

20 TUESDAY, APRIL 5, 2011

21 House of Representatives,

22 Committee on Energy and Commerce
23 Washington, D.C.

24 The committee met, pursuant to call, at 10:11 a.m., in
25 Room 2123 of the Rayburn House Office Building, Hon. Fred
26 Upton [Chairman of the Committee] presiding.

27 Members present: Representatives Upton, Barton,
28 Stearns, Whitfield, Shimkus, Pitts, Bono Mack, Walden, Terry,
29 Rogers, Myrick, Sullivan, Murphy, Burgess, Blackburn,
30 Bilbray, Bass, Gingrey, Scalise, Latta, McMorris Rodgers,
31 Harper, Lance, Cassidy, Guthrie, Olson, McKinley, Gardner,
32 Pompeo, Kinzinger, Griffith, Waxman, Dingell, Markey, Towns,
33 Pallone, Rush, Eshoo, Green, DeGette, Capps, Doyle,
34 Schakowsky, Gonzalez, Inslee, Baldwin, Ross, Weiner,
35 Matheson, Butterfield, Barrow, Matsui and Christensen.

36 Staff present: Clay Alspach, Counsel, Health; Gary
37 Andres, Staff Director; Jim Barnette, General Counsel;
38 Michael Beckerman, Deputy Staff Director; Mike Bloomquist,
39 Deputy General Counsel; Paul Cancienne, Policy Coordinator,
40 Commerce, Manufacturing, and Trade; Howard Cohen, Chief
41 Health Counsel; Aaron Cutler, Deputy Policy Director; Andy
42 Duberstein, Special Assistant to Chairman Upton; Paul

43 Edattel, Professional Staff Member, Health; Neil Fried, Chief
44 Counsel, Communications and Technology; Julie Goon, Health
45 Policy Advisor; Cory Hicks, Policy Coordinator, Energy and
46 Power; Debbie Keller, Press Secretary; Peter Kielty, Senior
47 Legislative Analyst; Ryan Long, Chief Counsel, Health; Alexa
48 Marrero, Communications Director; Carly McWilliams,
49 Legislative Clerk; Jeff Mortier, Professional Staff Member;
50 Katie Novaria, Legislative Clerk; Monica Popp, Professional
51 Staff Member, Health; David Redl, Counsel, Telecom; Heidi
52 Stirrup, Health Policy Coordinator, Kristin Amerling,
53 Democratic Chief Counsel and Oversight Staff Director; Phil
54 Barnett, Democratic Staff Director; Jen Berenholz, Democratic
55 Chief Clerk; Stephen Cha, Democratic Senior Professional
56 Staff Member; Shawn Chang, Democratic Counsel; Jeff Cohen,
57 FCC Detailee; Alli Corr, Democratic Policy Analyst; Sarah
58 Fisher, Democratic Policy Analyst; Ruth Katz, Democratic
59 Chief Public Health Counsel; Purvee Kempf, Democratic Senior
60 Counsel; Karen Lightfoot, Democratic Communications Director
61 and Senior Policy Advisor; Karen Nelson, Democratic Deputy
62 Committee Staff Director for Health; Rachel Sher, Democratic
63 Senior Counsel; Roger Sherman, Democratic Chief Counsel,
64 Communications and Technology; and Lindsay Vidal, Democratic
65 Press Secretary.

|
66 The {Chairman.} Good morning everyone. The committee
67 is going to come to order. The chair recognizes himself for
68 an opening statement.

69 We are here today to consider a series of bills that
70 share a common theme: protecting the American taxpayer. We
71 will vote today on five bills to repeal unaccountable
72 mandatory spending in the health care law, some of which is
73 better authorized to be funded through the discretionary
74 process if Congress deems it a priority and some of it which
75 could be eliminated altogether.

76 We will also consider legislation to ensure reclaimed
77 broadband stimulus funds can be returned to the U.S.
78 Treasury, and I appreciate the work of the Democratic side as
79 we work that issue through.

80 Three months ago, John Boehner assumed the Speaker's
81 gavel and began a transformation of the House. We said that
82 we would focus on jobs, and we have. We said that we would
83 cut spending, and we have. We said we would vote to repeal
84 the unpopular health care law to pave the way to replace it
85 with something better, and we have done part of that.

86 Yesterday, I reported to our colleagues in the House
87 leadership on what we have accomplished here at the Energy
88 and Commerce Committee in the first quarter of 2011: 30

89 hears, substantive investigations on covering little-known
90 programs and spending in the health care law, and as I
91 reported yesterday, we are just getting started. The bills
92 that we are voting on today fit with this record of
93 accomplishment on behalf of the American people, so let us
94 continue to get started.

95 We all know that the health care reform package was
96 rushed to a vote, and no one actually expected, at least not
97 a lot of people perhaps, expected that the Senate bill would
98 become law. All the warts in the inartful legislative
99 drafting were going to be addressed during the House and
100 Senate conference. Then Scott Brown was elected and the
101 Senate no longer had the votes to pass the controversial
102 bill. Rather than go to a conference and negotiate a
103 compromise, the Senate bill was jammed through the House.
104 Republicans couldn't amend it nor could Democrats change the
105 even obvious flaws. As an example, the Senate authors
106 exempted leadership and committee staff from being forced to
107 buy insurance in the exchange. Certainly, an exemption for
108 leadership staff was, I don't believe, the intent of the
109 authors. But by circumventing regular order, there wasn't an
110 opportunity to fix it.

111 Another egregious example was to provide the Secretary
112 of HHS and unlimited tap on the Federal Treasury. Section

113 1311(a) of PPACA provides the Secretary a direct
114 appropriation of such sums as necessary for grants to States
115 to facilitate the purchase of qualified health plans in newly
116 created exchanges. The Secretary can determine the amount of
117 spending and spend the funds without further Congressional
118 action. The legislative language was written so broadly that
119 the only real restriction on what can be funded is how the
120 Secretary defines terms such as ``facilitate enrollment.''

121 I will give my friends on the other side of the aisle
122 the benefit of the doubt. You probably intended to fix this
123 in conference when drafting that the authors didn't have time
124 to determine the cost of the program and wrote a blank check
125 to be filled in later. Unfortunately, later never came. And
126 now a blank line in the bill has turned into a blank check
127 signed by the taxpayers.

128 Today we will vote to repeal that unchecked spending
129 power. We will also consider legislation introduced by
130 Chairman Pitts to eliminate the public health slush fund that
131 was created under section 4002. In a nutshell, it was a
132 slush fund for the Secretary to spend on any activity under
133 the Public Health Service Act, spending that would come above
134 and beyond the amount Congress appropriates for that
135 activity. By 2015, \$2 billion will be automatically
136 deposited into the fund each year in perpetuity and the

137 Secretary will be able to spend the money without further
138 Congressional oversight. I would urge my colleagues to
139 remember that we are \$14 trillion in debt. Our deficit this
140 year again will exceed \$1.5 trillion. We must prioritize our
141 spending and ensure that we are not funding duplicative
142 programs. Our country is broke, and we cannot continue to
143 spend money that we do not have. Slush funds and unlimited
144 taps on the treasury must be the first to go. If my
145 Democratic colleagues have other suggestions to reduce
146 spending, we certainly stand ready to work with you.
147 Programs must be weighed and prioritized against the merits
148 of other programs. We must get our federal spending under
149 control, and we have to do it starting today. Yesterday
150 would have been better. I urge members to support all five
151 health bills that we are going to mark up.

152 The first bill that we will consider was in a February
153 hearing on the broadband stimulus funds and last week swiftly
154 passed through subcommittee with a unanimous voice vote. It
155 improves oversight of the awards and clarifies some
156 ambiguities that the IG raised regarding what happens to
157 returned or reclaimed funds. These are not major changes but
158 I think they are wise, and because of the large sums of money
159 that we are talking about and because while most of the money
160 remains to be spent, we are already seeing some of the funds

161 returned or reclaimed. I look forward to working with
162 Ranking Member Waxman and his staff as this bill advances and
163 we look at additional protections for the taxpayers.

164 I would also note that we are going to adjourn
165 temporarily at noon and come back promptly at 1:00.

166 [The prepared statement of Mr. Upton follows:]

167 ***** COMMITTEE INSERT *****

|
168 The {Chairman.} At this point I yield 5 minutes to the
169 ranking member of the Energy and Commerce Committee, Mr.
170 Waxman, my friend from California.

171 Mr. {Waxman.} Thank you very much, Mr. Chairman.

172 We are not broke. We are not broke as a Nation. We can
173 afford certain basic priorities, and the bills that we have
174 before us serve to fund those very basic priorities. The
175 Republican budget that has just come out shows what the
176 Republican priorities really are all about, and they are to
177 end Medicare as we have known it and Medicaid as we have
178 known it, let the middle income and the lower income bear the
179 burden so that we can keep the tax cuts for the upper, upper,
180 upper income. If we had those taxes and people shared in the
181 burden of dealing with our fiscal issues, we would not be
182 broke and we would be a more just society.

183 Today we are going to consider five controversial health
184 bills and one non-controversial telecommunications bill. The
185 five health bills are not about the merits of mandatory
186 versus discretionary spending, as our Republican colleagues
187 continue to assert, nor are they about protecting Congress's
188 prerogative to fund or not to fund health programs. We make
189 those kinds of choices, often difficult choices, all the
190 time. And they are certainly not about the substance of any

191 of the programs that are the subject of the five bills.

192 Today I am releasing fact sheets for every member on
193 this committee about the impact of the bills. Each fact
194 sheet includes State- and district-level information about
195 premature deaths, smoking rates, obesity rates, and how the
196 Prevention and Public Health Fund, which would be defunded
197 under the legislation, addresses these public health threats.

198 Pure and simple, this markup represents the Republicans'
199 newest line of attack to disrupt, dismantle and ultimately
200 destroy the Affordable Care Act. They are doing so by
201 sacrificing longstanding bipartisan policies to advance a
202 narrow partisan ideology. For many years, Republicans have
203 joined with Democrats in making the case to do more to
204 prevent disease and promote health, and in turn, to cut
205 health care costs. But today, the committee will vote to end
206 funding for the first and only federal program with
207 dedicated, ongoing resources designed to make us a healthier
208 Nation. I know they will say we can get appropriations, but
209 let us look some day at all the programs we have authorized
210 and all the appropriations that did not follow, and one of
211 the types of programs that gets defunded first are these
212 kinds of programs. That is why it is important to have a
213 guaranteed funding source.

214 For many years, Republicans carried the mantle for

215 State-based health reform. But today, the committee will
216 vote to take away money States need at a time of enormous
217 pressure for them to develop their own, unique insurance
218 exchange programs that are the cornerstones for the full
219 implementation of the health reform law.

220 Republicans have scolded Democrats for not doing enough
221 to expand the country's health work force. They highlight
222 the need for more physicians, particularly primary care
223 providers, to meet the growing demand for services. But
224 today, the committee will vote to cut support for a work
225 force program that would enlarge that pool of providers, and
226 the Committee will also vote to eliminate funding for school-
227 based health centers that provide primary care services to
228 vulnerable children and adolescents.

229 We also have before the Committee a bill that would
230 terminate mandatory funding for the only evidence-based teen
231 pregnancy program but retain mandatory spending for an
232 abstinence-only-until-marriage program that study after study
233 shows is ineffective. This is a blatant double standard that
234 may advance a partisan agenda, but it makes absolutely no
235 policy sense.

236 Each one of these programs was established in the
237 ``hated'' Affordable Care Act. I put ``hated'' in quotes
238 only to indicate the Republican sincere, on the part of some

239 members, view of that law. I think it is a good law but
240 apparently, no program in the bill, even those with strong
241 bipartisan roots, is immune from partisan attack. And the
242 partisan agenda that these bills represent will not be a
243 winning formula, not for health reform, not for public health
244 and not for the American people. We may lose the votes today
245 but these bills, I hope, will not go anywhere in the Senate.

246 On the other hand, we are considering a bill that tells
247 the Commerce Department and the Agriculture Department to
248 deposit in the Treasury any Recovery Act funds for broadband
249 deployment that are returned by grant or loan recipients. We
250 support that legislation. We worked together with Chairman
251 Walden, and we appreciate his willingness to work with us. I
252 hope to be able to support the amendment that the majority
253 will offer today that reflects suggestions from the agencies
254 on that point, and I yield back the balance of my time.

255 [The prepared statement of Mr. Waxman follows:]

256 ***** COMMITTEE INSERT *****

|
257 The {Chairman.} Thank you.

258 I would remind all members that pursuant to the
259 committee rules, all members' opening statements will be made
260 part of the record. Are there further opening statements
261 requested? I would yield 1 minute to the gentleman from
262 Florida, Mr. Stearns.

263 Mr. {Stearns.} Thank you, Mr. Chairman, and let me just
264 say to my colleague, Mr. Waxman, that the national debt of
265 the United States has increased by \$98 billion during the
266 month of March, and so I hope a lot of his amendments are
267 going to help reduce that deficit. Now, as a country, we
268 need to obviously get a handle on the control of this debt.
269 Just because we followed Greece into democracy does not mean
270 that we should follow them into bankruptcy.

271 So I am pleased that we are taking up this bill and I
272 commend the chairman on H.R. 1213 which would eliminate an
273 uncapped, unlimited program in what the Democrats call the
274 Patient Protection and Affordable Care Act, which we call
275 President Obama's health care bill, because this health care
276 bill that the President is supporting and all the Democrats
277 support grants far too much budgetary authority to the
278 Secretary of Health and Human Services and far too little
279 program requirements to ensure proper oversight. So I think

280 our role here as Republicans is to bring oversight. It is
281 fiscally irresponsible to give any one individual unlimited
282 mandatory spending authority. I am glad we can have the
283 opportunity to correct this legislative error, and I thank
284 you.

285 [The prepared statement of Mr. Stearns follows:]

286 ***** COMMITTEE INSERT *****

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287 The {Chairman.} Do other members seek to make an
288 opening statement? The gentleman from New Jersey, Mr.
289 Pallone, is recognized for 3 minutes as the ranking member of
290 the Health Subcommittee.

291 Mr. {Pallone.} Thank you, Mr. Chairman.

292 The purpose of these bills is basically to defund the
293 Affordable Care Act, but think about what the Republicans are
294 actually taking money away from. You can't claim States have
295 no flexibility within the Affordable Care Act and then defund
296 one of the very foundations of State flexibility, the State
297 exchange grants. You can't say in one breath that the
298 Affordable Care Act doesn't do enough to address workforce
299 training and then rescind funding in the law that provides
300 for the training of primary care doctors, and you shouldn't
301 claim to want to do more to curb teen pregnancy and then
302 repeal a program created to reduce the rates of unintended
303 pregnancy and you shouldn't claim that prevention matters and
304 then repeal the first real effort by Congress to commit a
305 steady stream of funding to prevention programs.

306 There is no real concern by my Republican colleagues
307 about the use of mandatory funding because if there was, you
308 wouldn't have promoted mandatory funding time and time again
309 for programs that you support like the abstinence-only

310 program. This markup isn't about funding streams, it is
311 simply an effort to dismantle the health care reform law
312 without offering any solutions in return.

313 Now, I have been looking for these solutions at the
314 hearing in the Health Subcommittee. They never come up. Our
315 colleagues on the Democrat side keep challenging our
316 Republican colleagues to come up with solutions for the
317 problems in the health care system. They never have any.
318 But we did get one today, or we are about to, and that is the
319 Republican budget. I listened to the chairman of the
320 Republican Budget Committee, Mr. Ryan, several times over the
321 last few days, and basically what he is doing is what the GOP
322 usually does: get old people. I think Mr. Markey has used
323 that term many times, not the Grand Old Party but the party
324 that gets old people. What they want do now is privatize in
325 their budget Medicare, basically say that seniors should go
326 out like they used to in the old days before Medicare, try to
327 find a health care policy, and then they will get some
328 premium support like a voucher. They will get a little money
329 to pay for it and the rest of it they have to pay out of
330 pocket. So there will be no more guarantee of health care
331 insurance the way there is now under Medicare because it
332 essentially becomes privatized or vouchered and you pay out
333 of pocket.

334 The budget also is going to severely cut Medicaid,
335 another effort to GOP, or get old people, and what is that
336 going to mean? States aren't going to have the money for
337 reimbursement for nursing homes. Nursing homes will close or
338 they will go back to the days when there are fires or
339 inadequate care. It is just amazing to me. I really think
340 the Republicans ought to be ashamed of themselves if their
341 solution to health care is to get rid of Medicare and
342 Medicaid, which essentially is what I see in the Republican
343 budget today.

344 So now I know what the solution is: repeal health care
345 reform, get rid of Medicare and Medicaid, and I am just
346 wondering when we are going to move on to create jobs, grow
347 the economy and all the other things that my constituents ask
348 about and which this committee has not been doing since
349 January. I yield back.

350 [The prepared statement of Mr. Pallone follows:]

351 ***** COMMITTEE INSERT *****

|
352 The {Chairman.} The gentleman yields back. Are there
353 other members seeking recognition? Mr. Bass is recognized
354 for 1 minute.

355 Mr. {Bass.} Mr. Chairman, thank you very much.

356 I know most of the attention and debate today will be
357 focused on the health care bills that we are marking up. I
358 would just like to comment that the first bill we will take
359 up, the bill having to do with returning unused or reclaimed
360 funds made available under the stimulus bill to the Treasury
361 of the United States, may not seem like a significant piece
362 of legislation. I would only point out that this is a \$7.2
363 billion program. Most of the money hasn't been allocated
364 yet. The broadband map has just come out, and there may be
365 significant issues related to oversight that the subcommittee
366 and the full committee will have to address over the coming
367 months to make sure that we don't have significant hearings
368 on waste, fraud and abuse.

369 I appreciate the fact that this is a bipartisan effort,
370 and I think it is a good piece of insurance, if you will,
371 that this committee needs to enact in order to assure that
372 this program operates successfully, and I yield back.

373 [The prepared statement of Mr. Bass follows:]

374 ***** COMMITTEE INSERT *****

|
375 The {Chairman.} The chair would recognize the
376 gentlelady from California, Ms. Eshoo, for 3 minutes.

377 Ms. {Eshoo.} Thank you, Mr. Chairman, and good morning
378 to all of the members.

379 On the first bill that we are taking up relative to
380 broadband, the minority supports it and it actually is the
381 second time we will be voting on this issue because the
382 language was contained in the Dodd-Frank legislation that any
383 unused dollars would be returned to the Treasury, but we are
384 ready to vote on this again and we want effective oversight,
385 and if there is any, and I hope there isn't but if there is,
386 that oversight would identify where there is any abuse or
387 fraud or waste and dollars returned to the U.S. Treasury.

388 I want to thank the majority for agreeing to work with
389 us on some of the ambiguities in the legislation that could
390 have unintended consequences on agency oversight relative to
391 the OIG and the DOJ.

392 On the health care bills, what do I say? First of all,
393 this notion that this side of the aisle does not recognize
394 the challenge of our Nation's debt and deficit is simply not
395 the case. In December, we voted for \$41 billion in cuts.
396 That was in December. But there is a saying, Mr. Chairman,
397 there are those that know the price of everything and value

398 nothing. If we were to go member by member and just pose the
399 question, do you believe that prevention saves money, did you
400 have your children inoculated, you are not for a prevention
401 fund, investment and prevention in public health programs.
402 These are some of the soundest investments across our Nation
403 and in communities across our Nation. Are you not for
404 tackling tobacco use? Are you against trying to do something
405 about obesity that is so costly not only to the federal
406 programs but to the States as well? I mean, at leads to
407 diabetes, heart disease. We can go on and on. We have
408 physicians on this committee. They know that. Are you not
409 interested in tackling disease, stroke and cancer? You are
410 against that? That is what you are doing today with these
411 bills. Is there anyone here that is against graduate medical
412 education funding? This is where our primary care doctors
413 are trained. It is a proven that has proven itself over and
414 over and over again from Stanford University Medical Center
415 to Lucille Packard Children's Hospital to the children's
416 hospitals across our country. You are against that? I guess
417 so. That is what is in your bills.

418 I think that there is something in the DNA of the
419 Republican Party, something in the DNA that when there is
420 something for the many for average people, you can't help
421 yourselves. That costs too much. I think that this is

422 really a slippery slope today. I think it is a sad statement
423 about this committee that for years, as Mr. Waxman said,
424 continued to build on bipartisan agreements on where we could
425 make progress on health care issues for the people of this
426 country. I think it a sad day, and I think these attacks are
427 really dreadful. I yield back.

428 [The prepared statement of Ms. Eshoo follows:]

429 ***** COMMITTEE INSERT *****

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430 The {Chairman.} The gentlelady's time has expired. The
431 gentleman from Georgia, Dr. Gingrey, is recognized for 1
432 minute.

433 Dr. {Gingrey.} Mr. Chairman, thank you very much, and
434 if you ask the questions in the way the distinguished ranking
435 member of the subcommittee put them, sure, the answers would
436 be yes, we are for all these things, but if you ask the
437 American people the question, are you also along with that
438 for \$49,000 worth of debt for everybody in your household,
439 you would get a different answer.

440 As everyone knows, the financial health of the Nation is
441 in a very precarious state, and I want to thank Chairman
442 Upton for holding this markup today. Some in this room may
443 argue, as Ms. Eshoo just did, the potential health benefits
444 that the funding stream in these bills may provide. My
445 concern is how much damage to our national budget the White
446 House can do and will do with these funding streams. Buried
447 in the 2,400 pages of Obamacare is a direct pipeline to the
448 Treasury that allows the White House to tap into an unlimited
449 amount of federal funding and sidestep any Congressional
450 oversight in the process. This funding stream represents a
451 clear and present danger to the financial health of this
452 Nation and it must have Congressional oversight. If this is

453 truly the people's House, give them back what the last
454 Congress took away: control over this budget.

455 If this body is sincere in its wishes to restore fiscal
456 sanity in this country, I see no reason why we should not be
457 voting in a bipartisan manner to prevent this President or
458 any president from spending our Nation into insolvency. Mr.
459 Chairman, I yield back. Thank you.

460 [The prepared statement of Dr. Gingrey follows:]

461 ***** COMMITTEE INSERT *****

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462 The {Chairman.} The gentleman's time is expired. Are
463 there other members seeking time? The gentleman from
464 Michigan, the great State of Michigan, is recognized for 3
465 minutes, Mr. Dingell

466 Mr. {Dingell.} Mr. Chairman, I thank you for your
467 courtesy.

468 Today's markup serves as yet another opportunity for the
469 majority to strike away at the heart of the Affordable Care
470 Act through its public health program and State-based
471 exchange grants. These attempts to defund or convert pieces
472 of the Affordable Care Act seem contrary to what my
473 colleagues in the majority claim to be in favor of. They say
474 they are for improving the Nation's health yet they are going
475 to repeal the Prevention and Public Health Fund, which would
476 make national investments in innovative and public welfare
477 activities. They claim to support school-based health
478 centers yet they are going to repeal the construction and
479 renovation funds which serve as the first major investment in
480 these badly needed centers. They claim to want to allow the
481 States to address the needs and challenges of their
482 individual populations yet they are going to repeal the
483 State-based exchange grants which will help the States to set
484 up exchanges that will work best for them in their own unique

485 circumstances.

486 In the subcommittee, we heard time and time again about
487 the purported outrage over the fact that these programs, the
488 Prevention and Public Health Fund, the teaching health
489 centers, the personal education and responsibility programs,
490 the school-based health center construction grants and the
491 State exchange grants were mandatory in nature yet we have
492 seen numerous pieces of legislation that have come and gone
493 before members of this committee and have included both
494 mandatory and discretionary streams of funding, and my
495 colleagues on the other side have not infrequently supported
496 that. I do not believe that today's markup is going to
497 produce any bit of substantive legislation that will improve
498 or contribute to the Nation's public health or the wellbeing
499 of American families. I would also note that probably these
500 bills are not going to become law.

501 The American public demands more than no solution to the
502 health problems. More importantly, American families are
503 tired of continued infighting in Washington. They deserve
504 more than a rehash of last Congress's debates. They want to
505 know how they will benefit from the changes in our health
506 system laid out in the Affordable Care Act, and it is our
507 duty as Members of Congress to provide them with these
508 answers. They want progress and resolution of our Nation's

509 problems based on honest and meaningful cooperation in
510 Washington.

511 The Affordable Care Act includes some of the strongest
512 consumer protections in our health system in years.
513 Insurance companies can no longer make health decisions for
514 families. Patients can no longer be denied health insurance
515 due to preexisting conditions. Seniors will have help in
516 affording their prescriptions. College students will be
517 allowed, amongst others, to stay on their parents' health
518 insurance plans. This is legislation at its best:
519 protecting consumers from abuses in industry.

520 We all want health care coverage that is more affordable
521 and covers the uninsured and underinsured, and we have a
522 chance to do so at this time. I urge us to work together on
523 this rather than spend our time carping about what we don't
524 like that the last Congress did.

525 [The prepared statement of Mr. Dingell follows:]

526 ***** COMMITTEE INSERT *****

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527 The {Chairman.} The gentleman's time has expired. The
528 chair would recognize the gentleman from Ohio, Mr. Latta, for
529 1 minute.

530 Mr. {Latta.} Thank you, Mr. Chairman, and thank you
531 very much for holding the markup today on five important
532 bills on helping to control the out-of-control spending in
533 Obamacare.

534 From the beginning of the health care debate, House
535 Republicans have worked to provide meaningful health care
536 reform solutions. Unfortunately, last year the Democratic-
537 controlled Congress pushed through a bill that Americans did
538 not want or could not afford.

539 During the last district work period, I held courthouse
540 conferences in 10 of my 16 counties. During this time I had
541 over 134 one-on-one meetings with my constituents, and the
542 message I got loud and clear was repeal Obamacare and get the
543 Federal Government out of our lives.

544 I believe the bills before us today will help Congress
545 to rein in this out-of-control spending at a time when the
546 President's fiscal year 2011 deficit will reach an all-time
547 high of \$1.6 trillion, 10.9 percent of the GDP, and spending
548 in fiscal year 2011 will reach an all-time high of \$3.8
549 trillion. It is extremely irresponsible to allowing the

550 spending in Obamacare to continue. We are on an
551 unsustainable path and we must balance our federal budget,
552 just like American families have to.

553 And with that, Mr. Chairman, I yield back.

554 [The prepared statement of Mr. Latta follows:]

555 ***** COMMITTEE INSERT *****

|
556 The {Chairman.} The gentleman yields back. I would
557 recognize the gentleman from Texas, Mr. Green, for 1 minute.

558 Mr. {Green.} Thank you, Mr. Chairman. I appreciate the
559 opportunity. I ask unanimous consent that my full statement
560 be placed in the record.

561 Let us face it: we are having a political debate today,
562 and we can't ignore the fact that in these difficult times,
563 Americans are struggling to pay for their insurance. A large
564 number of Americans have access to quality, affordable health
565 care through the Affordable Care Act. Even in Texas, our
566 Department of Insurance reported our legislature acknowledged
567 the positive impact of the Affordable Care Act. The Texas
568 Department of Insurance reports States' removal of
569 underwriting restrictions, new premium rating reforms,
570 availability of subsidies and limitations on out-of-pocket
571 expenses for low- and middle-income families should make it
572 easier for many low-income Texans to obtain private
573 insurance.

574 By these bills today, you are attempting to do what you
575 can't do legislatively is to actually cut the funding for the
576 Affordable Care Act. You are attempting by undermining the
577 basic structure of the health care reform including
578 eliminating funds for the States to set up these health

579 insurance exchanges, stripping funding for Public Health and
580 Prevention fund, and a bill to convert mandatory funding for
581 the teaching health center program to discretionary funding.

582 Mr. Chairman, I look forward to working on reform of the
583 Affordable Care Act in a bipartisan manner, and I would hope
584 we would be able to do that, and we need to work together to
585 ensure all Americans have access to health care and hopefully
586 stop the political grandstanding. I yield back my time.

587 [The prepared statement of Mr. Green follows:]

588 ***** COMMITTEE INSERT *****

|
589 The {Chairman.} The gentleman yields back. Are there
590 other members seeking recognition? The gentleman from Texas,
591 Mr. Olson.

592 Mr. {Olson.} Thank you, Mr. Chairman, and thank you for
593 your leadership in holding this important markup.

594 One of the many reasons I voted against the President's
595 health care bill was because it contained mandatory slush
596 fund spending provisions such as the \$17.75 billion account
597 for the Prevention and Public Health Fund, and the unlimited
598 direct appropriation to help States set up exchanges created
599 under Obamacare. And echoing my colleague my Georgia's
600 concerns, these provisions take away Congressional spending
601 authority and give it directly to Secretary Sebelius,
602 granting her full authority to spend the funds in these
603 accounts practically on any program or activity she chooses.
604 So much for the Constitution.

605 The American people deserve better than having unelected
606 bureaucrats control tens of billions of their hard-earned tax
607 dollars. With the passage of these five bills today, we will
608 be taking tremendous steps forward in keeping our promise to
609 the American people to repeal and replace the President's
610 health care bill with commonsense reforms and bring fiscal
611 sanity back to Washington.

612 Thank you. I yield back.

613 [The prepared statement of Mr. Olson follows:]

614 ***** COMMITTEE INSERT *****

|
615 The {Chairman.} The gentleman's time is expired. Are
616 there other members? The gentleman from Pennsylvania, Mr.
617 Doyle, is recognized for 1 minute.

618 Mr. {Doyle.} Thank you, Mr. Chairman.

619 We are here to address six bills today, five to repeal
620 various components of the Affordable Care Act signed into law
621 last year, and one addresses the telecom issue, and I
622 appreciate Chairman Walden's working with our side of the
623 aisle to improve that bill. As I said last week, I don't
624 think this bill is usually critical but I will support its
625 passage.

626 Regarding the additional five ridiculous bills before us
627 today, my limited time only allows me to address one piece of
628 legislation that is of particular concern, H.R. 1216 offered
629 by Mr. Guthrie, which would fundamentally change the funding
630 mechanism for Medicare graduate medical education. We all
631 agree there is a shortage in primary care physicians. I
632 don't think anyone disputes that. So why are we here
633 debating this bill? This legislation would take the
634 jurisdiction out of the hands of this committee and allow our
635 friends in the Appropriations Committee to decide whether or
636 not to fund training for primary care providers even though
637 that is an issue that this committee has jurisdiction over

638 and has devoted time, research and energy to.

639 Mr. Chairman, these five bills are nothing more than a
640 war on doctors and a war on patients. I hope they all fail.

641 [The prepared statement of Mr. Doyle follows:]

642 ***** COMMITTEE INSERT *****

|
643 The {Chairman.} Thank you, I think. I recognize the
644 gentleman from Mississippi 1 minute, Mr. Harper.

645 Mr. {Harper.} Thank you, Mr. Chairman.

646 The Affordable Care Act jeopardizes care for the
647 elderly, compromises the belief of pro-life Americans,
648 penalizes job creators, limits States' flexibility under
649 Medicaid and results in job losses.

650 You know, I believe that individuals with preexisting
651 conditions should have access to care. Also, if you change
652 your job, you and your family should be able to keep your
653 health insurance. These are simple solutions that both
654 parties of Congress could have agreed to adopt. But instead
655 of advancing a bill that focuses on access to care, protects
656 the patient-doctor relationship and lowers health care
657 premiums through increased competition and choice, the
658 President signed a \$1.445 trillion law that reduces seniors'
659 Medicare benefits \$523 billion and raises taxes \$569 billion.
660 Further, this carelessly drafted law includes mandatory
661 funding that bypasses standard the committee process.

662 I will support today's bills that defund and/or make
663 mandatory funding subject to the normal appropriations
664 process. Thank you, and I yield back the balance of my time.

665 [The prepared statement of Mr. Harper follows:]

666 ***** COMMITTEE INSERT *****

|
667 The {Chairman.} The gentleman yields back. I recognize
668 the gentlelady from Illinois, Ms. Schakowsky.

669 Ms. {Schakowsky.} Thank you.

670 These are totally counterproductive pieces of
671 legislation that will make the health of our citizens much
672 worse and aren't going to do a darn thing to really put a
673 dent in any kind of savings. It will cost more in the end.

674 Eliminating critical investments in public health and
675 prevention--there is a good one--or cutting funding to
676 prevent smoking--21 percent of the people in my district,
677 adult population, smoke--that is not going to help them.
678 Cutting funding to prevent obesity, the number one health
679 care problem in our country, does this make any sense to
680 eliminate? And eliminating efforts to reduce premature
681 death. Do the American people know what you are doing?

682 I am joining this week a fast that was called by the
683 religious community and some progressive organizations, Jim
684 Lawless, president of Sojourners and Bread for the World and
685 others, who are continuing a prayer fast to express moral
686 outrage at the devastating impact of proposed federal budget
687 cuts on those most vulnerable in our society.

688 Case in point are the bills that we are seeing today.
689 This is a moral issue. We should not support these bills.

690 [The prepared statement of Ms. Schakowsky follows:]

691 ***** COMMITTEE INSERT *****

|
692 The {Chairman.} The chair recognizes the gentleman from
693 West Virginia, Mr. McKinley.

694 Mr. {McKinley.} Thank you, Mr. Chairman.

695 I am grateful to this committee for taking the time to
696 mark up these five health bills, which would defund and limit
697 the slush funds under President Obama's unconstitutional
698 health care bill. This is an important step, one more step
699 in showing the American people we are here to fight for them.

700 Despite the irresponsible and offensive language of
701 those who say we are not broke, they must not recognize that
702 we have been spending money we don't have. What part of \$1.6
703 trillion in deficit do people not understand? This has to
704 stop. These bills reflect the fiscal common sense that has
705 been missing in adult conversations in Congress for too long.

706 Mr. Chairman, I yield back my time.

707 [The prepared statement of Mr. McKinley follows:]

708 ***** COMMITTEE INSERT *****

|
709 The {Chairman.} The gentleman yields back. I would
710 recognize the gentlelady from Wisconsin, Ms. Baldwin.

711 Ms. {Baldwin.} Thank you, Mr. Chairman.

712 Bait and switch, that is what is called when you run for
713 office saying one thing, you get elected and you start doing
714 something entirely different. Bait and switch is why
715 Wisconsinites have taken to the streets by tens of thousands.

716 The last election was about jobs and the economy. The
717 Energy and Commerce Committee should be in the forefront of
718 our Nation's jobs agenda, but instead of leading on putting
719 Americans back to work, what are we doing? We are marking up
720 five bills offered by the Republicans that will not create
721 jobs, will not stimulate our economy and they will not put
722 middle-class Americans back to work.

723 I urge my colleagues to oppose these five bills and
724 yield back the balance of my time.

725 [The prepared statement of Ms. Baldwin follows:]

726 ***** COMMITTEE INSERT *****

|
727 The {Chairman.} The gentlelady yields back. Are there
728 other members on the Republican side seeking to make an
729 opening statement?

730 Mr. {Bilbray.} Mr. Chairman.

731 The {Chairman.} The gentleman from California.

732 Mr. {Bilbray.} Mr. Chairman, I wasn't planning on
733 making a statement, but let me just say after listening to my
734 colleagues, some of us were around last year when the so-
735 called health care bill was being proposed and being placed
736 through so quickly that we said give us time to read it.
737 There were many people on the other side of the aisle that
738 said look, we need to pass this now, we can always go back
739 and straighten out and correct the problems that you find
740 later once we get to read the bill. So I really find it hard
741 to believe that you didn't expect some kind of review, some
742 kind of correction, some kind of at least scrutiny over this
743 issue, and I said that before probably the kindest words I
744 have ever heard about this town is the problem with
745 Washington isn't that they try new things or that they make
746 mistakes but when they try new things and make mistakes, they
747 are not brave enough to go back and correct it.

748 And so I just ask that, you may not agree with the
749 changes but you must embrace the concept that it is not only

750 a right but a responsibility of this committee to try to go
751 through and improve it as we see appropriate at the time.
752 This is what we are elected to do, like it or not. We didn't
753 take the time to read and go through the bill before it was
754 passed. We darn well have the responsibility to do it now as
755 promised to the American people when it was passed, and I
756 yield back.

757 [The prepared statement of Mr. Bilbray follows:]

758 ***** COMMITTEE INSERT *****

|
759 The {Chairman.} The chair would recognize the gentleman
760 from North Carolina, Mr. Butterfield, for 1 minute.

761 Mr. {Butterfield.} Thank you very much, Mr. Chairman.

762 Mr. Chairman, the bills that we are marking up today are
763 very, very troubling, to say the least. My colleagues make
764 the argument that the Affordable Care Act adds to the deficit
765 and to the debt, and that is absolutely not the case. The
766 Congressional Budget Office has said it time and time again.
767 The Affordable Care Act is an issue that obviously continues
768 to divide the Congress and it divides the American people,
769 and I acknowledge that, but let me tell you in my district,
770 the constituents that I represent by an overwhelming majority
771 support the Affordable Care Act, and this is not Obamacare,
772 this is the Patient Protection and Affordable Care Act. That
773 is the name of this law.

774 I ask my colleagues to read the bill. You talk about
775 reading the bill. You read the bill and see if the word
776 ``Obamacare'' is in this bill in any way. This is a
777 political witch hunt today. I ask you to stop it. Let us
778 reconcile our differences and let us put this to rest once
779 and for all. I yield back.

780 [The prepared statement of Mr. Butterfield follows:]

781 ***** COMMITTEE INSERT *****

|
782 The {Chairman.} Are there other members on the
783 Republican side seeking to make an opening statement? If
784 not, the chair would recognize the gentlelady from
785 California, Ms. Matsui.

786 Ms. {Matsui.} Thank you, Mr. Chairman.

787 I am in opposition to the health bills before our
788 committee today. They work to limit choice, limit access and
789 limit quality care to all Americans. They cut funding to
790 States and localities that help ensure better preventive care
791 is present in their communities. They cut programs aimed at
792 helping provide low-income kids with long-overdue medical
793 care. They cut funding to medical students seeking careers
794 in primary care, and they cut funding to States to help
795 establish more efficient health insurance marketplaces.
796 These bills collectively and individually harm our most at-
797 risk populations: children and seniors.

798 We should reject these bills so that we can work
799 together to improve our health care delivery system in a
800 meaningful and constructive manner. I yield back the balance
801 of my time.

802 [The prepared statement of Ms. Matsui follows:]

803 ***** COMMITTEE INSERT *****

|
804 The {Chairman.} The chair would recognize the chair
805 emeritus of the committee, Mr. Barton, for 3 minutes.

806 Mr. {Barton.} Thank you. I only need one, Mr.
807 Chairman. I am going to submit my opening statement for the
808 record. I just want to say having listened to all my friends
809 on the minority side, I would Mr. Butterfield the A plus for
810 the most intense delivery, the best use of props, and I hope
811 that Mr. Waxman gives him a Popsicle, and I yield back.

812 [The prepared statement of Mr. Barton follows:]

813 ***** COMMITTEE INSERT *****

|
814 The {Chairman.} The chair would recognize the
815 gentlelady from the Virgin Islands, Ms. Christensen.

816 Dr. {Christensen.} Thank you, Mr. Chairman.

817 Mr. Chairman, I am just amazed at what is happening here
818 today. Not only has the majority not created jobs or done
819 anything to support the recovery but today these bills
820 threaten to throw this country back into the ditch the Bush
821 Administration put us in. Just when President Obama and
822 Democratic policies are slowly beginning to create jobs and
823 revive the economy, defunding these critical parts of the
824 Affordable Care Act would make insurance unaffordable to
825 middle-class families, make sure we don't have sufficient
826 providers to care for the sick, and undermine the Prevention
827 and Public Health Fund, the very program that would reduce
828 health care costs, not to mention make this country
829 healthier. These bills would hurt the American people, hurt
830 our country and waste time we should be using to deal with
831 the serious challenges the poor and middle-class in this
832 country are facing.

833 Thank you. I yield back.

834 [The prepared statement of Dr. Christensen follows:]

835 ***** COMMITTEE INSERT *****

|
836 The {Chairman.} Are there other members wishing to make
837 an opening statement?

|

838 H.R. 1213

839 The {Chairman.} If not, if there are no further opening
840 statements, the chair will call up H.R. 1213 and ask the
841 clerk to report.

842 The {Clerk.} H.R. 1213, to repeal mandatory funding
843 provided to States in the Patient Protection and Affordable
844 Care Act, to establish--

845 [H.R. 1213 follows:]

846 ***** INSERT 2 *****

|
847 The {Chairman.} Without objection, the first reading of
848 the bill is dispensed with. So ordered. And I would
849 recognize myself for 5 minutes for an opening statement on
850 the bill.

851 I am going to be brief because I discussed my bill
852 during my opening statement. As we all know, the Federal
853 Government is borrowing 41 cents of every dollar that it
854 spends. We are facing a \$1.6 trillion deficit for this
855 fiscal year and the next, the third straight year of
856 trillion-dollar deficits, an all-time record in nominal terms
857 and a new post-World War II record as a share of the economy.

858 There are no two ways about it: we are broke. Some say
859 increase taxes, but Washington is already spending more than
860 one out of every four dollars that the country has. We don't
861 have a revenue problem; we have a spending problem, in my
862 belief, and it is a problem that we must get under control

863 Section 1311(a)(1) of PPACA provides a direct
864 appropriation of the amount necessary to enable the HHS
865 Secretary to make awards for State-based exchanges. That
866 language empowers the Secretary to determine the amount that
867 she wants to spend with no limit. These awards can be used
868 to facilitate enrollment in the exchanges. However, there is
869 no definition of what that means. It could be interpreted to

870 mean a variety of things. Mr. Guthrie brought up comments
871 from an HHS employee telling States that they can get out of
872 their budget problems that are driven by Medicaid spending by
873 tapping other streams of revenue, for example, these exchange
874 subsidies.

875 Many amendments have been filed to this bill but not one
876 so far would actually curtail the power of the Secretary to
877 spend unlimited amounts from the Treasury, not one amendment
878 that would put some fiscal limitation to the direct tap in
879 the taxpayers' pocket. This is essentially a mandatory
880 spending provision that includes such sums as necessary and
881 gives the Secretary sole power to determine what is
882 necessary.

883 Then you have government bureaucrats suggesting that the
884 money could be used for purposes unrelated to the supposed
885 purpose of the fund. How can anyone not be concerned with a
886 provision like that when our country is facing such a serious
887 fiscal challenge? Regardless of our views on the health care
888 law, no one should support providing the Secretary of HHS an
889 unlimited tap on the Treasury for undefined activities and
890 thus I would urge my colleagues to support H.R. 1213. I
891 yield back my time.

892 Are there amendments or discussions further on the bill?
893 The gentleman from New Jersey, Mr. Pallone, has an amendment

894 at the desk and is recognized for 5 minutes to talk about his
895 amendment, and the clerk will report the title of the
896 amendment.

897 Mr. {Pallone.} Number 25. Have I been recognized, Mr.
898 Chairman, to speak?

899 The {Chairman.} Yes. The gentleman is recognized for 5
900 minutes.

901 [The amendment follows:]

902 ***** INSERT 3 *****

|
903 Mr. {Pallone.} Thank you, Mr. Chairman.

904 This bill attacks one of the linchpins of health reform:
905 grants to States to establish their insurance exchanges.
906 Exchanges are a work in progress, and all the work the 49
907 States, the District of Columbia and four territories are
908 engaged in would be fully undermined by a repeal of the
909 exchange establishment grants by H.R. 1213.

910 These grants are structured to allow States to develop a
911 State-specific solution and design for their individual
912 marketplace. The exchanges ought to be what States want to
913 make of them, giving them the kind of flexibility and choice
914 that is needed to meet the unique needs of their residents.

915 Now, if we don't have this funding under the grants,
916 States will not be able to choose the type of marketplace
917 that is best for their families and businesses. In addition,
918 repeal of these grants could not come at a worst time for
919 States. Given current budget deficits in most States, repeal
920 would result in States not meeting the benchmarks for running
921 their own State-based exchanges.

922 The truth is, these funds are not taking away the
923 exchanges. The Affordable Care Act requires every State to
924 have a health insurance exchange, and in instances where the
925 States opts out, the Federal Government steps in. Therefore,

926 the Federal Government will run the State exchange if the
927 State does not set one up and doesn't have the money to do
928 so. The Federal Government will decide how many exchanges
929 there will be in a State. The Federal Government will decide
930 how to open the marketplace and what plans there will be, and
931 the Federal Government will set up a competitive transparent
932 marketplace.

933 Now, I know that my colleagues on the other side of the
934 aisle have been advocates for States' rights in general, and
935 they have been talking endlessly at the Health Subcommittee
936 meetings about the need for flexibility with States, given
937 the budget crisis, so how in the world does it make any sense
938 to take away the grants that would allow the States to set up
939 their own exchanges and have some ability to run them and
940 decide how to tailor them for what is best in the States'
941 needs? This makes no sense. I understand they want to
942 repeal the exchanges outright but the defunding bill makes
943 even less sense because in fact what it means is that the
944 Federal Government is essentially going to take over and run
945 these State exchanges.

946 Now, what I am doing in my amendment, Mr. Chairman, is
947 to prevent the repeal of these funds in States where the
948 governor certifies that the governor does not want the
949 Federal Government running their exchange marketplace and the

950 government wants to establish a State exchange. So what we
951 are basically saying here is we know there are a number of
952 States, the majority, by far, that want to run their own
953 exchanges, would like to have the funding available so they
954 don't have the Federal Government running the State exchanges
955 and if the governor certifies that that is what he wants to
956 do, which I think most governors probably will, then there
957 would not be repeal of these funds under my amendment.

958 I think it makes perfect sense. I certainly would not
959 want to be a Member of Congress from a State that is looking
960 for this money so they have some control over what goes on
961 with these exchanges and have the Federal Government take
962 that money away.

963 The other thing that I would point out, and I don't need
964 to, I guess, is why the State exchange State exchanges are so
965 important. I mean, obviously the State exchanges are the
966 fundamental linchpin, if you will, of the whole health care
967 reform. They are the way that people become part of a large
968 insurance pool, don't have to go on the individual markets,
969 small groups as well can buy it so that essentially you are
970 treated like you would if you were negotiating with a large
971 corporation. You have numerous choices. These are all
972 private plans. They have a very good benefit package,
973 generally speaking, as good as you would get for Blue Cross

974 or Blue Shield, and of course the idea is to provide
975 universal coverage and provide also tax support so that your
976 premium, depending upon your income, is significantly less
977 than it would be now if you had to go out on the open market.

978 But again, I would stress, Mr. Chairman, that this
979 amendment doesn't even get rid of the State exchanges.
980 Essentially what it does it make them federal exchanges, and
981 I don't understand how any of my colleagues on the Republican
982 side could support that. I yield back.

983 Mr. {Pitts.} [Presiding] The chair thanks the
984 gentleman. Is there further discussion of the amendment?
985 The chair recognizes the gentleman, Mr. Stearns, for 5
986 minutes.

987 Mr. {Stearns.} Thank you, Mr. Chairman. I rise in
988 opposition to the amendment.

989 Congressional research has confirmed that it is an
990 unlimited grant. There is no ceiling. An unlimited amount
991 of American taxpayers' money can be used to fund. Now, on
992 this side of the aisle, you know, at one time the bill was
993 Pelosicare because it was basically the Pelosi bill. Then it
994 became the Senate bill and then the leading drive was
995 President Obama, so we call it Obamacare.

996 Now, the gentleman from North Carolina complains about
997 us using this terminology but within the bill's title they

998 said the Affordability Act. I think most of us on this side
999 don't think Affordability Act is an accurate description of
1000 what this bill is, and this is a good example of this
1001 amendment from New Jersey where it allows unlimited amount of
1002 grants to be provided to States to establish exchanges. And
1003 when you think about it, each State should be allowed certain
1004 amount of innovation but if they don't comply with the
1005 Federal Government specifically and distinctly, then they
1006 don't get the funds. So in a larger sense, we are not
1007 allowing innovation of the States, the best ideas of the
1008 citizens depending upon whether you in Vermont, whether you
1009 are in Florida, whether you are in California or whether you
1010 are in Iowa. The Secretary can simply withhold the funds and
1011 that means the State can't get it unless they comply, so in a
1012 larger sense, the amendment is wrong in terms of allowing
1013 elegance and innovation in this health care system and in a
1014 larger system it is creating further problems with our
1015 deficit.

1016 As we talk about this, it is \$1.6 trillion deficit. It
1017 is an all-time large amount. This is the third straight year
1018 of trillion-dollar deficits, an all-time record in nominal
1019 terms, since World War II and so when people complain about
1020 Republicans objecting to amendments that are like this, it is
1021 clear that we just can't afford it. If the gentleman from

1022 New Jersey would amendment his amendment to try and put a
1023 ceiling on it, I think that would perhaps allow some of us to
1024 consider--

1025 Mr. {Pallone.} Will the gentleman yield?

1026 Mr. {Stearns.} No, I won't yield.

1027 Mr. {Pallone.} You just asked me if I--

1028 Mr. {Stearns.} Well, I will yield to you when I have a
1029 little less time, but I think at this point if CRS says it is
1030 unlimited and we think it is going to be a dictate to the
1031 States, then we can't agree on it, and I would say to the
1032 gentleman from North Carolina that to call this amendment
1033 part of improving the Affordability Act, which he likes to
1034 use, is just wrong because in a larger sense it is creating
1035 even more spending, and the fact that the gentleman from New
1036 Jersey has to come here and offer this amendment to increase
1037 spending is really perplexing to all of us on this side.

1038 And with that, I will yield to him.

1039 Mr. {Pallone.} Well, first of all, I want to point out
1040 that the grants available under the Affordable Care Act to
1041 States are not open-ended. They are not available beyond
1042 2015. Starting January 1, 2015, State exchanges will have to
1043 be self-sufficient.

1044 Mr. {Stearns.} Let me take back my time. The fact that
1045 you have a date when they are not allowed doesn't mean that

1046 this money can't be given out freely during that period. In
1047 fact, we have two recent examinations in the Oversight
1048 Investigation Committee that I chair that the Health and
1049 Human Services is handing out money to corporations that are
1050 very profitable and they are giving this money to help them
1051 transition for the employees that are early retirement, and
1052 large corporations--

1053 Mr. {Pallone.} Will the gentleman yield?

1054 Mr. {Stearns.} --across this country are getting a huge
1055 amount of money from Health and Human Services, and this is
1056 going on and many are perplexed why profitable corporations
1057 would get so much money including the UAW that get \$260
1058 million.

1059 Mr. {Pallone.} Would the gentleman yield again?

1060 Mr. {Stearns.} No, I won't yield.

1061 And so the argument is that your amendment clearly is a
1062 case where it is unlimited and you say it will stop at a
1063 certain date, but if you give out money and you have got a
1064 period that you give it out, then all the States are going to
1065 want this money because they are in the same shape in a
1066 larger sense like the United States. They have deficits too
1067 but they have to balance their budgets so they are more
1068 amenable to getting grants, so I think what is going to
1069 happen, Mr. Chairman, is, these grants are all going to be

1070 given out before the exclusion date that he has specified and
1071 so I strongly urge my members to oppose this amendment, and I
1072 yield back.

1073 Mr. {Pallone.} You have 30 seconds. Could I just take
1074 that up a minute? Would you yield me the last 30 seconds?

1075 My only point is that--

1076 Mr. {Pitts.} Does the gentleman yield?

1077 Mr. {Stearns.} I will yield. I will yield to the
1078 gentleman from New Jersey.

1079 Mr. {Pallone.} The States have to set up these
1080 exchanges anyway, and if you deprive them of the money to do
1081 so, then the Federal Government is going to run the exchanges
1082 and spend money running the exchanges. So you don't
1083 accomplish anything by taking away the--

1084 Mr. {Stearns.} I take back my time. I am just looking
1085 at the bill itself, that basically the Federal Government is
1086 setting up the grants based upon what the States must do so
1087 there is no innovation allowed for the States, and I yield
1088 back.

1089 Mr. {Pitts.} The gentleman's time is expired. Is there
1090 further discussion of the amendment? For what purpose does
1091 the gentl lady seek recognition?

1092 Ms. {Baldwin.} To strike the last word.

1093 Mr. {Pitts.} The gentl lady is recognized for 5

1094 minutes.

1095 Ms. {Baldwin.} Thank you, Mr. Chairman.

1096 Once again, instead of focusing on creating jobs and
1097 bolstering our economy, we are considering a series of bills
1098 today that lead to job loss and will hinder our economic
1099 recovery. Today we are considering a Republican proposal
1100 that would repeal funding to States to establish health
1101 insurance exchanges. Health insurance exchanges will serve
1102 as an open marketplace where consumers can comparison shop
1103 among various private health insurance plans. For the first
1104 time, individuals can select the insurance option that best
1105 suits their health care needs. These exchanges are critical
1106 for ensuring that thousands of small businesses and 24
1107 million Americans have access to new coverage options.

1108 The grants to States provide States with the flexibility
1109 to create an exchange that best meets their own State's
1110 unique needs. Wisconsin has already received a \$38 million
1111 grant. It is an early innovator grant. And this critical
1112 funding will spur job creation and improve access to quality,
1113 low-cost health care coverage.

1114 The Republican bill raises an important question: are
1115 we going to ask cash-strapped States to return money they
1116 have already been awarded? Will Wisconsin have to return the
1117 \$38 million that Governor Walker recently accepted? And I

1118 fail to see how rescinding money that will create jobs is the
1119 right thing to do to get our economy back on track.

1120 Furthermore, I would like to remind my colleagues that
1121 the idea of using an exchange to allow consumers to select a
1122 health care plan that best suits their own needs is not a new
1123 idea. In fact, it is not even an idea that has been proposed
1124 just by Democrats. The Medicare Part D prescription drug
1125 program, which was established through the Medicare
1126 Modernization Act under Republican leadership, operates under
1127 an exchange model. Medicare participants have access to the
1128 Medicare drug benefit through private plans approved by the
1129 Federal Government. These Part D plans are required to
1130 provide a standard benefit or one that is actuarially
1131 equivalent. In 2011, there are 47 million Medicare
1132 beneficiaries who will have a choice of 1,109 prescription
1133 drug plans across 34 prescription drug regions nationwide.
1134 Now, while we may not use the word ``exchange,'' this
1135 Republican program sounds remarkably similar to the plan to
1136 establish State exchanges for health insurance.

1137 I would also like to remind my colleagues of another
1138 similarity. Given that many States already had different
1139 programs to assist seniors with prescription drug costs, the
1140 Medicare Modernization Act included a transitional grant
1141 program that provided States with federal funding to ensure a

1142 smooth transition. These grants were awarded to States to
1143 cover the costs associated with setting up the new exchanges
1144 including educating eligible individuals, providing technical
1145 assistance and counseling to enrollees and promoting
1146 effective coordination of enrollment, coverage and payment
1147 between State programs and Part D plans.

1148 I would like to point out to my colleagues on the other
1149 side of the aisle that despite much Democratic opposition to
1150 the Medicare Modernization Act, a law that was not paid for
1151 and has contributed to our current financial crisis,
1152 Democrats nonetheless did not spend our time trying to repeal
1153 this law. We did not spend our time debating ill-conceived
1154 proposals to gut implementation or eliminating funding like
1155 the transitional grant program. Instead, we focused our
1156 efforts on issues facing the American people: providing
1157 affordable health care coverage and creating jobs.

1158 I urge my colleagues to do the same. Let us work
1159 together to provide real solutions for the American people
1160 rather than waste our time on measures that will take away
1161 health care and jobs from the people who need it most. I
1162 support the gentleman's amendment and oppose the underlying
1163 bill and yield back the balance of my time.

1164 Mr. {Pallone.} Will the gentlewoman yield?

1165 Ms. {Baldwin.} Oh, yes.

1166 Mr. {Pallone.} I appreciate your comments, and I just
1167 wanted to say, I am so tired of having the Republicans--you
1168 had Haley Barbour come here talk about flexibility,
1169 flexibility, flexibility. The State-based health insurance
1170 exchanges give States all kinds of flexibility to establish
1171 exchanges that meet the unique needs of their residents.
1172 States can determine which insurers are permitted to offer
1173 products. Consumer-driven health plans and things like
1174 health savings accounts that the Republicans have been
1175 championing will be available. The flexibility is there.
1176 Just let them use the money and they will create the
1177 flexibility. I thank the gentlewoman.

1178 Mr. {Pitts.} Is there further discussion of the
1179 amendment?

1180 Mr. {Bilbray.} Mr. Chairman.

1181 Mr. {Pitts.} The gentleman from California.

1182 Mr. {Bilbray.} Mr. Chairman, just quickly, I am not
1183 going use up all my time.

1184 I am going to say, you talk about the flexibility. You
1185 already have one State with Bernie Sanders actually asking
1186 the fact that the Obamacare package did not give their State
1187 the flexibility to become a single-payer State until they
1188 couldn't even be considered until 2017. They are asking for
1189 2014. So let us not talk about the flexibility here. Even

1190 in the base bill that was passed year, it doesn't give the
1191 States the flexibility you keep talking about, and now you
1192 have the left complaining that they don't get to take it far
1193 enough because of the restrictions of that bill, and I yield
1194 back.

1195 Mr. {Pallone.} Will the gentleman yield?

1196 Mr. {Pitts.} The gentleman yields back. Is there
1197 further discussion of the amendment? If there is no further
1198 discussion, the vote occurs on the amendment. All those in
1199 favor shall signify by saying aye. All those opposed, no.
1200 The no's have it. The amendment is not agreed to.

1201 Mr. {Pallone.} I request a roll call vote.

1202 Mr. {Pitts.} The ranking member requests a roll call
1203 vote. The clerk will call the roll.

1204 The {Clerk.} Mr. Barton?

1205 Mr. {Barton.} No.

1206 The {Clerk.} Mr. Barton, no.

1207 Mr. Stearns?

1208 Mr. {Stearns.} No.

1209 The {Clerk.} Mr. Stearns, no.

1210 Mr. Whitfield?

1211 [No response.]

1212 The {Clerk.} Mr. Shimkus?

1213 [No response.]

1214 The {Clerk.} Mr. Pitts?
1215 Mr. {Pitts.} No.
1216 The {Clerk.} Mr. Pitts, no.
1217 Mrs. Bono Mack?
1218 Mrs. {Bono Mack.} No.
1219 The {Clerk.} Mrs. Bono Mack, no.
1220 Mr. Walden?
1221 [No response.]
1222 The {Clerk.} Mr. Terry?
1223 Mr. {Terry.} No.
1224 The {Clerk.} Mr. Terry, no.
1225 Mr. Rogers?
1226 Mr. {Rogers.} No.
1227 The {Clerk.} Mr. Rogers, no.
1228 Mrs. Myrick?
1229 Mrs. {Myrick.} No.
1230 The {Clerk.} Mrs. Myrick, no.
1231 Mr. Sullivan?
1232 Mr. {Sullivan.} No.
1233 The {Clerk.} Mr. Sullivan, no.
1234 Mr. Murphy?
1235 Mr. {Murphy.} No.
1236 The {Clerk.} Mr. Murphy, no.
1237 Mr. Burgess?

- 1238 Dr. {Burgess.} No.
- 1239 The {Clerk.} Mr. Burgess, no.
- 1240 Mrs. Blackburn?
- 1241 [No response.]
- 1242 The {Clerk.} Mr. Bilbray?
- 1243 Mr. {Bilbray.} Bilbray, no.
- 1244 The {Clerk.} Mr. Bilbray, no.
- 1245 Mr. Bass?
- 1246 Mr. {Bass.} No.
- 1247 The {Clerk.} Mr. Bass, no.
- 1248 Mr. Gingrey?
- 1249 Dr. {Gingrey.} No.
- 1250 The {Clerk.} Mr. Gingrey, no.
- 1251 Mr. Scalise?
- 1252 Mr. {Scalise.} No.
- 1253 The {Clerk.} Mr. Scalise, no.
- 1254 Mr. Latta?
- 1255 Mr. {Latta.} No.
- 1256 The {Clerk.} Mr. Latta, no.
- 1257 Mrs. McMorris Rodgers?
- 1258 Mrs. {McMorris Rodgers.} No.
- 1259 The {Clerk.} Mrs. McMorris Rodgers, no.
- 1260 Mr. Harper?
- 1261 Mr. {Harper.} No.

1262 The {Clerk.} Mr. Harper, no.
1263 Mr. Lance?
1264 Mr. {Lance.} No.
1265 The {Clerk.} Mr. Lance, no.
1266 Mr. Cassidy?
1267 Dr. {Cassidy.} No.
1268 The {Clerk.} Mr. Cassidy, no.
1269 Mr. Guthrie?
1270 Mr. {Guthrie.} No.
1271 The {Clerk.} Mr. Guthrie, no.
1272 Mr. Olson?
1273 Mr. {Olson.} No.
1274 The {Clerk.} Mr. Olson, no.
1275 Mr. McKinley?
1276 Mr. {McKinley.} No.
1277 The {Clerk.} Mr. McKinley, no.
1278 Mr. Gardner?
1279 Mr. {Gardner.} No.
1280 The {Clerk.} Mr. Gardner, no.
1281 Mr. Pompeo?
1282 Mr. {Pompeo.} No.
1283 The {Clerk.} Mr. Pompeo, no.
1284 Mr. Kinzinger?
1285 Mr. {Kinzinger.} No.

1286 The {Clerk.} Mr. Kinzinger, no.
1287 Mr. Griffith?
1288 Mr. {Griffith.} No.
1289 The {Clerk.} Mr. Griffith, no.
1290 Mr. Waxman?
1291 Mr. {Waxman.} Aye.
1292 The {Clerk.} Mr. Waxman, aye.
1293 Mr. Dingell?
1294 Mr. {Dingell.} Aye.
1295 The {Clerk.} Mr. Dingell, aye.
1296 Mr. Markey?
1297 Mr. {Markey.} Aye.
1298 The {Clerk.} Mr. Markey, aye.
1299 Mr. Towns?
1300 [No response.]
1301 The {Clerk.} Mr. Pallone?
1302 Mr. {Pallone.} Aye.
1303 The {Clerk.} Mr. Pallone, aye.
1304 Mr. Rush?
1305 [No response.]
1306 The {Clerk.} Ms. Eshoo?
1307 Ms. {Eshoo.} Aye.
1308 The {Clerk.} Ms. Eshoo, aye.
1309 Mr. Engel?

1310 [No response.]

1311 The {Clerk.} Mr. Green?

1312 Mr. {Green.} Aye.

1313 The {Clerk.} Mr. Green, aye.

1314 Ms. DeGette?

1315 [No response.]

1316 The {Clerk.} Mrs. Capps?

1317 Mrs. {Capps.} Aye.

1318 The {Clerk.} Mrs. Capps, aye.

1319 Mr. Doyle?

1320 Mr. {Doyle.} Yes.

1321 The {Clerk.} Mr. Doyle, aye.

1322 Ms. Schakowsky?

1323 [No response.]

1324 The {Clerk.} Mr. Gonzalez?

1325 [No response.]

1326 The {Clerk.} Mr. Inslee?

1327 [No response.]

1328 The {Clerk.} Ms. Baldwin?

1329 Ms. {Baldwin.} Aye.

1330 The {Clerk.} Ms. Baldwin, aye.

1331 Mr. Ross?

1332 [No response.]

1333 The {Clerk.} Mr. Weiner?

- 1334 Mr. {Weiner.} Aye.
- 1335 The {Clerk.} Mr. Weiner, aye.
- 1336 Mr. Matheson?
- 1337 Mr. {Matheson.} Aye.
- 1338 The {Clerk.} Mr. Matheson, aye.
- 1339 Mr. Butterfield?
- 1340 Mr. {Butterfield.} Aye.
- 1341 The {Clerk.} Mr. Butterfield, aye.
- 1342 Mr. Barrow?
- 1343 Mr. {Barrow.} Votes aye.
- 1344 The {Clerk.} Mr. Barrow, aye.
- 1345 Ms. Matsui?
- 1346 Ms. {Matsui.} Aye.
- 1347 The {Clerk.} Ms. Matsui, aye.
- 1348 Ms. Christensen?
- 1349 Dr. {Christensen.} Aye.
- 1350 The {Clerk.} Ms. Christensen, aye.
- 1351 Mr. Upton?
- 1352 The {Chairman.} Votes no.
- 1353 The {Clerk.} Mr. Upton, nay.
- 1354 Mr. {Pitts.} Are there other members wishing to be
1355 recorded?
- 1356 Mr. {Whitfield.} Votes no.
- 1357 The {Clerk.} Mr. Whitfield, no.

1358 Mr. {Walden.} No.

1359 The {Clerk.} Mr. Walden, no.

1360 Mrs. {Blackburn.} No.

1361 Mrs. Blackburn, no.

1362 Mr. {Pitts.} Mr. Shimkus?

1363 The {Clerk.} Mr. Shimkus?

1364 Mr. {Shimkus.} No.

1365 The {Clerk.} Mr. Shimkus, no.

1366 Ms. DeGette?

1367 Ms. {DeGette.} Aye.

1368 The {Clerk.} Ms. DeGette, aye.

1369 Mr. {Pitts.} The clerk will report the result.

1370 The {Clerk.} Mr. Chairman, on that--

1371 Mr. {Inslee.} Mr. Chair, could a people other people be

1372 recognized, I hope, on the vote.

1373 Mr. {Pitts.} Mr. Inslee?

1374 Mr. {Inslee.} Mr. Inslee votes aye.

1375 The {Clerk.} Mr. Inslee, aye.

1376 Mr. {Pitts.} Anyone else? If not, the clerk will

1377 report the result.

1378 The {Clerk.} Mr. Chairman, on that there were 31 ayes,

1379 17 nays--17 ayes, 31 nays.

1380 Mr. {Pitts.} Mr. Ross?

1381 Mr. {Ross.} I would like to ask unanimous consent to be

1382 included in the roll call.

1383 Mr. {Pitts.} Without objection, so ordered.

1384 Mr. {Ross.} Ross votes aye.

1385 The {Clerk.} Mr. Ross, aye.

1386 Mr. {Pitts.} Okay. The clerk will report.

1387 The {Clerk.} Mr. Chairman, on that vote, there were 18

1388 ayes, 31 nays.

1389 The {Chairman.} The amendment is not agreed to.

1390 Are there further amendments?

1391 Mr. {Markey.} Mr. Chairman.

1392 Mr. {Pitts.} The gentleman, Mr. Markey, is recognized.

1393 Mr. {Markey.} Thank you, Mr. Chairman. I have an

1394 amendment at the desk.

1395 Mr. {Pitts.} The clerk will report.

1396 The {Clerk.} What number, Mr. Markey?

1397 Mr. {Markey.} Number 22.

1398 The {Clerk.} An amendment by Mr. Markey.

1399 [The amendment follows:]

1400 ***** INSERT 4 *****

|
1401 Mr. {Pitts.} Without objection, the reading is
1402 dispensed with. The chair recognizes the gentleman for 5
1403 minutes in support of his amendment.

1404 Mr. {Markey.} Thank you, Mr. Chairman, very much.

1405 My amendment is quite simple. It protects people from
1406 facing sky-high insurance premiums because they have battled
1407 cancer or are fighting diabetes or have any other preexisting
1408 condition.

1409 A key protection in the health care law passed a year
1410 ago is that insurance companies can no longer turn away
1411 someone or charge them a higher premium based on preexisting
1412 conditions. States will review the health plans that
1413 insurance companies will be offering in the exchanges to
1414 ensure that the plans follow the rules outlined in the law
1415 including the rule that they can't charge higher premiums
1416 because someone has been sick. But this Republican bill
1417 would deny States the funding they need to do just that. It
1418 repeals the funding for States to perform these quality
1419 control checks on health insurance plans that will be newly
1420 available in the exchange pool, and given the current budget
1421 crises amongst the States, taking away this important source
1422 of funding would handicap their ability to perform these
1423 checks, leaving consumers at risk and unable to obtain

1424 adequate insurance coverage.

1425 So I propose an amendment that would protect this
1426 funding for States if they are using it to certify that
1427 health plans meet the standards outlined in the health law
1428 and do not charge higher premiums based on preexisting
1429 conditions. This is an important protection to ensure that
1430 consumers aren't getting gouged by the insurance companies.
1431 I encourage my colleagues to support this amendment. It goes
1432 right to the heart of one thing that I think every American
1433 is concerned about, and that is that their families will be
1434 penalized because a family member has a preexisting
1435 condition.

1436 So with that, I yield to the gentleman from New Jersey,
1437 Mr. Pallone.

1438 Mr. {Pallone.} Thank you, Mr. Chairman, and just
1439 briefly, I just wanted to add my support for this amendment.
1440 My own State of New Jersey has been awarded a \$1 million to
1441 research the number, demographics and health characteristics
1442 of New Jersey residents would be eligible and likely to
1443 enroll in the exchange products, and they are conducting
1444 forums and online surveys to obtain input into the design of
1445 the exchange. So this is one of the things, as Mr. Markey
1446 explained, that is very important that is going on now, and
1447 that is to find out what the situation is and to what extent

1448 you have people who have preexisting conditions and how that
1449 is going to be addressed as you set up the exchange.

1450 Again, this is part of the State flexibility which the
1451 Republicans have been championing and talking about for so
1452 long. We had it at our Health Subcommittee hearing. We had
1453 some Republican governors come in. They talk about the need
1454 for flexibility. Why in the world would you want to
1455 eliminate that when these State exchanges are going to be
1456 part of the health insurance reform and the States are going
1457 to be required to set them up or have the Federal Government
1458 take them over.

1459 I yield back to the gentleman.

1460 Mr. {Markey.} I thank the gentleman, and I yield back
1461 the balance of my time.

1462 Mr. {Pitts.} The chair thanks the gentleman. Is there
1463 further discussion of the amendment? The chair recognizes
1464 the gentleman from Georgia for 5 minutes.

1465 Dr. {Gingrey.} Mr. Chairman, thank you.

1466 You know, my Democratic colleagues are arguing for this
1467 unlimited tap into the Federal Treasury by the Secretary of
1468 Health and Human Services. Giving any Executive Branch
1469 official a blank check, in my opinion, is a bad idea. It
1470 doesn't matter whether it is a Democratic Administration or a
1471 Republican Administration. The only thing worse than writing

1472 a blank check to federal political appointees and Washington
1473 bureaucrats is to cover up these slush funds under false
1474 claims that we are helping Americans by doing so. Growing
1475 the federal deficit will not help Americans, and I said in my
1476 opening remarks, \$49,000 worth of debt for every man, woman
1477 and child is what we need to be focusing on.

1478 We all believe that American should have the ability to
1479 access affordable health care coverage. However, I almost
1480 said Obamacare, but in deference to Mr. Butterfield, the
1481 Patient Protection and Affordable Care Act has been analyzed
1482 repeatedly by unbiased sources and the evidence is clear.
1483 The cost will rise, premiums will rise, access to care will
1484 decrease and jobs will be lost.

1485 A vote against eliminating the slush funds created in
1486 Obamacare is a vote to exacerbate the problem that the same
1487 bill already created the future of our health care system and
1488 the sustainability of our Nation. This committee has a
1489 responsibility to ensure that health care programs are
1490 authorized and reviewed for efficiency, integrity and
1491 effectiveness, and not just health care programs but, Mr.
1492 Chairman, every program that we have jurisdiction over and we
1493 have broad jurisdiction obviously in this great committee,
1494 Energy and Commerce, and for us to give up that
1495 responsibility, why do we even show up? A blank check to the

1496 Secretary of HHS rejects the possibility of that oversight,
1497 and for that reason, I urge my colleagues, please, to oppose
1498 the amendment.

1499 Mr. {Pallone.} Will the gentleman yield?

1500 Dr. {Gingrey.} I will yield to Mr. Pallone.

1501 Mr. {Pallone.} You know, when the Medicare Prescription
1502 Drug Improvement and Modernization Act was adopted, it
1503 included specific mandatory appropriations including an
1504 unlimited mandatory appropriation for a drug assistance
1505 program. This is very similar. In other words, until the
1506 regular Part D was set up, there was unlimited appropriations
1507 which the Secretary had control of to fund a transitional
1508 drug assistance program.

1509 Dr. {Gingrey.} Well, let me reclaim my time, Mr.
1510 Pallone. It is my time, and I would say to you, and this is
1511 oversimplification that two wrongs don't make a right. Go
1512 back to November of 2003. I voted for Medicare
1513 Modernization, the Prescription Drug Act, Medicare Part D. I
1514 think that the seniors in this country are very happy with
1515 Medicare Part D, but we didn't pay for it. We should have
1516 paid for it. It added to the debt, it added to the deficit.
1517 In retrospect, we should have paid for it. But don't go back
1518 and say because we did this, that or the other thing that we
1519 should do something wrong again today. As I point out, two

1520 wrongs do not make a right, and I think this is wrong, and I
1521 yield back the balance of my time.

1522 The {Chairman.} The gentleman yields back his time.

1523 Are there other members wishing to speak on the Markey
1524 amendment? If not, we are prepared for the vote. I will ask
1525 the clerk to call the roll. All those in favor of the Markey
1526 amendment will respond aye. Those opposed, say no. The
1527 clerk will call the roll.

1528 The {Clerk.} Mr. Barton?

1529 Mr. {Barton.} No.

1530 The {Clerk.} Mr. Barton, no.

1531 Mr. Stearns?

1532 [No response.]

1533 The {Clerk.} Mr. Whitfield?

1534 [No response.]

1535 The {Clerk.} Mr. Shimkus?

1536 Mr. {Shimkus.} No.

1537 The {Clerk.} Mr. Shimkus, no.

1538 Mr. Pitts?

1539 Mr. {Pitts.} No.

1540 The {Clerk.} Mr. Pitts, no.

1541 Mrs. Bono Mack?

1542 Mrs. {Bono Mack.} No.

1543 The {Clerk.} Mrs. Bono Mack, no.

1544 Mr. Walden?
1545 [No response.]
1546 The {Clerk.} Mr. Terry?
1547 Mr. {Terry.} No.
1548 The {Clerk.} Mr. Terry, no.
1549 Mr. Rogers?
1550 Mr. {Rogers.} No.
1551 The {Clerk.} Mr. Rogers, no.
1552 Mrs. Myrick?
1553 Mrs. {Myrick.} No.
1554 The {Clerk.} Mrs. Myrick, no.
1555 Mr. Sullivan?
1556 [No response.]
1557 The {Clerk.} Mr. Murphy?
1558 Mr. {Murphy.} No.
1559 The {Clerk.} Mr. Murphy, no.
1560 Mr. Burgess?
1561 Dr. {Burgess.} No.
1562 The {Clerk.} Mr. Burgess, no.
1563 Mrs. Blackburn?
1564 Mrs. {Blackburn.} No.
1565 The {Clerk.} Mrs. Blackburn, no.
1566 Mr. Bilbray?
1567 Mr. {Bilbray.} No.

- 1568 The {Clerk.} Mr. Bilbray, no.
1569 Mr. Bass?
1570 Mr. {Bass.} No.
1571 The {Clerk.} Mr. Bass, no.
1572 Mr. Gingrey?
1573 Dr. {Gingrey.} No.
1574 The {Clerk.} Mr. Gingrey, no.
1575 Mr. Scalise?
1576 Mr. {Scalise.} No.
1577 The {Clerk.} Mr. Scalise, no.
1578 Mr. Latta?
1579 Mr. {Latta.} No.
1580 The {Clerk.} Mr. Latta, no.
1581 Mrs. McMorris Rodgers?
1582 Mrs. {McMorris Rodgers.} No.
1583 The {Clerk.} Mrs. McMorris Rodgers, no.
1584 Mr. Harper?
1585 Mr. {Harper.} No.
1586 The {Clerk.} Mr. Harper, no.
1587 Mr. Lance?
1588 Mr. {Lance.} No.
1589 The {Clerk.} Mr. Lance, no.
1590 Mr. Cassidy?
1591 Dr. {Cassidy.} No.

- 1592 The {Clerk.} Mr. Cassidy, no.
1593 Mr. Guthrie?
1594 Mr. {Guthrie.} No.
1595 The {Clerk.} Mr. Guthrie, no.
1596 Mr. Olson?
1597 Mr. {Olson.} No.
1598 The {Clerk.} Mr. Olson, no.
1599 Mr. McKinley?
1600 Mr. {McKinley.} No.
1601 The {Clerk.} Mr. McKinley, no.
1602 Mr. Gardner?
1603 Mr. {Gardner.} No.
1604 The {Clerk.} Mr. Gardner, no.
1605 Mr. Pompeo?
1606 Mr. {Pompeo.} No.
1607 The {Clerk.} Mr. Pompeo, no.
1608 Mr. Kinzinger?
1609 Mr. {Kinzinger.} No.
1610 The {Clerk.} Mr. Kinzinger, no.
1611 Mr. Griffith?
1612 Mr. {Griffith.} No.
1613 The {Clerk.} Mr. Griffith, no.
1614 Mr. Waxman?
1615 [No response.]

1616 The {Clerk.} Mr. Dingell?
1617 Mr. {Dingell.} Votes aye.
1618 The {Clerk.} Mr. Dingell, aye.
1619 Mr. Markey?
1620 Mr. {Markey.} Aye.
1621 The {Clerk.} Mr. Markey, aye.
1622 Mr. Towns?
1623 Mr. {Towns.} Aye.
1624 The {Clerk.} Mr. Towns, aye.
1625 Mr. Pallone?
1626 Mr. {Pallone.} Aye.
1627 The {Clerk.} Mr. Pallone, aye.
1628 Mr. Rush?
1629 [No response.]
1630 The {Clerk.} Ms. Eshoo?
1631 Ms. {Eshoo.} Aye.
1632 The {Clerk.} Ms. Eshoo, aye.
1633 Mr. Engel?
1634 [No response.]
1635 The {Clerk.} Mr. Green?
1636 [No response.]
1637 The {Clerk.} Ms. DeGette?
1638 Ms. {DeGette.} Aye.
1639 The {Clerk.} Ms. DeGette, aye.

1640 Mrs. Capps?
1641 Mrs. {Capps.} Aye.
1642 The {Clerk.} Mrs. Capps, aye.
1643 Mr. Doyle?
1644 Mr. {Doyle.} Yes.
1645 The {Clerk.} Mr. Doyle, aye.
1646 Ms. Schakowsky?
1647 [No response.]
1648 The {Clerk.} Mr. Gonzalez?
1649 [No response.]
1650 The {Clerk.} Mr. Inslee?
1651 Mr. {Inslee.} Aye.
1652 The {Clerk.} Mr. Inslee, aye.
1653 Ms. Baldwin?
1654 Ms. {Baldwin.} Aye.
1655 The {Clerk.} Ms. Baldwin, aye.
1656 Mr. Ross?
1657 Mr. {Ross.} Aye.
1658 The {Clerk.} Mr. Ross, aye.
1659 Mr. Weiner?
1660 Mr. {Weiner.} Aye.
1661 The {Clerk.} Mr. Weiner, aye.
1662 Mr. Matheson?
1663 Mr. {Matheson.} Aye.

1664 The {Clerk.} Mr. Matheson, aye
1665 Mr. Butterfield?
1666 Mr. {Butterfield.} Aye.
1667 The {Clerk.} Mr. Butterfield, aye.
1668 Mr. Barrow?
1669 Mr. {Barrow.} Aye.
1670 The {Clerk.} Mr. Barrow, aye.
1671 Ms. Matsui?
1672 Ms. {Matsui.} Aye.
1673 The {Clerk.} Ms. Matsui, aye.
1674 Ms. Christensen?
1675 Dr. {Christensen.} Aye.
1676 The {Clerk.} Ms. Christensen, aye.
1677 Mr. Upton?
1678 The {Chairman.} Votes no.
1679 The {Clerk.} Mr. Upton, nay.
1680 The {Chairman.} Are there other members wishing to
1681 vote? Mr. Stearns?
1682 Mr. {Stearns.} Votes no.
1683 The {Clerk.} Mr. Stearns, no.
1684 The {Chairman.} Mr. Whitfield?
1685 Mr. {Whitfield.} No.
1686 The {Clerk.} Mr. Whitfield, no.
1687 The {Chairman.} Mr. Walden?

1688 Mr. {Walden.} No.

1689 The {Clerk.} Mr. Walden, no.

1690 The {Chairman.} Are there other members wishing to cast
1691 a vote who didn't get recorded?

1692 The {Clerk.} Mr. Chairman, I am not sure how Mr.
1693 Sullivan is recorded.

1694 The {Chairman.} Mr. Sullivan?

1695 Mr. {Sullivan.} No.

1696 The {Clerk.} Mr. Sullivan, no.

1697 The {Chairman.} Are there other members? If not, the
1698 clerk will report the tally.

1699 The {Clerk.} Mr. Chairman, on that, there were 17 ayes,
1700 31 nays.

1701 The {Chairman.} Seventeen ayes, 31 nays. The amendment
1702 is not agreed to.

1703 Are there other amendments to the bill? The chair would
1704 recognize the gentlelady from Wisconsin.

1705 Ms. {Baldwin.} Thank you, Mr. Chairman. I have an
1706 amendment at the desk, 27.

1707 [The amendment follows:]

1708 ***** INSERT 5 *****

|
1709 The {Chairman.} The amendment will be considered as
1710 read and the gentlelady is recognized for 5 minutes in
1711 support of her amendment.

1712 Ms. {Baldwin.} Thank you, Mr. Chairman. You are well
1713 aware that I would like our committee to be focused on job
1714 creation and bolstering our struggling economy when instead
1715 we are considering bills today that lead to job loss and in
1716 effect hinder our economic recovery.

1717 Today we are considering a Republican proposal that
1718 would repeal funding for grants to States to establish health
1719 insurance exchanges, funding that will create jobs and
1720 provide families and small businesses with access to
1721 affordable, quality health care options. Health insurance
1722 exchanges are critical for ensuring that thousands of small
1723 businesses and 24 million Americans have access to new health
1724 insurance coverage options. These exchanges will serve as an
1725 open marketplace where consumers can comparison shop amongst
1726 various private health insurance plans. For the first time,
1727 individuals will be able to compare health insurance plans
1728 including information about benefits, prices, quality and
1729 physician and hospital networks, and they will be able to
1730 select an option that best suits their individual and
1731 family's health care needs. Furthermore, exchanges will

1732 increase competition among private insurance plans,
1733 ultimately lowering health insurance costs for families and
1734 small businesses.

1735 The grants to States, which this bill seeks to repeal
1736 and rescind, provide States with the flexibility to create an
1737 exchange that best meets their State's needs. Forty-eight
1738 States, including Wisconsin, have already received up to \$1
1739 million each to get the exchanges up and running including
1740 hiring key staff for implementation, in other words, this
1741 funding is creating jobs as we speak.

1742 Additionally, seven States, including the State of
1743 Wisconsin, have been awarded early innovator grants, funding
1744 that will allow these States to lead the way in creating
1745 innovative information technology approaches for the exchange
1746 system. The \$38 million grant that Wisconsin has received
1747 will spur job creation and improve access to quality, low-
1748 cost health insurance coverage.

1749 This Republican bill raises an important question: are
1750 we going to ask cash-strapped States to return the money they
1751 have already been awarded? Will Wisconsin have to return its
1752 early innovator grant that Governor Walker has already
1753 accepted? Are we going to prevent these cash-strapped States
1754 from receiving further funding that will result in job
1755 creation? I fail to see how rescinding money that will

1756 create jobs is the right thing to do at this point with our
1757 struggling economy to help get it back on track.

1758 My amendment is simple. It states that this bill cannot
1759 take effect until the national unemployment rate is less than
1760 4 percent, and that is not an unrealistic goal. Our national
1761 unemployment was below 4 percent when President George Bush
1762 got elected in November 2000 after 8 years of fiscal
1763 responsibility under President Clinton.

1764 Mr. Chairman, the American people expect us to be
1765 focusing on initiatives to create jobs and reduce
1766 unemployment, not bills that will lead to further job loss.
1767 I urge my colleagues to stand up for the American people
1768 looking for jobs and do so by supporting this amendment. I
1769 yield back the balance of my time.

1770 The {Chairman.} The gentlelady yields back. Are there
1771 other members wishing to speak for or against the amendment?
1772 The chair would recognize the gentleman from Illinois, Mr.
1773 Shimkus, for 5 minutes.

1774 Mr. {Shimkus.} Thank you, Mr. Chairman, and my
1775 colleagues on the other side are going to be on a slippery
1776 slope on this jobs issue because the reason why we became the
1777 majority is because of Obamacare and the fear that it would
1778 cost jobs. So we are taking the actions that were asked by
1779 the folks who sent us here to start bringing more certainty

1780 to the business community by repealing portions of the health
1781 care law.

1782 Two hundred thousand jobs were created last month. The
1783 unemployment rate is down to 8.8 percent. Democrats and the
1784 Administration have extolled that virtue. The President has
1785 said positive things about this. I would submit that part of
1786 that is because the business community now knows that they do
1787 not have to fear additional rules and regulations being
1788 thrust upon them because there is a Republican majority in
1789 the House and that we will now move to unravel this big
1790 government, high-taxation regime that has been passed upon.

1791 So, you know, we all hope that we get to 4 percent
1792 unemployment. I think economists and most people who observe
1793 this say that if you are at 5 percent unemployment, you are
1794 in essence at full employment. Five percent unemployment in
1795 this country is really full employment as everyone who wants
1796 to find a job can find a job at that rate. So 4 percent is
1797 really unrealistic in the national unemployment standards,
1798 but having said that, when we hear about \$1 million grants to
1799 States, \$420,000 of that is borrowed. Let me say that again.
1800 When a \$1 million grant is given to a State, we borrow
1801 \$420,000. And about \$200,000 of that is borrowed from China
1802 or the U.K. or Japan. So if that \$1 million grant to a
1803 State, \$200,000 is borrowed from foreign countries and that

1804 is what this debate is about: a \$14.5 trillion national debt
1805 that we now have to say no.

1806 Now, in the Obamacare bill, we gave mandatory spending
1807 to the Secretary of Health and Human Services without regards
1808 to regular annual appropriations from the national government
1809 and through the chief appropriators, which is the House of
1810 Representatives. So we have decided, we decided in the last
1811 Congress passed into law that we would not be involved. And
1812 if you remember last fall before the election, we brought
1813 through this committee about seven to eight to nine bills
1814 moved by the Health Subcommittee to say we want to give the
1815 Secretary more direction because we know she has got this
1816 slush fund but we want to make sure that she funds these
1817 areas. The ranking member of the subcommittee knows this
1818 because he presided over that markup where we said yes, she
1819 has got this slush fund. Our position was, why do we have to
1820 move these bills, she has a slush fund to do this.

1821 So again, when we give a State a \$1 million grant, we
1822 borrow \$420,000 to do that. Less than half of that is money
1823 that China, Japan, the U.K. is lending to us. A \$14.5
1824 trillion national debt. We can no longer afford to do this.
1825 We have to make changes.

1826 This amendment moves to take this debate off the table.
1827 I would ask that you reject it, and I yield back the balance

1828 of my time.

1829 The {Chairman.} The gentleman yields back. The chair
1830 would recognize the gentleman from New Jersey for 5 minutes.

1831 Mr. {Pallone.} Thank you, Mr. Chairman.

1832 You know, I listened to my colleague from Illinois, and
1833 I heard the same argument on the Floor the other day when the
1834 unemployment numbers came out and they showed that they had
1835 gone down from 8.9 to 8.8 nationally and there were over
1836 200,000 private sector jobs. Mr. Dreier came to the Floor,
1837 it was during the debate on H.R. 1, and started to say that
1838 it was all because of Republican policies, and I was like,
1839 okay, so you have been in office since January, you have had
1840 three short-term Continuing Resolutions, you can't even agree
1841 on how to deal with the spending bill at all and you are
1842 going to now take credit for decreased unemployment and these
1843 private sector jobs. I mean, it is a fiction.

1844 We did a Recovery Act with major tax breaks for the
1845 middle class and with funding for infrastructure and
1846 education and teachers and police. We did, I don't know, at
1847 least a dozen tax breaks for small businesses including the
1848 HIRE Act to encourage businesses to hire more employees and
1849 not have to pay the payroll tax. And during the lame-duck
1850 session, we did a major bill that provided extended
1851 unemployment, major tax breaks that would continue. For 4

1852 years, or at least for, I will just take credit for the last
1853 two, if you want, with a Democratic President, Democratic
1854 Congress, we inherited this awful recession and for the last
1855 2 years with a Democratic Congress and President, we had I
1856 can't imagine how many initiatives. I could spend the next
1857 day here talking about all the initiative--Recovery Act, tax
1858 breaks, you know, on and on, money back to the States to pay
1859 for teachers and police. And all this is coming to fruition
1860 now and we are starting to see unemployment go down, private
1861 sector jobs come back, manufacturing come back in a major
1862 way, and then I hear Mr. Dreier and now my colleague from
1863 Illinois say oh, yeah, that is because we have been here
1864 since February and all of a sudden everybody thinks
1865 everything is wonderful and we are going to take credit for
1866 it.

1867 Mr. {Waxman.} Will the gentleman yield?

1868 Mr. {Pallone.} Yes, I certainly will.

1869 Mr. {Waxman.} I want to join you in expressing concern
1870 about the argument that has been made. Our colleague, Mr.
1871 Shimkus, said that we are going to have to borrow to pay the
1872 money to the States to set up these exchanges, and let me
1873 point out a fact. We are going to have to borrow and in fact
1874 we are borrowing \$147 billion to extend the Bush tax cuts to
1875 the wealthiest.

1876 So to borrow some money to otherwise spend money, a
1877 relatively small amount to help the States set up a proper
1878 exchange for people to be able to compare insurance policies,
1879 you use market forces to hold the insurance companies
1880 responsible for their claims seems to be a very good
1881 investment in holding down health care costs, and if we are
1882 going to talk about the money we have to borrow for this
1883 small area, let us put it in perspective for the \$147 billion
1884 for the Bush tax cuts just to the wealthiest.

1885 I yield back my time.

1886 Mr. {Pallone.} Look, I am more than willing if Mr.
1887 Shimkus wants to take credit for recovery, I will take
1888 credit. The main thing is that we are in the middle of a
1889 recovery. I would like to see it continue, though, and
1890 expand. I am very fearful that the Republican policies with
1891 the C.R. and the budget and we know all the economists say
1892 that these policies are really going to kill jobs. Most
1893 analysts say anywhere from 500,000 to 700,000 jobs will be
1894 lost with the C.R.

1895 So let us continue with progressive policies that are
1896 actually going to create jobs, not move along with these
1897 Republican policies in the C.R. and the new budget that comes
1898 out today which most analysts say are just going to kill jobs
1899 and really threaten the recovery.

1900 But back to the issue at hand with the 40 seconds I have
1901 left. The main thing here is, these States are going to have
1902 to establish these exchanges regardless. Give them the money
1903 so they have the flexibility. Some of it is going to be job
1904 creation. Some of it is going to ultimately save money
1905 because the exchanges will result in lower premiums and
1906 better insurance. And certainly don't let the Federal
1907 Government step in and run the State exchange, which is also
1908 going to cost money. It may cost even more money. I don't
1909 have the data here but I wouldn't be surprised if the States
1910 didn't get these grants and the Federal Government took over
1911 the exchanges, it might even cost more money, for all we
1912 know.

1913 So this just doesn't make any sense. If you want
1914 flexibility, you should keep the current law, but I do
1915 support the gentlewoman's amendment because she points out
1916 how this should be linked to the employment rate. It is
1917 significant in that regard.

1918 The {Chairman.} The gentleman's time is expired. Are
1919 there other members wishing to speak in support for or
1920 against the amendment? The gentleman from Texas is
1921 recognized, Mr. Olson.

1922 Mr. {Olson.} I thank the chair. I speak in strong
1923 opposition to this amendment because it defies logic in that

1924 it allows one of the key provisions of the job-destroying
1925 Obamacare to continue until a State's unemployment rate goes
1926 below 4 percent. There is no way, no way unemployment will
1927 go below 4 percent if we allow the job-destroying Obamacare
1928 to continue.

1929 How does Obamacare destroy jobs? Well, it could take
1930 all day to describe because Obamacare contains so many
1931 onerous policies but we know that the employer mandates and
1932 over \$800 billion in new taxes will destroy hundreds of
1933 thousands of American jobs.

1934 But don't take my word for it. The Congressional Budget
1935 Office thinks Obamacare will cost jobs. According to the CBO
1936 Director, the law will cost 800,000 Americans their jobs and
1937 most believe that the Director underestimated that amount.
1938 According to a study by the National Federation of
1939 Independent Businesses, an employer mandate like the one
1940 included in Obamacare could eliminate an additional 1.6
1941 million jobs by 2014. Sixty-six percent of those job losses
1942 could come from small businesses.

1943 Instead of playing games, I ask my Democrat colleagues
1944 to vote against this amendment and vote with us to repeal
1945 this job-destroying provision of Obamacare. I yield back my
1946 time.

1947 The {Chairman.} The gentleman yields back. Are there

1948 other members wish to speak on the amendment? The chair
1949 recognizes the gentleman from the great State of Michigan for
1950 5 minutes.

1951 Mr. {Dingell.} Mr. Chairman, I thank you for your
1952 courtesy.

1953 I want to express my strong support for the amendment to
1954 establish the funding for State-based exchange grants, and I
1955 think that it is something that we have to do. It says that
1956 this will not take effect until unemployment falls. This is
1957 good. But I remind my colleagues that this business of the
1958 State exchange grants is a great Republican idea. It came
1959 from my good friend, Bob Dole, who some of my Republican
1960 colleagues might still remember. And what it does is, it
1961 allows the States and the grants that we are going to make to
1962 States, allows the States to first of all begin to craft the
1963 plans that best equal their concerns with regard to health
1964 care and to see to it that they can do so in a way which will
1965 perhaps ultimately save money, will make this country cease
1966 being essentially a third world nation with regard to the
1967 health care we are providing for our people. We have the
1968 best medicine in the world but we can't get it to our people.
1969 And so the ACA was an attempt for us to finally get away
1970 from that appalling situation so that we no longer are going
1971 to rank with the third world nations on infant mortality, so

1972 that we can get the life expectancy of our people up to that
1973 which goes in some of the other advanced nations in the
1974 world, so that we can do some intelligent things about
1975 reducing the excessive costs in health care and the excessive
1976 rate of growth in health care in the United States, which is
1977 going up about twice as fast as it is in any other nation in
1978 the world.

1979 All the States are receiving grants if they wish them
1980 and if they wish to go forward. These grants are going to
1981 help them in a difficult time to begin to move forward with
1982 regard to providing the State exchanges which will enable
1983 them to provide the precise kind of care that they think
1984 ought to be given to the people of their respective States.
1985 This is an excellent, sensible proposal and it is something
1986 which is going to make it possible for us to see to it that
1987 the Nation gets the health care it needs and does so in a way
1988 that helps us to finally control the costs, see to it that
1989 the benefits of good health care are available to our people.

1990 And I would remind my friends on the other side that
1991 health care is not a matter of privilege, it is a matter of
1992 right. If you don't have it, you are going to die, and I
1993 don't think that that comports with our idea of what this
1994 Nation should be with regard to how we treat our people and
1995 how we deal with not only the humanitarian concerns but very

1996 frankly the economic curse that our runaway health care costs
1997 are creating for the people of the United States and for the
1998 different government programs which try over the years to
1999 address these concerns of our people.

2000 I would urge my friends to adopt the amendment. I would
2001 urge my friends on the committee on both sides to reject this
2002 bill, which is nothing more or less than a manifestation of
2003 mischief which was promised this Congress by my Republican
2004 friends, who said they are going to do everything they can to
2005 do away with the health care bill of the last Congress and
2006 that they are going to do everything they can to see that
2007 there is no money and that there are no personnel to
2008 administer the statute. Let us give this statute a chance to
2009 work for the benefit of the people. Let us see to it that
2010 the decisions made by the last Congress are not wrangled over
2011 on a continuing basis by those of us here who are less
2012 concerned with the benefit of the people than in dealing with
2013 some of political rigmarole that stems from the last session
2014 of this Congress.

2015 I urge my colleagues to support the amendment. I urge
2016 them to reject this and the other bills that we have this
2017 morning, which are mischievous in the extreme, and then let
2018 us get on to the business of restoring the economy of the
2019 Nation, getting our people back to work, dealing with jobs

2020 and taking responsible steps to balance the budget and to
2021 eliminate the huge expenses that we are finding imposed on us
2022 by the deficit, which in good part was left to us by our
2023 Republican friends and their Republican President who created
2024 this wonderful mess with two wars fought on a credit card.
2025 So I yield back the balance of my time.

2026 The {Chairman.} The gentleman's time is expired. I
2027 think we are ready to vote on this amendment. Are there
2028 other members wishing to speak?

2029 Mr. {Inslee.} Mr. Chair, if may be so bold as to move
2030 to strike the requisite number of--

2031 The {Chairman.} The gentleman is recognized for 5
2032 minutes.

2033 Mr. {Inslee.} --repetitive verbiage and yield to Ms.
2034 Baldwin.

2035 Ms. {Baldwin.} Thank you, Mr. Chairman. I just wanted
2036 to correct the record on the Affordable Care Act and its
2037 impact so far on job creation as well as the projected impact
2038 in the future.

2039 In sharp contrast to during the Bush Administration
2040 where 673,000 private sector jobs were lost, the economy in
2041 the United States has created 1.4 million private sector jobs
2042 in the past year, that past year being since the passage of
2043 the Affordable Care Act. Of the 1.4 million private sector

2044 jobs, 243,000 of them were in the health care field, in the
2045 health care industry.

2046 A study by Harvard University and the Commonwealth Fund
2047 estimates that the Affordable Care Act will strengthen the
2048 economy and the job market by creating between 250,000 to
2049 400,000 jobs per year for the next decade. The increase is
2050 due to cost-saving provisions, especially for small
2051 businesses, which will allow for the money to be spent on job
2052 creation and hiring instead of rising health care costs. In
2053 addition, provisions in the bill address the severe shortages
2054 of primary care physicians, physician assistants and nurses,
2055 and in 2010 funds were allocated to train more than 16,000
2056 new primary care providers. That is the jobs impact of the
2057 Affordable Care Act. I yield back.

2058 The {Chairman.} Does the gentleman yield back?

2059 Mr. {Inslee.} Yes, I yield back.

2060 The {Chairman.} Are there other members wishing to
2061 speak? Seeing none, I think we are ready to vote on the
2062 amendment. Are we going to ask for a recorded vote? Yes.
2063 All those in favor will respond by saying aye. Those
2064 opposed, say nay. The clerk will read the names.

2065 The {Clerk.} Mr. Barton?

2066 Mr. {Barton.} No.

2067 The {Clerk.} Mr. Barton, no.

2068 Mr. Stearns?
2069 [No response.]
2070 The {Clerk.} Mr. Whitfield?
2071 [No response.]
2072 The {Clerk.} Mr. Shimkus?
2073 Mr. {Shimkus.} No.
2074 The {Clerk.} Mr. Shimkus, no.
2075 Mr. Pitts?
2076 [No response.]
2077 The {Clerk.} Mrs. Bono Mack?
2078 Mrs. {Bono Mack.} No.
2079 The {Clerk.} Mrs. Bono Mack, no.
2080 Mr. Walden?
2081 Mr. {Walden.} No.
2082 The {Clerk.} Mr. Walden, no.
2083 Mr. Terry?
2084 Mr. {Terry.} No.
2085 The {Clerk.} Mr. Terry, no.
2086 Mr. Rogers?
2087 Mr. {Rogers.} No.
2088 The {Clerk.} Mr. Rogers, no.
2089 Mrs. Myrick?
2090 Mrs. {Myrick.} No.
2091 The {Clerk.} Mrs. Myrick, no.

2092 Mr. Sullivan?
2093 Mr. {Sullivan.} No.
2094 The {Clerk.} Mr. Sullivan, no.
2095 Mr. Murphy?
2096 Mr. {Murphy.} No.
2097 The {Clerk.} Mr. Murphy, no.
2098 Mr. Burgess?
2099 Dr. {Burgess.} No.
2100 The {Clerk.} Mr. Burgess, no.
2101 Mrs. Blackburn?
2102 [No response.]
2103 The {Clerk.} Mr. Bilbray?
2104 Mr. {Bilbray.} Votes no.
2105 The {Clerk.} Mr. Bilbray, no.
2106 Mr. Bass?
2107 Mr. {Bass.} No.
2108 The {Clerk.} Mr. Bass, no.
2109 Mr. Gingrey?
2110 Dr. {Gingrey.} No.
2111 The {Clerk.} Mr. Gingrey, no.
2112 Mr. Scalise?
2113 Mr. {Scalise.} No.
2114 The {Clerk.} Mr. Scalise, no.
2115 Mr. Latta?

- 2116 Mr. {Latta.} No.
- 2117 The {Clerk.} Mr. Latta, no.
- 2118 Mrs. McMorris Rodgers?
- 2119 Mrs. {McMorris Rodgers.} No.
- 2120 The {Clerk.} Mrs. McMorris Rodgers, no.
- 2121 Mr. Harper?
- 2122 Mr. {Harper.} No.
- 2123 The {Clerk.} Mr. Harper, no.
- 2124 Mr. Lance?
- 2125 Mr. {Lance.} No.
- 2126 The {Clerk.} Mr. Lance, no.
- 2127 Mr. Cassidy?
- 2128 Dr. {Cassidy.} No.
- 2129 The {Clerk.} Mr. Cassidy, no.
- 2130 Mr. Guthrie?
- 2131 Mr. {Guthrie.} No.
- 2132 The {Clerk.} Mr. Guthrie, no.
- 2133 Mr. Olson?
- 2134 Mr. {Olson.} No.
- 2135 The {Clerk.} Mr. Olson, no.
- 2136 Mr. McKinley?
- 2137 Mr. {McKinley.} No.
- 2138 The {Clerk.} Mr. McKinley, no.
- 2139 Mr. Gardner?

2140 Mr. {Gardner.} No.

2141 The {Clerk.} Mr. Gardner, no.

2142 Mr. Pompeo?

2143 Mr. {Pompeo.} No.

2144 The {Clerk.} Mr. Pompeo, no.

2145 Mr. Kinzinger?

2146 Mr. {Kinzinger.} No.

2147 The {Clerk.} Mr. Kinzinger, no.

2148 Mr. Griffith?

2149 Mr. {Griffith.} No.

2150 The {Clerk.} Mr. Griffith, no.

2151 Mr. Waxman?

2152 Mr. {Waxman.} Aye.

2153 The {Clerk.} Mr. Waxman, aye.

2154 Mr. Dingell?

2155 Mr. {Dingell.} Aye.

2156 The {Clerk.} Mr. Dingell, aye.

2157 Mr. Markey?

2158 [No response.]

2159 The {Clerk.} Mr. Towns?

2160 Mr. {Towns.} Aye.

2161 The {Clerk.} Mr. Towns, aye.

2162 Mr. Pallone?

2163 Mr. {Pallone.} Aye.

2164 The {Clerk.} Mr. Pallone, aye.
2165 Mr. Rush?
2166 Mr. {Rush.} Aye.
2167 The {Clerk.} Mr. Rush, aye.
2168 Ms. Eshoo?
2169 Ms. {Eshoo.} Aye.
2170 The {Clerk.} Ms. Eshoo, aye.
2171 Mr. Engel?
2172 [No response.]
2173 The {Clerk.} Mr. Green?
2174 [No response.]
2175 The {Clerk.} Ms. DeGette?
2176 Ms. {DeGette.} Aye.
2177 The {Clerk.} Ms. DeGette, aye.
2178 Mrs. Capps?
2179 Mrs. {Capps.} Aye.
2180 The {Clerk.} Mrs. Capps, aye.
2181 Mr. Doyle?
2182 Mr. {Doyle.} Yes.
2183 The {Clerk.} Mr. Doyle, aye.
2184 Ms. Schakowsky?
2185 [No response.]
2186 The {Clerk.} Mr. Gonzalez?
2187 [No response.]

2188 The {Clerk.} Mr. Inslee?
2189 Mr. {Inslee.} Aye.
2190 The {Clerk.} Mr. Inslee, aye.
2191 Ms. Baldwin?
2192 Ms. {Baldwin.} Aye.
2193 The {Clerk.} Ms. Baldwin, aye.
2194 Mr. Ross?
2195 Mr. {Ross.} Aye.
2196 The {Clerk.} Mr. Ross, aye.
2197 Mr. Weiner?
2198 Mr. {Weiner.} Aye.
2199 The {Clerk.} Mr. Weiner, aye.
2200 Mr. Matheson?
2201 Mr. {Matheson.} Aye.
2202 The {Clerk.} Mr. Matheson, aye.
2203 Mr. Butterfield?
2204 Mr. {Butterfield.} Aye.
2205 The {Clerk.} Mr. Butterfield, aye.
2206 Mr. Barrow?
2207 Mr. {Barrow.} Votes aye.
2208 The {Clerk.} Mr. Barrow, aye.
2209 Ms. Matsui?
2210 Ms. {Matsui.} Aye.
2211 The {Clerk.} Ms. Matsui, aye.

2212 Ms. Christensen?

2213 Dr. {Christensen.} Aye.

2214 The {Clerk.} Ms. Christensen, aye.

2215 Mr. Upton?

2216 The {Chairman.} Votes no.

2217 The {Clerk.} Mr. Upton, nay.

2218 The {Chairman.} Are there other members wishing to
2219 vote? Mr. Stearns?

2220 Mr. {Stearns.} Votes no.

2221 The {Clerk.} Mr. Stearns, no.

2222 The {Chairman.} Mr. Pitts?

2223 Mr. {Pitts.} No.

2224 The {Clerk.} Mr. Pitts, no.

2225 The {Chairman.} Mr. Whitfield?

2226 Mr. {Whitfield.} No.

2227 The {Clerk.} Mr. Whitfield, no.

2228 The {Chairman.} Are there other members wishing to cast
2229 a vote? If not, the clerk will report the tally.

2230 The {Clerk.} Mr. Chairman, on that there were 18 ayes,
2231 30 nays.

2232 The {Chairman.} Eighteen ayes, 30 nays. The amendment
2233 is not agreed to.

2234 The chair understands there are two amendments left that
2235 are likely to be offered to this bill, and we will dispense

2236 with those two amendments, vote on final and stop for lunch,
2237 if we can--well, I mean finish the debate on them.

2238 What member wishes to offer an amendment to the bill?

2239 The gentlelady from California, Ms. Capps.

2240 Mrs. {Capps.} Mr. Chairman, I have an amendment at the
2241 desk.

2242 The {Chairman.} The clerk will report the title.

2243 The {Clerk.} An amendment offered by Mrs. Capps.

2244 [The amendment follows:]

2245 ***** INSERT 6 *****

|
2246 The {Chairman.} The amendment will be considered as
2247 read, and the gentlelady is recognized for 5 minutes in
2248 support of her amendment.

2249 Mrs. {Capps.} Mr. Chairman, H.R. 1213 is a misguided
2250 bill that would harm already cash-strapped States and take
2251 away a State's ability to provide access to health insurance
2252 for their citizens.

2253 The health exchange implementation program exists to
2254 assist States in planning and establishing health benefit
2255 exchanges which are tailored to their State's specific needs.
2256 In fact, it is the exact type of program that gives States
2257 the flexibility they need to design a program that suits
2258 their citizens, exactly what some of my colleagues on the
2259 other side of the aisle have been calling for. These
2260 exchanges will make it easier for consumers and small
2261 businesses to better shop for health insurance coverage based
2262 on price, benefits and services, and quality. They will
2263 provide the key structure to ensuring that the numerous
2264 consumer protection provisions in the law are enacted for
2265 State residents and they will make health insurance markets
2266 both more competitive and more transparent, and this would
2267 all be accomplished through a State-specific plan that takes
2268 into account the unique needs of our constituents.

2269 I think we can all agree that no one health exchange is
2270 going to fit the needs of every State. I acknowledge that
2271 the needs of a small State might be quite different from the
2272 needs of my home State of California, and that is why the
2273 exchange program fund enables States to create their unique
2274 approach, but this bill would change all that.

2275 The exchanges would still need to be created and yet
2276 there would be no funding or help to make that reality, or
2277 they could just accept the plan that the Federal Government
2278 provides them. A vote for this bill is a vote against the
2279 fiscal and physical health of our States, and it is wasteful
2280 as each of our States has already received at least \$1
2281 million to begin this process, something that will stop in
2282 its tracks if the program is repealed. In fact, it also
2283 might be rescinded. But it also threatens the important
2284 consumer protections that the law puts in place to ensure
2285 that each of us receives a plan that takes care of us when we
2286 are sick at a fair price, and that includes a prohibition on
2287 gender rating or charging women more for a plan just because
2288 of her gender. That was something that was severely lacking
2289 before the Affordable Care Act passed. The data collected
2290 marketplace comparisons provided and competition that will be
2291 found in these new exchanges will be critical to ensuring
2292 that women receive a fair price for a fair plan. We all know

2293 that the reason this bill is here being considered is that my
2294 colleagues on the other side of the aisle know that exchanges
2295 are the central piece of making the Affordable Care Act work
2296 for all Americans. Their function is key to promoting a
2297 fair, transparent marketplace that is accessible for
2298 everyone.

2299 To ensure that these protections for women are not
2300 harmed by removing these funds, my amendment would simply
2301 ensure that that the money that H.R. 1213 would repeal to
2302 fund the development of these important marketplaces remains
2303 intact to enforce the provisions that end the discriminatory
2304 practice of gender rating.

2305 Before the Affordable Care Act was passed, American
2306 women who purchased health insurance through the individual
2307 market paid up to 84 percent more than men did for their
2308 individual plans. This wasn't for added benefits. This was
2309 for plans that did not even include maternity care.
2310 Moreover, 95 percent of plans in States that did not
2311 specifically bar gender rating used the practice to
2312 indiscriminately charge women more for the same care. This
2313 is clearly unjust, and we cannot allow the politics of
2314 repealing any little piece of the Affordable Care Act getting
2315 in the way of ensuring American women will be treated fairly
2316 in the individual health insurance market.

2317 Vote yes on this amendment and show American women that
2318 you are on their side, not on the insurance company's side,
2319 and I am prepared to yield back the balance of my time.

2320 The {Chairman.} The gentlelady yields back. The chair
2321 would recognize the gentlelady from Washington State, Ms.
2322 McMorris Rogers, for 5 minutes.

2323 Mrs. {McMorris-Rogers.} Thank you, Mr. Chairman, and I
2324 am in opposition to this amendment. In reality, it is simply
2325 another attempt to protect the unlimited pot of money for the
2326 Secretary of Health and Human Services in the underlying
2327 bill. There is already a preclusion on gender discrimination
2328 in the underlying legislation.

2329 In reality, it is the Federal Government through the
2330 Secretary of Health and Human Services that will control what
2331 kind of essential benefits must be included and impose price
2332 controls on health coverage. States will be a servant, not a
2333 partner, and far from flexibility, it is the Secretary of
2334 Health and Human Services that is determining how you
2335 certify, whether plans have networks, provider rates,
2336 transparency. It is the Secretary of Health and Human
2337 Services determining how much it will cost, how much they
2338 will spend.

2339 Mr. Chairman, at the end of the day, this amendment is
2340 simply another attempt to access an unlimited pot of money.

2341 Giving any Executive Branch official a blank check is a bad
2342 idea during a Democrat Administration or a Republican
2343 Administration, and I urge opposition to the amendment.

2344 The {Chairman.} The gentlelady's time is expired. The
2345 chair would recognize the ranking member of the committee,
2346 Mr. Waxman, for 5 minutes.

2347 Mr. {Waxman.} Thank you very much, Mr. Chairman.

2348 I listened carefully to what our colleague, Mrs.
2349 McMorris-Rogers, had to say, and she sees this as a way to
2350 set up the exchanges for the health care bill with a lot of
2351 the features that many Republican members find disagreeable.
2352 But I know that there is an attempt to repeal that bill, and
2353 if you repeal the health care bill and you replaced it, one
2354 of the things, it seems to me, you would want to have is
2355 money for planning grants for the States to set up exchanges.
2356 You don't need the whole health care bill for the exchanges.
2357 Exchanges are a very good idea. Utah already has one.
2358 Massachusetts has one, of course, in the context of their
2359 health care reform.

2360 The reason an exchange is a good idea is it becomes a
2361 way for consumers to make choices between competing insurance
2362 plans. That competition between plans for the consumer's
2363 choice serves a very important purpose. If there were a
2364 standardized benefit, for example, you could compare one plan

2365 to the other on price and on quality, but even if it weren't
2366 standardized, you at least have a place where you can compare
2367 them. We have our exchange every year when federal employees
2368 make a choice and then we decide which of the options that
2369 are available to us do we want to sign up during the open
2370 enrollment period.

2371 So my argument is, this bill eliminates the money for
2372 the exchanges to be planned by the States. I would suggest
2373 his is not an appropriate bill by itself but we are of course
2374 having it by itself. I think we ought to have it no matter
2375 what you want to do in health care reform, if you can find
2376 the votes to it, to stop the States from having the grants to
2377 set up exchanges.

2378 Now, as to this particular amendment by Ms. Capps, this
2379 amendment says that where the States get this money, they
2380 should recertify that insurance plans that are offered in the
2381 exchange not discriminate in premiums based on gender. Well,
2382 I hope that is something Republicans would want to do as
2383 well. I heard Mr. Harper a few minutes ago say that he felt
2384 that we ought to stop discrimination against people with
2385 preexisting conditions from getting health insurance. If you
2386 all agree to that, we ought to see that in your bill to
2387 replace the health insurance bill that is now law. But I
2388 haven't seen any proposal because it is so tricky. If you

2389 say that you are not going to discriminate based on
2390 preexisting conditions, then insurance companies don't know
2391 if they are going to be able to spread the costs from those
2392 who have preexisting conditions and which have cost them more
2393 money to a broader group which of course led us to the
2394 mandate.

2395 The Republican approach, by the way, in the last couple
2396 of years was to set up a high-risk pool that ironically
2397 enough we now have attempts by the Republicans to eliminate
2398 the high-risk pool. No, I don't know that we have had
2399 attempts to eliminate it. We had a hearing on it, and the
2400 high-risk pool was criticized because not enough people were
2401 taking it up. Of course, that is the problem of high-risk
2402 pools. High-risk pools still mean that the people with
2403 preexisting conditions have to spend more money.

2404 But this particular amendment is an amendment that would
2405 ensure that whatever our disagreements on health reform, we
2406 pursue policies that do not allow health insurance companies
2407 to discriminate against women. This is a civil rights issue,
2408 it is not an ideological one, so I hope that we can all get
2409 behind this amendment.

2410 Health insurance exchanges are required to certify that
2411 health plans meet the protections laid out in the Affordable
2412 Care Act. Even if you eliminate the Affordable Care Act, we

2413 should still want exchanges to certify that they are not
2414 allowing discrimination against women. Right now, insurers
2415 charge up to 48 percent more to women in the individual
2416 insurance market. Seventy-nine percent of women with an
2417 individual market policy do not have any maternity coverage
2418 because insurers don't want to pay for delivery of babies.
2419 The Affordable Care Act would put an end to that, but without
2420 these exchanges and the establishment of grants to the States
2421 to set them up, we won't have the opportunity for the States
2422 to decide if we went your direction to prohibit this kind of
2423 discrimination.

2424 So what this amendment says is the States that get money
2425 to set up exchanges don't allow discrimination against women.
2426 I urge support for this amendment. I urge opposition to
2427 strike the funds for the States, which is the purpose of the
2428 bill, and I yield back my time.

2429 The {Chairman.} Are there other members wishing to
2430 speak?

2431 Mr. {Barton.} Mr. Chairman?

2432 The {Chairman.} The gentleman from Texas is recognized
2433 for 5 minutes.

2434 Mr. {Barton.} I know, Mr. Chairman, that we are about
2435 to finish this bill and break for lunch, so I won't take too
2436 long.

2437 There is a movie called Cool Hand Luke, and the
2438 protagonist or the hero, however you want to define him in
2439 the movie, is Paul Newman, who portrays this man who kind of
2440 goes his own way and he doesn't really care about the rules.
2441 He just does whatever he wants to do and he ends up in
2442 prison, and of course there he becomes a folk hero in the
2443 prison because he doesn't listen to the warden and doesn't
2444 abide with any of the rules in the prison. And there is a
2445 famous scene in this movie where Luke has done something he
2446 shouldn't have done or at least was against the rules, and
2447 the warden is standing up on the levy and Luke is down
2448 manacled, and the warden says, ``What we have here is a
2449 failure to communicate.'' It is a classic line. Well, that
2450 is what we have got right now in this committee is a failure
2451 to communicate.

2452 The majority has decided that the new health care law
2453 has got too many mandates, spends too much money, takes away
2454 too much freedom of choice, is non-transparent, and we are
2455 doing everything we can to repeal it, and once we get it
2456 repealed, we want to replace it. And our friends on the
2457 minority seem bound and determined to do everything they can
2458 to defend every last bit of it no matter what.

2459 This bill that is before us right now, the main point is
2460 that it gives the Secretary of Health and Human Services an

2461 unlimited ability to spend money with no oversight and no
2462 checks and balances, and we oppose that. We want to repeal
2463 that unlimited authority. We are not necessarily opposed to
2464 State health exchanges but we do think if you are going to
2465 have an exchange, it should be open, transparent and probably
2466 voluntary or use something like a co-op.

2467 Our friends on the minority seem keep acting like that
2468 we don't think these State-based health exchanges are a good
2469 idea. I happen to think that they are a good idea but I also
2470 happen to think that giving the Secretary of Health and Human
2471 Services a blank check is wrong and so we have gone three or
2472 four amendments now. This one is on gender-based rating. We
2473 have had all the others. It is the same basic amendment.

2474 Dr. {Gingrey.} Would the distinguished chairman
2475 emeritus yield?

2476 Mr. {Barton.} Sure. I was about out of gas anyway.

2477 Dr. {Gingrey.} I appreciate the chairman emeritus for
2478 yielding because this movie, Cool Hand Luke, is also one of
2479 my favorites. My grandson, who is 1-1/2 years old, is named
2480 Luke, and I call him Cool Hand. He is a cool hand. But also
2481 in that movie--

2482 Mr. {Barton.} Hopefully he is not in prison.

2483 Dr. {Gingrey.} Cool Hand Luke, as you remember, my
2484 colleagues, tried to eat those 50 eggs, you know, and he

2485 finally got that 50th egg down and it just about killed him,
2486 and what we are looking at here is not only a failure to
2487 communicate but also trying to eat too darn many eggs, and
2488 this Federal Government has already done that and is choking
2489 on them and it is time to stop. So it is a bridge too far or
2490 an egg too many, and I yield back to my colleague.

2491 Mr. {Barton.} Well, I am going to yield back. I just
2492 oppose this amendment and would hope once we get the bill
2493 passed, maybe we can later in this Congress actually work
2494 together on some of these ideas. I hope he can.

2495 The {Chairman.} The gentleman yields back. The chair
2496 would recognize the gentleman from New York, Mr. Weiner.

2497 Mr. {Weiner.} Thank you, Mr. Chairman.

2498 I have got a movie. I have a failure to communicate. I
2499 think you are going to like this. You guys have heard the
2500 language from the Lewis Carroll play Alice in Wonderland,
2501 Jabberwocky, where it is just a completely meaningless series
2502 of words all strung together that don't mean much of
2503 anything. Yes, we do have a failure to communicate because
2504 frankly they are such a moving target. You say you don't
2505 want there to be central Executive Branch making decisions on
2506 minimum standards and products so who do you imagine does
2507 that? I guess the insurance company is going to do that.
2508 That is the distinction that we have here. We actually do

2509 have a fairly clear dividing line. On that side of the hall
2510 here, we have people who believe that if you let the
2511 insurance companies make up the standards, they will just in
2512 their sense of beneficence and all their wisdom and their
2513 great sense of goodness will make standards that don't harm
2514 anybody. Okay. Maybe you are right. Well, ask your State
2515 insurance commissioners whether they believe that is the
2516 case. They will tell you that obviously you need to have
2517 common standards or else consumers get ripped off and
2518 discriminated against. Now, you can come to this place with
2519 this notion that all right, if you don't have regulations,
2520 that the great fairies of the insurance industry will come in
2521 here and choose to do the right thing, they won't.

2522 One of our basic obligations as being people who kind of
2523 set the rules of the road here is that there need to be rules
2524 of the road, so the question becomes, do you believe in Ms.
2525 Capps' philosophy that you need to have some regulatory organ
2526 that does that, or Ms. McMorris's idea that you let the
2527 insurance companies do it. What we are doing here is
2528 empowering the States. As Mr. Waxman said, when you set up
2529 these exchanges, it is a way to empower States and even
2530 further to empower consumers to have standards that they can
2531 look at down the road and realize they are all basically the
2532 same. You know, we do it for our insurance. For ours, we do

2533 it. Why don't we do it for citizens? We have basic
2534 standards in the federal employees' health benefits program.
2535 Are you aware of that, gentlemen? Who do you think does it?
2536 Is it Aetna's CEO? No. Is it Oxford's CEO? No. Is it Blue
2537 Cross? No, we do it because it is good enough for us and we
2538 don't want our families to sign up for health insurance plans
2539 that are deficient or discriminate. But it ain't good enough
2540 for our constituents, huh? It is not good enough for them?
2541 Why? Why not make it so we have an orderly marketplace that
2542 people can compare prices? Because it is good enough for us
2543 and the 9 million employees and their families in the Federal
2544 Government in the FEHB but it ain't good enough for the rest
2545 of the American people.

2546 Mr. {Waxman.} Will the gentleman yield?

2547 Mr. {Weiner.} Yes, sir, I certainly will.

2548 Mr. {Waxman.} I think we ought to remind our Republican
2549 colleagues if they vote for the budget that is being proposed
2550 to change Medicare into a voucher system, they should want
2551 States to have exchanges because these people otherwise are
2552 going to be facing the same problems that others have going
2553 to individual insurance to what is going to replace their
2554 Medicare.

2555 Mr. {Weiner.} If I could reclaim, look, we have to try
2556 to figure it out, Mr. Waxman. They don't believe that the

2557 Federal Government should have the authority to do it so we
2558 empower the States to do it. They don't believe the States
2559 should have the power to do it because they are about to vote
2560 no on the Capps amendment. So who it is they believe they
2561 should do it? Well, let us leave consumers on their own
2562 because you know how powerful consumers are as individuals
2563 dealing with an insurance company. We all know how powerful
2564 we are when we have to dial that 800 number just how economic
2565 might we have.

2566 I mean, the fact of the matter is, these guys don't
2567 believe in the Tenth Amendment, Mr. Waxman. We are trying to
2568 empower States to do this and they are saying no, no, no, no,
2569 no because at the end of the day, my Republican friends,
2570 whether they do it mindfully or not, are advocating for the
2571 primacy of health insurance companies as if somehow they are
2572 some entity that needs to be defended in this debate, that
2573 oh, no, we can't make insurance companies do stuff.

2574 And let me make one final point in my final 50 seconds.
2575 Our colleagues have argued a thousand times let us let
2576 consumers buy health care over State lines, okay? That is a
2577 reasonable thing to do, but if you don't have anyone setting
2578 the standards, what you are really doing is letting Tennessee
2579 or Mississippi or Montana or New York set the standards for
2580 everyone else, right? Because what is the point of having

2581 standards in your State if your consumers can then go buy
2582 products in someone else's State with a dramatically lower
2583 standard? You need to have an orderly marketplace. But if
2584 you worship every day at the alter of health insurance
2585 companies, you definitely don't want to vote for the Capps
2586 amendment, definitely not. If you get up every day, you
2587 brush your teeth, you comb your hair, you put on a nice suit
2588 and then dive at the altar of insurance companies, yes, you
2589 want to vote no for the Capps amendment. Everyone else
2590 should vote yes.

2591 The {Chairman.} Are there other members wishing to
2592 speak on the amendment? I am told we are going to have a
2593 recorded vote on this, so we are going to have a recorded
2594 vote on this amendment and we are going to delay that
2595 recorded vote until the completion of the next amendment.

2596 Are there other members wishing to offer an amendment?
2597 The chair would recognize the gentlelady from California.
2598 The clerk will report the title of the amendment.

2599 The {Clerk.} Fifteen?

2600 Ms. {Matsui.} Fifteen, yes.

2601 [The amendment follows:]

2602 ***** INSERT 7 *****

|
2603 The {Chairman.} The amendment will be considered as
2604 read, and the gentlelady is recognized for 5 minutes. This
2605 is expected to be the last amendment on this bill so we will
2606 finish this amendment, have a recorded vote on Ms. Capps'
2607 amendment and then a recorded vote on final of the bill, and
2608 we will adjourn for lunch.

2609 The gentlelady is recognized for 5 minutes.

2610 Ms. {Matsui.} Thank you, Mr. Chairman, and I promise
2611 not to talk about eggs or anything like that.

2612 H.R. 1213 would repeal all federal funding to assist the
2613 States with establishing health benefit exchanges. Repealing
2614 this funding would not only work to undo the progress that my
2615 home State of California has made in establishing its own
2616 exchange but put the whole exchange concept into question.
2617 These exchanges will help provide consumers with the freedom
2618 to better choose what health insurance plan suits their
2619 needs. They can help bring down costs for small businesses
2620 if the State chooses to institute a small business exchange.
2621 They can also increase competition in the marketplace through
2622 the establishment of regional exchanges should States decide
2623 to ban together and sell insurance across their borders. The
2624 exchanges will also host a number of insurance market reforms
2625 that will provide the consumer with a better, more affordable

2626 product.

2627 My amendment goes to the heart of that. Simply stated,
2628 it would not allow this bill to be enacted until all
2629 Americans have free preventive care as will be the case when
2630 the health benefit exchanges go on line in 2014. This
2631 benefit was included in the Affordable Care Act for a reason.
2632 One of the primary barriers to Americans seeing a primary
2633 care provider on a regular basis is cost. For the average
2634 American, it costs too much money to go to the doctor for
2635 annual physicals and wellness exams. This in turn causes
2636 people to go to the doctor only after they get sick as
2637 opposed to seeing a physician in order to stay healthy. By
2638 waiting until you are already sick, one's road to recovery is
2639 that much more difficult, that much more time consuming and
2640 that much more expensive.

2641 The Affordable Care Act eliminates the cost factor for
2642 those purchasing insurance on the exchange, therefore
2643 consumers are given a very good market incentive to see their
2644 doctor on a regular basis. And studies show that when
2645 someone is able to see a doctor on a regular basis, they lead
2646 healthier lives and can catch potentially long-term and
2647 debilitating diseases earlier, therefore reducing hospital
2648 stays and a need for costly medical procedures and medicines.

2649 The legislation before us would strip that benefit away

2650 from the American people. By stripping the funding to States
2651 for the exchanges, this bill would only help to reestablish
2652 barriers to those seeking preventive care, help increase
2653 America's out-of-pocket expenses and help make people sicker.
2654 This would mean that nearly 550,000 Sacramento residents
2655 would see higher out-of-pocket expenses, 550,000 Sacramentans
2656 sicker, 550,000 Sacramentans with potentially higher medical
2657 debt due to unchecked long-term diseases. Ultimately, what
2658 all this does is to help bend the cost curve upward, which I
2659 think is the opposite of what all of us on this committee
2660 want to do.

2661 I urge my colleagues to vote for my amendment, which
2662 again only seeks to assure consumers that their benefits are
2663 protected.

2664 Mr. {Inslee.} Would the gentlelady yield?

2665 Ms. {Matsui.} I yield, certainly.

2666 Mr. {Inslee.} Thank you.

2667 I got to introduce Paul Newman once. He was at Al Gore
2668 for President rally, and the guy should be a hero. I know he
2669 is to many Americans. He established camps for these kids
2670 who have real severe physical problems around the country,
2671 and one of them in our State. He just did some remarkable
2672 things, and I can't speak for him obviously but I don't think
2673 he would be wild about efforts to repeal the ability for kids

2674 to get health care in our country.

2675 So I just want to quote another line from Cool Hand
2676 Luke, two lines, one from the boss and one from Luke, that he
2677 played. Here is what the boss says, and it reminds me sort
2678 of what the Republican approach is to health care. Here is
2679 the boss: ``Sorry, Luke. I am just doing my job. You've
2680 got to appreciate that.'' Luke responds: "Nah, calling it
2681 your job just don't make it right, boss.``

2682 What you guys are doing is not right, trying to take
2683 health care from these kids that Paul Newman has helped, and
2684 this a real-world ramification of what you are doing. It may
2685 be your job but it is not right. Thanks.

2686 Ms. {Matsui.} Mr. Chairman, I yield back.

2687 The {Chairman.} The gentlelady yields back. I am going
2688 to recognize myself for 5 minutes.

2689 I oppose the amendment because if the amendment passes,
2690 it will continue to give unlimited money to spend on
2691 questionable activities. Now, I would just like to say that
2692 in the last couple of weeks I have had a chance to talk to a
2693 number of governors on both sides of the aisle, and I will
2694 tell you, one of the things that I am hearing from a number
2695 of them is the questions as to whether PPACA is going to be
2696 ruled constitutional or not. And until that decision is
2697 finally rendered, in my view, by the Supreme Court because

2698 the loser, as we know, is going to appeal it until it reaches
2699 there, until that decision is finally rendered and if it is
2700 in fact ruled unconstitutional by the Supreme Court, the
2701 States are going to wonder why they are spending hundreds of
2702 millions of dollars collectively across the board for these
2703 if in fact it may be for naught. And one of the ideas
2704 frankly that I have been considering and maybe would like to
2705 spend a little time working with some of my colleagues on the
2706 Democratic side is whether or not we might want to suspend
2707 money again until we actually see a decision by the Supreme
2708 Court, which may mean that we might try to push them to
2709 actually consider arguments this summer and maybe see a
2710 decision sometime this fall. So maybe that is an issue that
2711 we can talk about and pursue legislation.

2712 Mr. {Weiner.} Would the gentleman yield?

2713 The {Chairman.} I will yield to the gentleman first
2714 from New York and then New Jersey.

2715 Mr. {Weiner.} The gentleman is aware that the part that
2716 is at issue in the Supreme Court is only the narrow issue of
2717 the mandate which in Massachusetts under Romneycare less than
2718 two-thirds didn't take up--

2719 The {Chairman.} Reclaiming my time. There is not the
2720 severability clause. Maybe that was a mistake in the Senate
2721 bill that they didn't include it but again we didn't have a

2722 chance to amend it. So here we are. So I would like to
2723 conclude debate, if I can, on this, maybe yield to the
2724 gentleman from New Jersey.

2725 Mr. {Lance.} Yes. Thank you, Mr. Chairman.

2726 On that issue, I agree with you completely, and I would
2727 hope the Supreme Court would take the case granting
2728 certiorari from the various district courts and not having to
2729 go through the circuit courts of appeal. I have a resolution
2730 to that effect with Congressman Forbes of Virginia of the
2731 Judiciary Committee. I believe a similar resolution has been
2732 introduced in the Senate by Senator Nelson, a Democrat, and I
2733 would urge you, sir, and distinguished members of the
2734 committee to look at that. I think that the Supreme Court
2735 should decide this issue as quickly as possible, and there is
2736 precedent for that. The Supreme Court took the case
2737 regarding the seizure of the steel mills by President Truman
2738 directly from the district court in 1952. This issue is as
2739 important as that.

2740 I agree with Congressman Weiner that what is actionable
2741 is the individual mandate but given the lack of severability,
2742 I think the Supreme Court might rule beyond that. And as a
2743 matter of finality, I would hope the Supreme Court would take
2744 the case immediately. Thank you very much.

2745 The {Chairman.} I will yield further to the gentleman

2746 from Pennsylvania, Dr. Murphy.

2747 Mr. {Murphy.} Thank you, Mr. Chairman.

2748 I believe all of us are pretty strongly in favor of
2749 anything that has to do with prevention. However, there is a
2750 number of issues involved with these prevention issues which
2751 we have not yet resolved such as what is included in
2752 preventative care. There is primary, secondary, tertiary
2753 prevention. Does it include websites that medical practices
2754 or insurance companies operate? Does it include a medical
2755 exam, history, physicals, inoculations? And how were those
2756 paid for? You can't offer something for free and not having
2757 the time accounted for or paid for in these elements. If a
2758 State has a plan that they are offering and they have to
2759 offer it for free, are they allowed to raise taxes to pay for
2760 it? We also notice a number of insurance plans have already
2761 raised their rates considerably.

2762 Now, I believe this committee should do some
2763 considerable work on prevention on anything from community
2764 health care centers to other actions. However, what we have
2765 not solved here is the problem of how you pay for something
2766 that is supposed to be free. These are very expensive and
2767 they can save money but I think we need to do some more work
2768 on this before this amendment comes through. Thank you, Mr.
2769 Chairman.

2770 The {Chairman.} Okay. I am going to yield back my
2771 time. I would like to think that we might be able to vote on
2772 this amendment. Are there further members seeking to
2773 comment? If not, all those in favor of the Matsui amendment
2774 will say aye. All those opposed, say no. The no's have it.
2775 The amendment is not agreed to.

2776 Are there further amendments to the bill? Seeing none,
2777 the order of business will be to vote first on the Capps
2778 amendment and concluding that vote we will vote immediately
2779 on final passage. Both will be recorded votes, and that
2780 point then we will adjourn for lunch. The clerk will call
2781 the roll on the Capps amendment. Those in favor will respond
2782 by saying aye.

2783 The {Clerk.} Mr. Barton?

2784 [No response.]

2785 The {Clerk.} Mr. Stearns?

2786 [No response.]

2787 The {Clerk.} Mr. Whitfield?

2788 Mr. {Whitfield.} No.

2789 The {Clerk.} Mr. Whitfield, no.

2790 Mr. Shimkus?

2791 Mr. {Shimkus.} No.

2792 The {Clerk.} Mr. Shimkus, no.

2793 Mr. Pitts?

2794 Mr. {Pitts.} No.
2795 The {Clerk.} Mr. Pitts, no.
2796 Mrs. Bono Mack?
2797 Mrs. {Bono Mack.} No.
2798 The {Clerk.} Mrs. Bono Mack, no.
2799 Mr. Walden?
2800 Mr. {Walden.} No.
2801 The {Clerk.} Mr. Walden, no.
2802 Mr. Terry?
2803 Mr. {Terry.} No.
2804 The {Clerk.} Mr. Terry, no.
2805 Mr. Rogers?
2806 Mr. {Rogers.} No.
2807 The {Clerk.} Mr. Rogers, no.
2808 Mrs. Myrick?
2809 Mrs. {Myrick.} No.
2810 The {Clerk.} Mrs. Myrick, no.
2811 Mr. Sullivan?
2812 [No response.]
2813 The {Clerk.} Mr. Murphy?
2814 Mr. {Murphy.} No.
2815 The {Clerk.} Mr. Murphy, no.
2816 Mr. Burgess?
2817 Dr. {Burgess.} No.

- 2818 The {Clerk.} Mr. Burgess, no.
- 2819 Mrs. Blackburn?
- 2820 Mrs. {Blackburn.} No.
- 2821 The {Clerk.} Mrs. Blackburn, no.
- 2822 Mr. Bilbray?
- 2823 Mr. {Bilbray.} No.
- 2824 The {Clerk.} Mr. Bilbray, no.
- 2825 Mr. Bass?
- 2826 Mr. {Bass.} No.
- 2827 The {Clerk.} Mr. Bass, no.
- 2828 Mr. Gingrey?
- 2829 Dr. {Gingrey.} No.
- 2830 The {Clerk.} Mr. Gingrey, no.
- 2831 Mr. Scalise?
- 2832 Mr. {Scalise.} No.
- 2833 The {Clerk.} Mr. Scalise, no.
- 2834 Mr. Latta?
- 2835 Mr. {Latta.} No.
- 2836 The {Clerk.} Mr. Latta, no.
- 2837 Mrs. McMorris Rodgers?
- 2838 Mrs. {McMorris Rodgers.} No.
- 2839 The {Clerk.} Mrs. McMorris Rodgers, no.
- 2840 Mr. Harper?
- 2841 Mr. {Harper.} No.

2842 The {Clerk.} Mr. Harper, no.
2843 Mr. Lance?
2844 Mr. {Lance.} No.
2845 The {Clerk.} Mr. Lance, no.
2846 Mr. Cassidy?
2847 Dr. {Cassidy.} No.
2848 The {Clerk.} Mr. Cassidy, no.
2849 Mr. Guthrie?
2850 Mr. {Guthrie.} No.
2851 The {Clerk.} Mr. Guthrie, no.
2852 Mr. Olson?
2853 Mr. {Olson.} No.
2854 The {Clerk.} Mr. Olson, no.
2855 Mr. McKinley?
2856 Mr. {McKinley.} No.
2857 The {Clerk.} Mr. McKinley, no.
2858 Mr. Gardner?
2859 Mr. {Gardner.} No.
2860 The {Clerk.} Mr. Gardner, no.
2861 Mr. Pompeo?
2862 Mr. {Pompeo.} No.
2863 The {Clerk.} Mr. Pompeo, no.
2864 Mr. Kinzinger?
2865 Mr. {Kinzinger.} No.

2866 The {Clerk.} Mr. Kinzinger, no.
2867 Mr. Griffith?
2868 Mr. {Griffith.} No.
2869 The {Clerk.} Mr. Griffith, no.
2870 Mr. Waxman?
2871 Mr. {Waxman.} Aye.
2872 The {Clerk.} Mr. Waxman, aye.
2873 Mr. Dingell?
2874 Mr. {Dingell.} Aye.
2875 The {Clerk.} Mr. Dingell, aye.
2876 Mr. Markey?
2877 [No response.]
2878 The {Clerk.} Mr. Towns?
2879 [No response.]
2880 The {Clerk.} Mr. Pallone?
2881 Mr. {Pallone.} Aye.
2882 The {Clerk.} Mr. Pallone, aye.
2883 Mr. Rush?
2884 Mr. {Rush.} Aye.
2885 The {Clerk.} Mr. Rush, aye.
2886 Ms. Eshoo?
2887 Ms. {Eshoo.} Aye.
2888 The {Clerk.} Ms. Eshoo, aye.
2889 Mr. Engel?

2890 [No response.]

2891 The {Clerk.} Mr. Green?

2892 Mr. {Green.} Aye.

2893 The {Clerk.} Mr. Green, aye.

2894 Ms. DeGette?

2895 Ms. {DeGette.} Aye.

2896 The {Clerk.} Ms. DeGette, aye.

2897 Mrs. Capps?

2898 Mrs. {Capps.} Aye.

2899 The {Clerk.} Mrs. Capps, aye.

2900 Mr. Doyle?

2901 Mr. {Doyle.} Yes.

2902 The {Clerk.} Mr. Doyle, aye.

2903 Ms. Schakowsky?

2904 [No response.]

2905 The {Clerk.} Mr. Gonzalez?

2906 Mr. {Gonzalez.} Aye.

2907 The {Clerk.} Mr. Gonzalez, aye.

2908 Mr. Inslee?

2909 Mr. {Inslee.} Aye.

2910 The {Clerk.} Mr. Inslee, aye.

2911 Ms. Baldwin?

2912 Ms. {Baldwin.} Aye.

2913 The {Clerk.} Ms. Baldwin, aye.

- 2914 Mr. Ross?
- 2915 Mr. {Ross.} Aye.
- 2916 The {Clerk.} Mr. Ross, aye.
- 2917 Mr. Weiner?
- 2918 Mr. {Weiner.} Aye.
- 2919 The {Clerk.} Mr. Weiner, aye.
- 2920 Mr. Matheson?
- 2921 Mr. {Matheson.} Aye.
- 2922 The {Clerk.} Mr. Matheson, aye.
- 2923 Mr. Butterfield?
- 2924 [No response.]
- 2925 The {Clerk.} Mr. Barrow?
- 2926 Mr. {Barrow.} Aye.
- 2927 The {Clerk.} Mr. Barrow, aye.
- 2928 Ms. Matsui?
- 2929 Ms. {Matsui.} Aye.
- 2930 The {Clerk.} Ms. Matsui, aye.
- 2931 Ms. Christensen?
- 2932 Dr. {Christensen.} Aye.
- 2933 The {Clerk.} Ms. Christensen, aye.
- 2934 Mr. Upton?
- 2935 The {Chairman.} Votes no. Other members? Mr. Stearns?
- 2936 Mr. {Stearns.} No.
- 2937 The {Clerk.} Mr. Stearns, no.

2938 The {Chairman.} Mr. Sullivan?

2939 Mr. {Sullivan.} No.

2940 The {Clerk.} Mr. Sullivan, no.

2941 The {Chairman.} Are there other members present wishing
2942 to vote? If not, the clerk will report the tally. Oh, Mr.
2943 Barton?

2944 Mr. {Barton.} No.

2945 The {Chairman.} Mr. Barton votes no.

2946 The {Clerk.} Mr. Barton, no.

2947 Mr. Chairman, on that, there are 18 ayes, 31 nays.

2948 The {Chairman.} Eighteen ayes, 31 nays. The amendment
2949 is not agreed to.

2950 At this point we are prepared to vote on final passage
2951 of the bill. We will ask for a recorded vote, and we will
2952 resume at 1:15 when this vote is done.

2953 Mr. {Waxman.} Mr. Chairman, before you do that, I am
2954 assuming you may win on this, and therefore if you do,
2955 pursuant to House Rule 11, clause 2-1, I request that all
2956 member have the requisite time to file supplemental minority
2957 or additional views to H.R. 1213.

2958 The {Chairman.} Without objection.

2959 The clerk will call the names.

2960 The {Clerk.} Mr. Barton?

2961 Mr. {Barton.} Aye.

- 2962 The {Clerk.} Mr. Barton, aye.
- 2963 Mr. Stearns?
- 2964 Mr. {Stearns.} Votes aye.
- 2965 The {Clerk.} Mr. Stearns, aye.
- 2966 Mr. Whitfield?
- 2967 Mr. {Whitfield.} Aye.
- 2968 The {Clerk.} Mr. Whitfield, aye.
- 2969 Mr. Shimkus?
- 2970 Mr. {Shimkus.} Aye.
- 2971 The {Clerk.} Mr. Shimkus, aye.
- 2972 Mr. Pitts?
- 2973 Mr. {Pitts.} Aye.
- 2974 The {Clerk.} Mr. Pitts, aye.
- 2975 Ms. Bono Mack?
- 2976 Mrs. {Bono Mack.} Aye.
- 2977 The {Clerk.} Mrs. Bono Mack, aye.
- 2978 Mr. Walden?
- 2979 Mr. {Walden.} Aye.
- 2980 The {Clerk.} Mr. Walden, aye.
- 2981 Mr. Terry?
- 2982 Mr. {Terry.} Aye.
- 2983 The {Clerk.} Mr. Terry, aye.
- 2984 Mr. Rogers?
- 2985 Mr. {Rogers.} Aye.

- 2986 The {Clerk.} Mr. Rogers, aye.
- 2987 Mrs. Myrick?
- 2988 Mrs. {Myrick.} Aye.
- 2989 The {Clerk.} Mrs. Myrick, aye.
- 2990 Mr. Sullivan?
- 2991 Mr. {Sullivan.} Aye.
- 2992 The {Clerk.} Mr. Sullivan, aye.
- 2993 Mr. Murphy?
- 2994 Mr. {Murphy.} Aye.
- 2995 The {Clerk.} Mr. Murphy, aye.
- 2996 Mr. Burgess?
- 2997 Dr. {Burgess.} Aye.
- 2998 The {Clerk.} Mr. Burgess, aye.
- 2999 Mrs. Blackburn?
- 3000 Mrs. {Blackburn.} Aye.
- 3001 The {Clerk.} Mrs. Blackburn, aye.
- 3002 Mr. Bilbray?
- 3003 Mr. {Bilbray.} Aye.
- 3004 The {Clerk.} Mr. Bilbray, aye.
- 3005 Mr. Bass?
- 3006 Mr. {Bass.} Aye.
- 3007 The {Clerk.} Mr. Bass, aye.
- 3008 Mr. Gingrey?
- 3009 Dr. {Gingrey.} Aye.

3010 The {Clerk.} Mr. Gingrey, aye.
3011 Mr. Scalise?
3012 Mr. {Scalise.} Aye.
3013 The {Clerk.} Mr. Scalise, aye.
3014 Mr. Latta?
3015 Mr. {Latta.} Aye.
3016 The {Clerk.} Mr. Latta, aye.
3017 Mrs. McMorris Rodgers?
3018 Mrs. {McMorris-Rogers.} Aye.
3019 The {Clerk.} Mrs. McMorris-Rogers, aye.
3020 Mr. Harper?
3021 Mr. {Harper.} Aye.
3022 The {Clerk.} Mr. Harper, aye.
3023 Mr. Lance?
3024 Mr. {Lance.} Aye.
3025 The {Clerk.} Mr. Lance, aye.
3026 Mr. Cassidy?
3027 Dr. {Cassidy.} Aye.
3028 The {Clerk.} Mr. Cassidy, aye.
3029 Mr. Guthrie?
3030 Mr. {Guthrie.} Aye.
3031 The {Clerk.} Mr. Guthrie, aye.
3032 Mr. Olson?
3033 Mr. {Olson.} Aye.

3034 The {Clerk.} Mr. Olson, aye.
3035 Mr. McKinley?
3036 Mr. {McKinley.} Aye.
3037 The {Clerk.} Mr. McKinley, aye.
3038 Mr. Gardner?
3039 Mr. {Gardner.} Aye.
3040 The {Clerk.} Mr. Gardner, aye.
3041 Mr. Pompeo?
3042 Mr. {Pompeo.} Aye.
3043 The {Clerk.} Mr. Pompeo, aye.
3044 Mr. Kinzinger?
3045 Mr. {Kinzinger.} Aye.
3046 The {Clerk.} Mr. Kinzinger, aye.
3047 Mr. Griffith?
3048 Mr. {Griffith.} Aye.
3049 The {Clerk.} Mr. Griffith, aye.
3050 Mr. Waxman?
3051 Mr. {Waxman.} No.
3052 The {Clerk.} Mr. Waxman, no.
3053 Mr. Dingell?
3054 Mr. {Dingell.} No.
3055 The {Clerk.} Mr. Dingell, no.
3056 Mr. Markey?
3057 [No response.]

3058 The {Clerk.} Mr. Towns?
3059 [No response.]
3060 The {Clerk.} Mr. Pallone?
3061 Mr. {Pallone.} No.
3062 The {Clerk.} Mr. Pallone, no.
3063 Mr. Rush?
3064 Mr. {Rush.} No.
3065 The {Clerk.} Mr. Rush, no.
3066 Ms. Eshoo?
3067 Ms. {Eshoo.} No.
3068 The {Clerk.} Ms. Eshoo, no.
3069 Mr. Engel?
3070 [No response.]
3071 The {Clerk.} Mr. Green?
3072 Mr. {Green.} No.
3073 The {Clerk.} Mr. Green, no.
3074 Ms. DeGette?
3075 Ms. {DeGette.} No.
3076 The {Clerk.} Ms. DeGette, no.
3077 Mrs. Capps?
3078 Mrs. {Capps.} No.
3079 The {Clerk.} Mrs. Capps, no.
3080 Mr. Doyle?
3081 Mr. {Doyle.} No.

- 3082 The {Clerk.} Mr. Doyle, no.
- 3083 Ms. Schakowsky?
- 3084 Ms. {Schakowsky.} No.
- 3085 The {Clerk.} Ms. Schakowsky, no.
- 3086 Mr. Gonzalez?
- 3087 Mr. {Gonzalez.} No.
- 3088 The {Clerk.} Mr. Gonzalez, no.
- 3089 Mr. Inslee?
- 3090 Mr. {Inslee.} No.
- 3091 The {Clerk.} Mr. Inslee, no.
- 3092 Ms. Baldwin?
- 3093 Ms. {Baldwin.} No.
- 3094 The {Clerk.} Ms. Baldwin, no.
- 3095 Mr. Ross?
- 3096 Mr. {Ross.} No.
- 3097 The {Clerk.} Mr. Ross, no.
- 3098 Mr. Weiner?
- 3099 Mr. {Weiner.} No.
- 3100 The {Clerk.} Mr. Weiner, no.
- 3101 Mr. Matheson?
- 3102 Mr. {Matheson.} No.
- 3103 The {Clerk.} Mr. Matheson, no.
- 3104 Mr. Butterfield?
- 3105 Mr. {Butterfield.} No.

3106 The {Clerk.} Mr. Butterfield, no.
3107 Mr. Barrow?
3108 Mr. {Barrow.} No.
3109 The {Clerk.} Mr. Barrow, no.
3110 Ms. Matsui?
3111 Ms. {Matsui.} No.
3112 The {Clerk.} Ms. Matsui, no.
3113 Ms. Christensen?
3114 Dr. {Christenson.} No.
3115 The {Clerk.} Ms. Christenson, no.
3116 Mr. Upton?
3117 The {Chairman.} Votes aye.
3118 Are there members wishing to vote? I think everybody is
3119 here. The clerk will report the tally.
3120 The {Clerk.} Mr. Chairman, on that, there were 31 ayes,
3121 20 nays.
3122 The {Chairman.} I am sorry. Say that again.
3123 The {Clerk.} Thirty-one ayes, 20 nays.
3124 The {Chairman.} Thirty-one ayes, 20 nays. The bill is
3125 agreed to, and at this point we will recess until 1:15.
3126 [Recess.]

|

3127 H.R. 1214

3128 The {Chairman.} I note that we have got enough members
3129 to resume. So at this point we are prepared to call up H.R.
3130 1214 and ask the Clerk to report the title of the bill.

3131 The {Clerk.} H.R. 1214 To Repeal Mandatory Funding for
3132 School Based Healths Under Construction.

3133 [H.R. 1214 follows:]

3134 ***** INSERT 8 *****

|
3135 The {Chairman.} Without objection, the first reading of
3136 the bill is dispensed with. So ordered. Are there
3137 amendments to the bill? Mrs. Capps? For what purposes does
3138 the gentlelady from California seek recognition?

3139 Mrs. {Capps.} Well, I was going to strike the last word
3140 to speak against the bill in general. Is that possible?

3141 The {Chairman.} You can. I will recognize the
3142 gentlelady for 5 minutes.

3143 Mrs. {Capps.} I appreciate that, Mr. Chairman. Here we
3144 are yet again. Today's markup is another effort by this
3145 committee to do everything it can to take away access to
3146 health care for thousands of Americans including our
3147 children. As we learned during our subcommittee's work on
3148 the subject, many of my Republican colleagues agree that
3149 school based health centers provide comprehensive and easily
3150 accessible preventive and primary healthcare services to
3151 millions of students nationwide; services that keep students
3152 healthy, in school, and learning; services that are often the
3153 only source of healthcare for these children in adolescence.
3154 And yet, my colleagues would rather cater to the Republican
3155 leadership's obsession with repealing healthcare than expand
3156 these vital services that they even support.

3157 My colleagues say they believe in school based health

3158 centers, but that we can't afford to fund everything. And
3159 yet just last week they voted to spend millions of dollars on
3160 a failed D.C. Private School Voucher Program over the
3161 objection of D.C.'s only-own elected officials which is why I
3162 cannot understand why this program which is supported by
3163 evidence in improving the lives of children who participate
3164 is on the chopping block. To be clear, eliminating the funds
3165 that would allow communities across the nation to benefit
3166 from access to school based health centers is taking away a
3167 guaranteed source of care from our children.

3168 In fact, as I mentioned before interest and need in
3169 creating new school based health centers is so great that
3170 this year alone HHS has received 350 applications for these--
3171 this funding? These requests came from 46 different states,
3172 hundreds of congressional districts including the districts
3173 of 17 of our Republican colleagues on this committee. That
3174 means that applicants in 17 of our Republican districts have
3175 taken the time and resources to compile their applications,
3176 to submit them, and are expecting to hear if their projects
3177 can move forward. And my colleagues are so eager to cater to
3178 the Republican leadership's failed obsession with repealing
3179 the Affordable Care Act that they will vote to rescind money
3180 applied for by centers in their very districts.

3181 Let me be clear, 350 applicants are ready to expand

3182 school based health care centers, service centers today but
3183 this bill will prevent any of them from doing so. Nearly
3184 eight million children in our country still lack reliable
3185 access to healthcare services. As I said before, school
3186 based health centers are often the only source of healthcare
3187 for these children in adolescents. These children can't wait
3188 for our Republican colleagues promise to repeal and maybe one
3189 day Congress will get around to replacing what was cut in
3190 this rush to repeal.

3191 Our school kids need access to the care that school
3192 based health centers provide and they need it now. The
3193 program the Republican majority is trying to cut would fund
3194 at a minimum 200 centers across the country. These centers
3195 would not only increase access to healthcare for students but
3196 would create jobs: at least 200 construction projects for
3197 hard working Americans. During these tough economic times
3198 these are exactly the kind of shovel ready projects we should
3199 be funding, not eliminating.

3200 School based health centers construction is a great
3201 economic stimulus and it will provide incredibly important
3202 new services as well. It is a win for American workers and a
3203 win for American children. Instead, if this bill passes none
3204 of them will receive funding and no jobs will be created.

3205 And I want to clear something up. Some of my colleagues

3206 state that school based health centers were eligible for \$1.5
3207 billion in Recovery Act dollars for construction renovation
3208 equipment. They used this as an excuse why their support of
3209 this bill does not indicate that they are against the school
3210 based health center program. What they fail to mention is
3211 that these funds were only made available to FQHC's health
3212 care centers meaning 75 percent of school based health
3213 centers could not even apply. This was not a drafting error
3214 of the Recovery Act. It was money for a completely separate
3215 program, pure and simple and any kind of depiction otherwise
3216 is false. Furthermore, the School Based Health Centers
3217 Program was not even authorized until the Affordable Care Act
3218 became law. So the funds we are voting to eliminate today
3219 are not duplicative. They are the first and only federal
3220 funding specifically for school based health centers
3221 construction. I request unanimous consent to submit a letter
3222 from the--for the record from the National Association of
3223 School Based Health Centers opposing H.R. 1214 which is
3224 signed by Representatives across the station--the nation
3225 including Representatives in 37 states. I think it is a
3226 shame that school based health centers have been caught up in
3227 the Republican leadership's repeal frenzy. I think it is a
3228 disservice to our children, to our communities, and I urge a
3229 no vote on this short sighted legislation. I yield back the

3230 balance of my time.

3231 The {Chairman.} Gentlelady yields back. Are there
3232 other amendments or other members wishing to offer amendment
3233 or wishing to strike the last word? Gentleman from New
3234 Jersey, Mr. Pallone is recognized for what purpose?

3235 Mr. {Pallone.} Are we on an amendment, Mr. Chair?

3236 The {Chairman.} No, no.

3237 Mr. {Pallone.} We are?

3238 The {Chairman.} Not yet.

3239 Mr. {Pallone.} Okay.

3240 The {Chairman.} See, Mrs. Capps did--recognize the
3241 gentleman from New York to strike the last word.

3242 Mr. {Towns.} Mr. Chairman, I am strongly opposed. I
3243 strongly oppose H.R. 1214. This bill would strike Section
3244 4101(a) of the Affordable Care Act which provides critical
3245 funds for the construction of school based health centers.

3246 As I indicated during our subcommittee markup on this
3247 same bill, this section was included in the Affordable Care
3248 Act to increase access to clinical preventative services. I
3249 have long been a strong supporter of good work that school
3250 based health centers are doing. With six of these centers in
3251 my district I can certainly attest to the important role that
3252 they play in providing critical access to care. I assure you
3253 that if every school could have one they would open a school

3254 based health center immediately.

3255 Many students who receive care at these centers would
3256 otherwise not be in a position to do so. Frankly, I said
3257 this before and I will say this again and again and again. I
3258 believe that we should be constructing more of these centers
3259 rather than cutting their funding. I urge my colleagues to
3260 oppose H.R. 1214. Mr. Chairman, on that note I yield back
3261 the balance of my time, but before I do that I also at the
3262 appropriate time would like to offer an amendment. I yield
3263 back.

3264 The {Chairman.} Thank you. Gentleman from--let me go
3265 to this side, Dr. Burgess for 5 minutes.

3266 Dr. {Burgess.} Well--

3267 The {Chairman.} For what purpose does the gentleman
3268 from Texas seek recognition?

3269 Dr. {Burgess.} It would be to strike the last word.

3270 The {Chairman.} Gentleman is recognized for 5 minutes.

3271 Dr. {Burgess.} Thank you, Mr. Chairman, and I just feel
3272 obligated to speak on the bill itself before we get to the
3273 amendment process because that seems to be the direction we
3274 are going. Look, this is the perfect metaphor for what is
3275 wrong with the Patient Protection Affordable Care Act. You
3276 are funding the bricks and mortar, the construction of a
3277 clinic with a nice exam bed and a blood pressure cuff and you

3278 got no doctor, no nurse. What is wrong with this picture?
3279 This is what-this is what this bill, this law gets you. You
3280 build things that are going to be nice in someone's district,
3281 but you are not taking care of anyone.

3282 Now that is my objection to this part of the Patient
3283 Protection Affordable Care Act. Section 4101(a) specifically
3284 says that you are going to provide \$50 million in mandatory
3285 spending, you got to spend it. You have got no choice--
3286 mandatory spending for construction of school based health
3287 centers every year through 2013. 4101(b) is to staff these
3288 centers that are built. Now that might be good in as far as
3289 it goes but that is discretionary and how many dollars, how
3290 many dollars did President Obama put in his budget for the
3291 year 2012? Zero. So you are going to have a clinic and you
3292 are not going to have a doctor and you are not going to have
3293 a nurse.

3294 Now, I know, I know a few subscribe to the theory of if
3295 you build it they will come. Maybe some doctors and nurses
3296 will show up at some point in some future budget and it is
3297 the fantasy that we can all subscribe to, but we are dealing
3298 with reality today and the reality is, I will even point it
3299 out, forty-two cents out of every dollar that is spent is
3300 borrowed. And half of that borrowed money comes from foreign
3301 countries. Now for people--

3302 Mrs. {Capps.} Will the gentleman yield?

3303 Dr. {Burgess.} No, I will not yield. From 2008 to
3304 2011, health centers received \$2 billion in funds each year
3305 in discretionary spending. Under the Patient Protection and
3306 Affordable Care Act they received 11 billion in
3307 authorizations. In addition, 1.5 billion was included in the
3308 stimulus that could have been used--could have been used for
3309 the construction of school based centers. There was not a
3310 complete unmet need and if you would like to talk about those
3311 school based centers that would not qualify this money we can
3312 do that at the normal time and the normal place in this
3313 committee because we are after all an authorizing committee.
3314 We should welcome the chance to bring this money back under
3315 the authorization side. Mr. Chairman, I don't think the
3316 committee is in order.

3317 The {Chairman.} Yeah. Gentleman from Texas has the
3318 time.

3319 Dr. {Burgess.} The 150 million in grants under 4101(a)
3320 are for construction only and there is an expressed
3321 prohibition from these funds being used to provide health
3322 services. Applicants have to say that they will find a way
3323 to provide the funds but what if they can't? What if the
3324 plans fall through? What happens then? What happens to the
3325 land they bought? What happens to the mortar they have got

3326 mixed up? What happens? We will have allowed schools to
3327 purchase land to construct facilities that will not be able
3328 to deliver one tongue depressors worth of care. There is a
3329 smarter way to tackle this issue and I am open to having that
3330 discussion. All my legislation does is rescind any unspent
3331 funds that are mandatory and return them to the treasury.

3332 Now there are certain times where it is reasonable to
3333 put things on autopilot. I don't completely disagree with
3334 that. But in this case does it make good sense? Are we
3335 being good stewards of the taxpayer's dollar? I am more than
3336 happy to work with anyone in this committee on either side of
3337 the dais to see what construction needs there are for school
3338 based clinics and to ensure that care is delivered.

3339 I will also point out that Section 4101(b) of the
3340 Patient Protection and Affordable Care Act created a new
3341 Discretionary Grant Program for school based centers but this
3342 grant program requires them to use funding to provide
3343 healthcare services. That would be a logical place to start
3344 to discuss any need for new construction funding. But
3345 providing a post-dated check to our favorite projects in
3346 favorite districts is really not the answer and it is not the
3347 work that the American people sent us here to do.

3348 I am not against health centers. I want to do more in
3349 this realm, but providing mandatory spending to construct

3350 facilities without adequate safeguards--it is irresponsible.
3351 And I would just point out the Secretary of Health and Human
3352 Services when she sat at this very table I asked her the
3353 question: why would you do this? Why would you make it
3354 mandatory to build the clinic and discretionary to fund--to
3355 staff the clinic and then zero out those discretionary
3356 dollars in the President's budget? And she looked back at me
3357 and said well, I didn't write the legislation. I will submit
3358 that no one in this committee did either.

3359 We are left with an impossible task. This thing was the
3360 Senate's bill. It was passed to get them out of town before
3361 a snowstorm on Christmas Eve. That is why we have got to
3362 deal with all of these inconsistencies within the
3363 legislation. This thing was written by the staff of a Senate
3364 Finance Committee. No member of this committee actually
3365 participated in the writing of this bill, this law.

3366 It is a travesty that this is what we are here talking
3367 about today, but nevertheless that is what we have to do.
3368 But you know what? Why is it that we have to fund this with
3369 mandatory spending, but if we are going to build a new VA
3370 clinic we have got to go through the normal authorization
3371 process? This is a step toward us becoming responsible and
3372 claiming our useful activity as an authorizing committee and
3373 I urge support of the legislation.

3374 The {Chairman.} Gentleman's time is expired. For what
3375 purpose does the Gentleman from California Mr. Waxman seek
3376 recognition?

3377 Mr. {Waxman.} Strike the last word.

3378 The {Chairman.} Gentleman is recognized for 5 minutes.

3379 Mr. {Waxman.} This is not a patronage thing. People
3380 come in with applications if there are funds available to
3381 construct a school based clinic. One of the requirements
3382 would be to show that they are capable of running it--they
3383 will have the personnel to run it. Now as I understand the
3384 gentleman from Texas who just spoke, he was complaining that
3385 we are going to build clinics but we are not going to have
3386 personnel there and therefore we ought to put money into
3387 training. But one of the other bills is to take away the
3388 money for training of new health providers like doctors. If
3389 he wanted to add money--if I suggested to add money to this
3390 bill, not just to use the money for construction but for
3391 training people who will serve in school based clinics I am
3392 sure I will be told well, we don't have the money for that.
3393 We are borrowing 40 cents of every dollar, dah, dah, dah,
3394 dah, which we have to do because we are not asking the upper
3395 income people to pay their fair share of taxes and we are not
3396 doing what is necessary to get the economy moving so that
3397 people will go to work and pay taxes.

3398 So I think we get hit either way. The fact of the
3399 matter is school based health centers are true success
3400 stories. This isn't something that has never happened
3401 before. They provide primary care, mental health, mental
3402 health that is not only needed in the schools, but in the
3403 Congress--and dental health services. But in the school
3404 based setting it is for vulnerable children across the
3405 country.

3406 Multiple studies have found these programs are cost-
3407 effective investment of public resources. If you want to add
3408 that the money could not only just go for construction but
3409 for personnel, fine. But I don't hear anybody seriously
3410 suggesting that. And then to say well, we are not going to
3411 put money into these clinics at all doesn't make sense or to
3412 make it an authorization. But there is no such thing as an
3413 authorization for it. If this bill passes there is nothing
3414 that would allow any funding of school based clinics that I
3415 know of. So I just think that the argument from the
3416 gentleman from Texas left me unconvinced, and I would be
3417 pleased to yield to anybody--

3418 Mr. {Pallone.} Will the gentleman yield?

3419 Mr. {Waxman.} Yes, Mr. Pallone. Yield.

3420 Mr. {Pallone.} I just want to support what you said. I
3421 mean at one point Dr. Burgess said that the clinics were

3422 mandatory. Nobody is forcing anybody to build the clinics.
3423 My understanding is that there are a bunch of clinics that
3424 are shovel ready, already been applied for, ready to go just
3425 waiting for the funding. So this notion that somehow we are
3426 forcing someone to build a school based clinic it is just--
3427 nothing could be further from the truth. There is an
3428 outstanding demand for these. They are ready to go.

3429 Mr. {Waxman.} There will be others who will want to
3430 come in and ask for funding as well once they know that there
3431 is mandatory funding available. They don't have to wait and
3432 see whether from year to year whether there is an
3433 appropriation or whether the Government's closed down. That
3434 there is going to be a real funding to make sure that schools
3435 or school districts could come in and apply for money to
3436 build a school based clinic. I yield.

3437 Mr. {Pallone.} Right, I mean essentially, Mr. Waxman,
3438 in my understanding that all we are doing with this amendment
3439 is putting off what is about to happen. In other words,
3440 these places are ready to go. They are looking for money.
3441 They are all approved--not all of them but a significant
3442 number of them are approved and the notion that somehow there
3443 aren't you know personnel that are going to fill them--in
3444 order when they apply they indicate that they have personnel.
3445 And as Mr. Waxman said you I mean you have another bill

3446 coming up here. I think it is 1216 that provides a training
3447 for community--for physicians, nurses, exactly that. So you
3448 know what are we talking about here? The most important
3449 thing I think you have to understand is that you save money
3450 with these school based clinics. It results in lower
3451 emergency room usage, hospitalization, Medicaid costs are
3452 saved. There is a patient seen in school based health
3453 centers costs Medicaid an average of \$30.40 less than the
3454 comparable non-school based health center patient. So we are
3455 saving money. Nobody is forcing anybody to do anything. I
3456 am just--I am not trying to take away, Dr. Burgess, but I
3457 just don't understand the whole idea that somehow we are
3458 forcing these down somebody's throat. People are waiting for
3459 these to happen because they know it saves money, it is going
3460 to cover people that right now are not getting primary care.
3461 I yield back to Mr. Waxman.

3462 Mr. {Waxman.} Gentleman, thank you for yielding back.
3463 I want to yield to any of my democratic colleagues that have
3464 an amendment that they want to offer because we have got to
3465 get amendments on the table. We can debate them and if we
3466 can't pass them then I hope members on both sides of the
3467 aisle would reject this bill. Anybody wish to be recognized?
3468 Mr. Dingell, I yield to you for the--whatever purpose you
3469 seek recognition.

3470 Mr. {Dingell.} Be happy to proceed on long time it
3471 doesn't matter all that much.

3472 The {Chairman.} Gentleman's time has expired from
3473 striking the last word. We would really like to proceed with
3474 amendments at this point. Are there any members seeking to
3475 offer an amendment?

3476 Mr. {Dingell.} I have a fine amendment.

3477 The {Chairman.} Gentleman from Michigan is recognized
3478 to offer an amendment.

3479 Mr. {Dingell.} Thank you, Mr. Chairman. The amendment
3480 is at the Clerk's desk.

3481 The {Clerk.} Which number, sir?

3482 Mr. {Dingell.} Number one.

3483 The {Clerk.} An amendment to H.R. 1214 offered by Mr.
3484 Dingell.

3485 [The amendment follows:]

3486 ***** INSERT 9 *****

|
3487 Mr. {Dingell.} I ask unanimous consent the reading be
3488 dispensed with.

3489 Mrs. {Myrick.} Mr. Chairman?

3490 The {Chairman.} I would recognize the gentlelady for
3491 two seconds to--

3492 Mrs. {Myrick.} It is to reserve a point of order.

3493 The {Chairman.} --reserve a point of order. Mrs.
3494 Myrick reserves a point of order. The Clerk has read the
3495 title. The staff will dispense--disperse the amendments and
3496 the gentleman is recognized for 5 minutes in support of his
3497 amendment.

3498 Mr. {Dingell.} I thank you, Mr. Chairman. Before I
3499 begin I would like to observe that I yield to no man in my
3500 distaste for the practices of the United States Senate. And
3501 if there is a defect in the health bill, if there is a high
3502 degree of probability that most of the defects there are
3503 related to mistakes made back in 1789 when the Constitution
3504 was concluded by a compromise and not being the Senate. In
3505 any event, it is my hope that we can address the problems of
3506 the Health Care bill here by addressing the real concerns we
3507 have, try to amend the bill in ways that accomplishes our
3508 purpose, and try to see that there is really a wonderful
3509 opportunity here for us to do good things including saving

3510 important progress made during the last Congress.

3511 Now, until the Affordable Care Act, school based centers
3512 had never been an authorized program. But there are--they
3513 are now and the amendment simply says that the bill does not
3514 go into effect and terminate the funding for these school
3515 based centers until such time as all of our young people who
3516 are under 21 years of age have health insurance coverage.

3517 One of our big problems is our kids are not growing up
3518 healthy. There are all kinds of troubles, diabetes, weight,
3519 including things like cancer, heart circulatory difficulties,
3520 and other things. Kids go to school some distance from their
3521 homes at --from their home at large consolidated schools and
3522 the end result is--of this is that they are a long way from
3523 home. Parents have to worry about the health of the kids
3524 particularly those who happen to have problems with their
3525 health.

3526 Now having said this, this is probably one of the best
3527 and cheapest ways of ensuring and protecting the health of
3528 our kids because there is almost invariably a nurse on duty
3529 there. And if the child becomes sick it is almost certain
3530 that this sickness will be properly addressed rather than
3531 having to ferry the child to a hospital some distance away
3532 with all the attended difficulties that that carries.

3533 Our purpose here is to be with this is to see to it that

3534 we do have this kind of service available on the basis of
3535 need. There is no great cost associated with this and if we
3536 have seen that the Senate bill has a defect, I will be happy
3537 to match you defect for defect by showing how--where other
3538 similar or worse defects can be found which is one of the
3539 reasons I commend my Republican colleagues for the idea that
3540 maybe we ought to go after some of these amendments and
3541 correct them, but not by repealing parts of that legislation.

3542 Now, these centers offer critical and essential health
3543 services to our kids and to the communities. They provide
3544 high quality health care in convenient and accessible
3545 locations to all children and adolescents at their schools.
3546 There are some 1900 of them across the country. Some 90 or
3547 more in my home state of Michigan including in your district,
3548 Mr. Chairman, as well as in mine and they serve over 2
3549 million children and adolescents and until more operating
3550 funds are available, it is my hope that members on both sides
3551 of the aisle will work with me to try and see to it that we
3552 have the funding needed for these particular kinds of
3553 programs.

3554 In any event, if the legislation is--that is before us
3555 is adopted with the amendment, 100 percent of individuals in
3556 age groups under 21 will have to health insurance coverage
3557 before we can see the system cancelled. This is a very solid

3558 investment on the part of our country. It will put money
3559 into healthcare for our kids in a way in which--where they
3560 will get it particularly for families of kids who are of
3561 limited means. Money will be then available to the kids to
3562 have healthcare in school which they do not now get.

3563 I would hope my colleagues would be supportive of me in
3564 this amendment and supportive if the amendment fails in
3565 rejecting the legislation which I think is dangerous, not
3566 well thought out, and probably is bottom on some outrage
3567 about the way the Senate handled this bill. I would observe
3568 that we will find lots and lots of instances where the Senate
3569 handles legislation poorly. With that I yield the balance of
3570 my time and I thank you for your courtesy, Mr. Chairman.

3571 The {Chairman.} Gentleman yields back his time. Chair
3572 would recognize Dr. Burgess for 5 minutes in opposition to
3573 the amendment.

3574 Dr. {Burgess.} Actually, I am in favor of the
3575 amendment. No, I am in favor of the other log--bill. I beg
3576 your pardon. But you know as the Chairman Emeritus, Mr.
3577 Dingell, I certainly value the service that you have provide
3578 to the country. As I told you before I treasure every day
3579 that I have the privilege of serving on the committee with
3580 you. I should point out to you that by--and we had the
3581 fellow here from the CBO, Dr. Elmendorf just the other day

3582 and he will tell you that the Patient Protection and
3583 Affordable Care Act will not accomplish 100 percent coverage.
3584 That, in fact, is part of the published CBO interpretation of
3585 the Patient Protection and Affordable Care Act.

3586 But more importantly, this bill doesn't have anything to
3587 do with coverage. It has to do with mandatory spending for
3588 the construction of school based health centers. So I just
3589 wonder why we continue to confuse the issue of coverage and
3590 access. Coverage does not always equal access. And this
3591 provision of the Patient Protection and Affordable Care Act
3592 only accounts for the building of school based health
3593 centers.

3594 While a fully staffed health center might improve access
3595 if the population is in need of services, this amendment does
3596 not address the fact that as constructed 4101(a) cannot
3597 provide services and there is no way to recover the funds if
3598 the land is purchased, the bricks are purchased, the mortar
3599 is mixed up, and the plan to provide services subsequently
3600 dries up as it might for example if a President refused to
3601 provide any funding in the discretionary budget because after
3602 all it is the discretionary part of the President's budget
3603 that will pay for the staffing of these clinics.

3604 If access to care was primary reason for the inclusion
3605 of this section why did it not include staffing of the

3606 centers just like the construction? Section 4101(b) of the
3607 Patient Protection and Affordable Care Act authorized a
3608 separate Discretionary Grant Program to provide care at the
3609 clinics. This program was not provided mandatory funding
3610 providing funds for construction without funds to staff and
3611 provide health services is the kind of thing you can say
3612 about it--it is incoherent. The President's budget did not
3613 request funding for grants for that section that actually
3614 provides the care. When addressing the access to care issue
3615 which was a conversation I am willing to have on the
3616 discretionary side, why aren't we focusing more on the things
3617 that will actually end up delivering the care to the people
3618 who need the services?

3619 Now, the President of the United States when he gave his
3620 State of the Union Address said he was willing to talk about
3621 doing things that would improve the Patient Protection and
3622 Affordable Care Act. I am of the opinion that this is so
3623 fatally flawed that it cannot be saved. However, I will take
3624 the President at his word that he is willing to work with
3625 anyone on either side of the aisle to try to improve the
3626 product. In fact, I think we heard that just today the
3627 Senate passed the legislation to remove the dreaded 1099
3628 provision, the paperwork provision that was going to drive
3629 people crazy. So maybe there is some hope.

3630 But at the same time, I can't help the President if
3631 every time I come forward with an idea I am subject to all
3632 these ad hominem attacks. I mean, do you want help or not?
3633 I am trying to help you. This is really incoherent policy.
3634 We fund with mandatory funding the construction of the
3635 clinics, discretionary funding the staffing of the clinics,
3636 and oh by the way no money for next year for staffing the
3637 clinics. The kind of thing you can say about that is it is
3638 incoherent. I would also say that, you know I feel sorry for
3639 my friends on the other side of the dais. They are stuck
3640 with defending the language of 3590 which was never their
3641 language. Language--

3642 Mrs. {Myrick.} Would the gentleman yield me just a
3643 second? Would you give me just 2 seconds, please, just so I
3644 can withdraw my objection to point of order?

3645 Dr. {Burgess.} Please. Yes, I would be happy to yield.

3646 Mrs. {Myrick.} Thank you. Yes, Mr. Chairman.

3647 Mr. {Pitts.} [Presiding] The gentlelady withdraws her
3648 point of order?

3649 Mrs. {Myrick.} Yes, I withdraw my point of order.

3650 Dr. {Burgess.} This language mandatory language for
3651 construction of school based health centers was not in a
3652 chart 3,200 which for as bad as it was, was a product of this
3653 committee. If it was so important to have it drafted just

3654 that way, why was this not part of our discussion in July of
3655 2009? I yield back the balance of my time.

3656 Mr. {Pallone.} Will the gentleman yield the 20 minutes?
3657 I mean 20 seconds? Dr. Burgess, I don't understand. You
3658 said that this bill will not provide coverage. The school
3659 based clinics are providing access to care for people. It
3660 may not be insurance, but what does it matter as long as
3661 people are getting primary care?

3662 Dr. {Burgess.} Reclaiming my time. There is no
3663 coverage if you have a clinic built and an exam table but no
3664 doctor or no nurse. No treatment can be rendered--the
3665 treatment does not just come from heaven in a lightning bolt.
3666 The treatment has to be administered by a person unless you
3667 repealed that in this, too, and I somehow missed it.

3668 Mr. {Pitts.} The gentleman's time has expired. Is
3669 there further discussion of the amendment? If there is no
3670 further discussion the vote occurs on the amendment.

3671 Dr. {Cassidy.} One question, please.

3672 Mr. {Pitts.} We have gentleman, Dr. Cassidy is
3673 recognized.

3674 Dr. {Cassidy.} Just for my edification, this speaks of
3675 folks 21 years of age or younger, but school children are 19
3676 or younger at the most. Was there a reason that 21 was
3677 chosen as opposed to 18 or 19 or 17?

3678 Mr. {Pallone.} If I--if the gentleman could yield. I
3679 mean--

3680 Dr. {Cassidy.} In my school districts you have kids
3681 that are 20 and 21. It all depends on the school district.

3682 Dr. {Cassidy.} Is that New Jersey? Is that called
3683 eighth grade?

3684 Mr. {Pallone.} No, well, I mean, you know you guys are
3685 getting out of hand now. I mean, look the point is you have
3686 kids in school that go up to age 21, so what is the big deal?
3687 We are just trying to cover people that are in school. They
3688 have to be in school.

3689 Mr. {Pitts.} Is there further discussion of the
3690 amendment? Gentleman--

3691 Mr. {Dingell.} Mr. Chairman?

3692 Mr. {Pitts.} Gentleman from Michigan.

3693 Mr. {Dingell.} And I appreciate the question raised.
3694 This matches up with the requirements of Medicaid. And so we
3695 have the same rule here with regard to age that we would with
3696 regard to Medicaid and the age of children.

3697 Dr. {Cassidy.} So SCHIP, just so I know, SCHIP is
3698 available for 21 or younger and so this corresponds with
3699 SCHIP eligibility? I am asking in honesty. I just don't
3700 know.

3701 Mr. {Dingell.} If the gentleman would yield--

3702 Dr. {Cassidy.} I yield.

3703 Mr. {Dingell.} --I believe the answer to that question
3704 is yes.

3705 Dr. {Cassidy.} Okay. And Mrs. Capps, I yield to you.

3706 Mrs. {Capps.} Thank you. I am not sure about every
3707 state, but in the State of California, students with
3708 disabilities are served at the public school system through
3709 age 21.

3710 Dr. {Cassidy.} Okay.

3711 Mr. {Rush.} Will the gentleman yield?

3712 Dr. {Cassidy.} I will.

3713 Mr. {Rush.} Now, Mr. Chairman--

3714 Mr. {Pitts.} Gentleman from Illinois is recognized.

3715 Mr. {Rush.} And may I--I have a similar amendment, but
3716 I am just kind of stunned by the type of discussion and
3717 argument that is being presented by my friend from Texas. I
3718 mean I represent a district that is very poor. I work with
3719 students that have literally no access to medical care and
3720 one of the primary reasons or places, rather that they are
3721 able to secure any type of medical attention. And put it--
3722 really the best way for them to get the medical attention is
3723 through school based health clinics. These provide a vista,
3724 an opportunity, an avenue into further complications and
3725 problems that they may have at home.

3726 Getting a student in a school based health clinic that
3727 might have suffered from chronic headaches may reveal some
3728 other issues that are preventing--that prevents the student
3729 from getting quality education or from becoming a problem in
3730 school. And it is just kind of--and this don't make sense to
3731 me for the argument to be presented that if you don't build
3732 it then you don't need it. Well, if I think if you build it
3733 they will come. And I would just invite the gentleman from
3734 Texas to build one and watch the stampede to the health
3735 center because it is needed in places in this nation.

3736 Every citizen in this nation don't have access to
3737 healthcare. Don't you get it? Where will you get it? This
3738 is an amendment that speaks loudly and speaks powerfully to
3739 those in our nation who are less fortunate and who are
3740 disadvantaged. And I think that this is a great amendment
3741 and I have a similar amendment that I will be presenting at
3742 some point later in this hearing. I yield back.

3743 Mr. {Pitts.} Chair thanks the gentleman. Is there
3744 further discussion of the amendment? If there is no further
3745 discussion the vote occurs on the amendment. All those in
3746 favor shall signify by saying aye. Those opposed, no. The
3747 nays have it and the amendment is not agreed to. Are there
3748 further amendments? The gentlelady from California is
3749 recognized to offer--

3750 Mrs. {Capps.} Thank you, Mr. Chairman. I have an
3751 amendment at the desk.

3752 {Voice.} Mr. Chairman, may I reserve a point of order?

3753 Mr. {Pitts.} The Clerk will report the amendment and
3754 the gentlelady reserves a point of order.

3755 The {Clerk.} Amendment number two?

3756 Mrs. {Capps.} Yes.

3757 The {Clerk.} An amendment offered by Mrs. Capps.

3758 [The amendment follows:]

3759 ***** INSERT 10 *****

|
3760 Mr. {Pitts.} The reading of the amendment is dispensed
3761 with and the gentlelady's recognized for five minutes in
3762 support of her amendment.

3763 Mrs. {Capps.} Thank you, Mr. Chairman. As we sit here
3764 today, I can't help but think about what the rhetoric being
3765 thrown around here in this committee really means to the
3766 health of the young people at home in our communities. For
3767 example, barely two-thirds of teenagers receive a wellness
3768 checkup each year. That means that nearly a third of our
3769 young people are missing a key preventive health visit that
3770 could spot problems early; intervene before more chronic
3771 illness arise.

3772 We all agree that we would like to see our children be
3773 healthier and the Affordable Care Act seeks to rectify this
3774 situation in part by expanding the reach of school based
3775 health centers. Checkups that help detect lifelong
3776 challenges for our children such as obesity, diabetes, and
3777 asthma. Detecting these illnesses early we can help improve
3778 the quality of life of a child and save on healthcare costs
3779 for a whole lifetime. In fact, the fact that only two thirds
3780 of our students have access to these checkups is simply not
3781 good enough in this country.

3782 Students need access to these critical checkups and

3783 school based health centers are our safety net for providing
3784 them. Without the money to build the centers, thousands of
3785 children will go without a guaranteed source of care. My
3786 amendment is straightforward. It would simply establish that
3787 if enacted, the school based health center construction funds
3788 repeal would only go into effect once our shared national
3789 goal is met which is to ensure that at least 75.6 percent of
3790 individuals in the United States who are 10 through 17 years
3791 of age have had a wellness checkup during the previous 12
3792 month period.

3793 While the ultimate goal is to ensure all children get
3794 this needed care, the 75 percent goal would put us in line
3795 with that which is included in Healthy People 200, an
3796 evidence based 10 year national target level. These goals
3797 are nonpartisan, based on science and data, and are set out
3798 to be both ambitious and achievable. Until we reach the 75
3799 percent marker it is really critical that we need to support
3800 any effort to achieve it including the need to build
3801 additional school based health centers to provide these
3802 services.

3803 Students spend a majority of their time in school.
3804 Making school based health centers the most reasonable place
3805 to provide an annual checkup bringing providers to students,
3806 the centers create an atmosphere of trust and support that

3807 these children need. Centers help provide medically
3808 underserved students regular access to preventive and primary
3809 care, dental, and vision screening, and mental health service
3810 in one of the places they spend the most time, school.

3811 As I said before, school based health centers are often
3812 the only sources of healthcare for our young people. They
3813 are also our first line of defense against the spread of
3814 infectious diseases among our children and in our
3815 communities. In the past year, 40 percent of students missed
3816 three or more days because of illness or injury. School
3817 based health centers ensure our children receive quality
3818 medical attention promptly so they can get healthy and get
3819 back in the classroom. Just think with the services provided
3820 at these centers, children will be spending more time
3821 learning in their classroom, less time clogging our emergency
3822 rooms. And we need our children in their classrooms learning
3823 so that we can out-educate, out-innovate, and out-build the
3824 rest of the world.

3825 As a former school nurse, I have seen first-hand the
3826 impact of health on a child's education. A student can't pay
3827 attention if she can't hear her teacher because she needs
3828 hearing aids. A student can't read if he sees--can't see the
3829 blackboard because he needs glasses. A student can't learn
3830 if she has undiagnosed asthma and it is hard to breathe. And

3831 if a student can't learn they will fall behind and they may
3832 never catch up. All these ailments are easily detected with
3833 an annual wellness checkup and they are provided without
3834 additional barriers by school based health centers. Until 75
3835 percent of children receive annual checkups, we simply can't
3836 afford to eliminate funding for one of our best deliveries of
3837 care. So I urge my colleagues to support this amendment as a
3838 very common sense way to ensure that funding could be there
3839 for this critical program as long as the need is there. And
3840 I yield.

3841 Mr. {Pallone.} Can I ask the gentlewoman to yield?

3842 Mrs. {Capps.} I will.

3843 Mr. {Pallone.} You know I just wanted to thank you for
3844 having a very positive you know vision of what we are trying
3845 to do here. You know this is a values issue as well. And
3846 there is a lot of cynicism about you know what we do in
3847 Congress and what we don't do. And you know you just laid
3848 out a very practical reason why we have these school based
3849 clinics, what it means for kid's education, why it allows for
3850 equal opportunity which is what this country is all about.
3851 And you know I just want to tell you I just--I am just
3852 pleased having been here since 10:00 to hear such a positive
3853 oriented vision about the future. It is really nice for a
3854 change.

3855 Mrs. {Capps.} And I will just say in response since you
3856 are getting to that level of conversation with 10 seconds
3857 left that this--my feelings about this legislation have not
3858 anything to do with the good side of the aisle I happen to
3859 sit on. It has a lot to do with where I spent my life before
3860 I came to Congress. Thank you, Mr. Pallone. I yield back.

3861 Mr. {Pitts.} The gentlelady's time is expired. Is
3862 there further discussion of the amendment? Chair recognize
3863 the gentleman from Texas, Dr. Burgess, for 5 minutes.

3864 Dr. {Burgess.} Thank you, Mr. Chairman. I just need to
3865 point out that once again this really doesn't--this amendment
3866 doesn't have anything to do with increasing access to care or
3867 access to services. Remember the underlying bill provides
3868 construction funding, mandatory funding for construction of
3869 school based clinics. It does nothing to provide a doctor or
3870 a nurse. It doesn't provide a single hearing aid. It
3871 doesn't provide a single asthma inhaler. The problem with
3872 Section 4101(a) of the Patient Protection and Affordable Care
3873 Act is the mandatory funding for building school based health
3874 centers with no guarantee that these centers will have the
3875 resources to staff the center and actually deliver the care.
3876 Ensuring the children are able to access care is
3877 reasonable. However, this section does not lend or increase
3878 the ability to obtained services. As a committee if--I do

3879 need to point out that as a committee we have not heard
3880 testimony from the Department of Health and Human Services
3881 that 75.6 percent is an accurate target for this Healthy
3882 People 2020 Initiative. How can we on this committee justify
3883 the mandatory spending of \$50 million a year through 2014 if
3884 we don't have a verified level that we are trying to achieve?

3885 If increasing annual wellness visits for children age 10
3886 to 17 is a priority then increasing physician workforce
3887 should also be a priority, not throwing money at construction
3888 projects that could lay abandoned if the law is deemed to be
3889 unworkable by the courts. Once again, I urge rejection of
3890 this amendment and support of the underlying bill.

3891 Mr. {Pallone.} Would the gentleman yield?

3892 Dr. {Burgess.} Yes, I will be happy to yield to the
3893 gentleman.

3894 Mr. {Pallone.} I just don't understand. There are
3895 other bills here today that provide for training of primary
3896 care--nurses--

3897 Dr. {Burgess.} Reclaiming my time because this is an
3898 important point. Reclaiming my time. This is not about
3899 training. This is about construction. And that is--

3900 Mr. {Pallone.} But you have another bill that is yours
3901 that eliminates the training.

3902 Dr. {Burgess.} --this is not--this is--we are not

3903 talking about training. We are talking about construction
3904 and staffing. Why is it--

3905 Mr. {Pallone.} Why not now? But if you build that--

3906 Dr. {Burgess.} Reclaiming my time--controlling the
3907 time. Construction is mandatory. Staffing is discretionary.
3908 Now, we will get to training and--

3909 Mr. {Pallone.} But the other bill is on the agenda to
3910 eliminate all that.

3911 Dr. {Burgess.} But we are not talking about training at
3912 this time. We are talking about a mandatory construction
3913 bill--

3914 Mr. {Pallone.} Okay. Well, a half an hour from how we
3915 will talk about it.

3916 Dr. {Burgess.} and a discretionary staffing bill.

3917 Mr. {Pitts.} Gentleman's--yields back. Is there
3918 further discussion of the amendment? The gentlelady from
3919 California is striking for purposes of the gentleman.

3920 Ms. {Eshoo.} Thank you, Mr. Chairman. I move to strike
3921 the last word.

3922 Mr. {Pitts.} Recognized for 5 minutes.

3923 Ms. {Eshoo.} Mr. Chairman and members, we are having a
3924 make believe debate here in my view. I have listened for a
3925 long time today as you all have as well and participated in
3926 some of it. It is as if the majority is saying we don't like

3927 what is in the bill but we are for community based health.
3928 We are for prevention. We are for building upon the progress
3929 that our nation has made against obesity, against cancer,
3930 making progress down those very, very important roads that
3931 really benefit not only the American people but humankind
3932 because America is the leader in this. You are not for any
3933 of these things.

3934 You have named the bill after a president that--I don't
3935 like using the word, but I have come to the conclusion that
3936 you detest, you mock the bill by calling it Obama Care as if
3937 there is a boogeyman in this. And yet, you know what? You
3938 are playing with people's lives. You are playing with
3939 people's lives.

3940 So this is a pretend debate. Build it? What do you
3941 mean build it they are going to come? Are you afraid of who
3942 is going to show up in these clinics? Have you read the
3943 bill? Does it matter that we built into it that there would
3944 be a whole new generation of primary care physicians that
3945 would be trained in our country? I think that that is
3946 progress. I think that is synonymous with what our country
3947 is about.

3948 Now there are a lot of new members on this committee.
3949 You haven't had an opportunity to travel relative to
3950 Congressional travel. Go to other countries in the world and

3951 see what those countries look like without what we are
3952 talking about here. Look at their infant mortality rates.
3953 Look at their expected life spans. So pretend. Pretend that
3954 you just don't like this but that you have something
3955 wonderful in store for the American people. What is it? We
3956 have been here for 90 days. There is nothing on jobs. It is
3957 destroy, destroy, disrupt, disrupt, and destroy some more.

3958 So I don't know. What is your agenda? You just--you
3959 hate the Government so much that you had to come here to try
3960 and visit this upon people. Maybe you want to visit it upon
3961 your constituents. Mine don't like it and they reject it.
3962 They know we have to do something about a deficit. As I said
3963 earlier today I believe this morning we cut \$41 billion. You
3964 are still dinking around with whatever you are going to do on
3965 a CR. We cut 41 billion in December. But healthcare and a
3966 system and a system to make sure--I am sorry. It is my time.

3967 {Voice.} I have words, please, Mr. Chairman?

3968 Ms. {Eshoo.} It is my time. It is my time. And to set
3969 up a system of healthcare in the country you don't like what
3970 is in the bill. What do you have to offer? What do you have
3971 to offer? We haven't heard anything? Nothing is on the
3972 table except to destroy this. And if you really read the
3973 bill which you all use that phrase campaigning read the bill,
3974 read the bill. If you read the bill you would know that one

3975 thing is hooked to another. That there is a nexus between
3976 these centers, primary care physicians, funding for that, and
3977 the needs to speak to the needs to the people in our country.

3978 So you know I am sorry to say that this is kind of a
3979 fake debate, but you know what? If you are not going to put
3980 on the table something positive for the American people and
3981 just continually seek and destroy, what do you have to offer?
3982 Say it. I think the cameras are on. Maybe someone can give
3983 us a clue what you might be coming up with next week for
3984 healthcare for the American people or did that cost too much,
3985 too? You have healthcare. Easy for everyone to say. Maybe
3986 some people here didn't accept it. You have nothing to worry
3987 about. Everything is good in your life. Well, everything is
3988 not well in America and people deserve better. So that is
3989 what I--

3990 Mr. {Pitts.} Gentlelady's time is expired.

3991 Mrs. {Eshoo.} --want to say and I have gotten it off my
3992 chest. And I look forward to hearing what the majority plans
3993 to do about healthcare to address the needs of the American
3994 people.

3995 Mr. {Pitts.} The gentlelady's time is expired. The
3996 Chair--

3997 Mr. {Barton.} Chairman?

3998 Mr. {Pitts.} --recognizes the Ranking Member Emeritus

3999 for 5 minutes.

4000 Mr. {Barton.} Well, thank you, Mr. Chairman. Let us
4001 try to have a fact based debate. We know why we are here.
4002 Our--the majority doesn't like all the mandatory spending in
4003 the new healthcare law. It doesn't mean we don't like some
4004 of the things in it. We certainly support community health
4005 clinics and school based health clinics. I have gone to
4006 openings in my district. I have supported funding for both
4007 the community clinics and the school based clinics.

4008 The hospital system that my wife worked for until
4009 recently--John Peter Smith which is the public hospital in
4010 Tarrant County Texas I believe has eight school based health
4011 clinics--maybe 10--four of which I believe are in my
4012 congressional district. So this isn't a debate about school
4013 based health clinics. It is a debate about the mandatory
4014 nature of the funding not just in this bill, but in--on this
4015 particular bill that is before us but in the other bills that
4016 were--we debated earlier today and at least one other bill we
4017 are going to debate later this afternoon.

4018 You know, the Republicans support federally supported
4019 healthcare, but we do not support the particular law that was
4020 passed, rammed down our throats in the last Congress. We
4021 have an obligation to try to repeal as much of it as
4022 possible, but once that is done we are more than happy to

4023 work with our friends on the minority on specific issues one
4024 of which would--I think there is probably a commonality of
4025 interest in school based health clinics.

4026 So you know when we were in the minority, we came up
4027 with all the amendments that we could to try to do what we
4028 call got you amendments. And I commend the gentlelady from
4029 California. This is a got you amendment. She is--she feels
4030 strongly about school based health clinics and so she wants
4031 to put us on record that we don't want to spend mandatorily
4032 funds for that. That is part of the political process.

4033 When we were in the minority we did it to then the
4034 Democratic majority and now the Democrat minority is doing it
4035 to us. That is part of the--part of what an open,
4036 transparent markup is about. It is fair. It is no fun, but
4037 it is fair. So you know but don't--my other good friend from
4038 California, Ms. Eshoo, who we have worked so well together on
4039 so many issues--this isn't a fake debate. And I see a
4040 noticeable absence of anybody defending mandatory spending
4041 which we don't have the funding for.

4042 As Mr. Shimkus pointed out earlier we are borrowing what
4043 is it--40 cents of every dollar? Forty-two cents? Where is
4044 that money coming from? You know? That is what we are
4045 trying to do something about. And so you know those of us
4046 that have been on the committee awhile we understand the

4047 process. We understand what these amendments are about. But
4048 don't for a minute think that this is a debate about whether
4049 we support school based health clinics. There is not a
4050 member of this committee on either side that doesn't support
4051 school based health clinics. But we oppose mandatorily
4052 requiring that money be spent which we don't have. That is
4053 what this bill is about and the other bills before the
4054 committee. And that is not a fake debate. It is a real
4055 debate.

4056 And so I oppose the Capps Amendment with great respect.
4057 I have nothing but personal respect for Mrs. Capps, but I--
4058 you know we want to repeal as much of the new health care law
4059 and then replace it with something that is market based and
4060 something which we can fund that we can afford to finance.
4061 With that, Mr. Chairman, I yield back.

4062 Mr. {Pitts.} Chair thanks the Chair Emeritus. Is there
4063 further discussion on the amendment? I think we were--go to
4064 the gentlelady, Ms. Christensen for five minutes.

4065 Dr. {Christensen.} Thank you. I just wanted to say a
4066 word in support of the amendment. I think that Mrs. Capps
4067 has made a very--offered a very reasonable amendment. It is
4068 important that our young people when they are at that very
4069 vulnerable age have the services and the care that the school
4070 based centers would provide. And it allows the repeal of the

4071 balance of the funding once we reach that important
4072 threshold.

4073 And yes, I agree with Congressman and Chairman Pallone
4074 that arguing about not having the providers is not consistent
4075 with H.R. 1216 that would remove funding from the training of
4076 primary care doctors. We need those physicians and I just
4077 want to support your amendment--Mrs. Capps. I yield back.

4078 Mr. {Pitts.} The Chair thanks the gentlelady. Is there
4079 further discussion on the amendment? If there is no further
4080 discussion, the vote occurs on the amendment. All those in
4081 favor shall signify by saying aye. All those opposed no.
4082 The nays have it and the amendment is--

4083 Mrs. {Capps.} Mr. Chairman, I would I ask to be--Mr.
4084 Chairman?

4085 Mr. {Pitts.} Will the Ranking Member request a roll
4086 call vote? The Clerk will call the roll as soon as we get a
4087 clerk here.

4088 The {Clerk.} Mr. Barton?

4089 Mr. {Barton.} No.

4090 The {Clerk.} Mr. Barton, no.

4091 Mr. Stearns?

4092 [No response.]

4093 The {Clerk.} Mr. Whitfield?

4094 Mr. {Whitfield.} No.

4095 The {Clerk.} Mr. Whitfield, no.
4096 Mr. Shimkus?
4097 Mr. {Shimkus.} No.
4098 The {Clerk.} Mr. Shimkus, no.
4099 Mr. Pitts?
4100 Mr. {Pitts.} No.
4101 The {Clerk.} Mr. Pitts, no.
4102 Mrs. Bono Mack?
4103 [No response.]
4104 The {Clerk.} Mr. Walden?
4105 [No response.]
4106 The {Clerk.} Mr. Terry?
4107 Mr. {Terry.} No.
4108 The {Clerk.} Mr. Terry, no.
4109 Mr. Rogers?
4110 Mr. {Rogers.} No.
4111 The {Clerk.} Mr. Rogers, no.
4112 Mrs. Myrick?
4113 Mrs. {Myrick.} No.
4114 The {Clerk.} Mrs. Myrick, no.
4115 Mr. Sullivan?
4116 [No response.]
4117 The {Clerk.} Mr. Murphy?
4118 Mr. {Murphy.} No.

- 4119 The {Clerk.} Mr. Murphy, no.
4120 Mr. Burgess?
4121 Dr. {Burgess.} No.
4122 The {Clerk.} Mr. Burgess, no.
4123 Mrs. Blackburn?
4124 Mrs. {Blackburn.} No.
4125 The {Clerk.} Mrs. Blackburn, no.
4126 Mr. Bilbray?
4127 Mr. {Bilbray.} No.
4128 The {Clerk.} Mr. Bilbray, no.
4129 Mr. Bass?
4130 [No response.]
4131 The {Clerk.} Mr. Gingrey?
4132 Dr. {Gingrey.} No.
4133 The {Clerk.} Mr. Gingrey, no.
4134 Mr. Scalise?
4135 Mr. {Scalise.} No.
4136 The {Clerk.} Mr. Scalise, no.
4137 Mr. Latta?
4138 Mr. {Latta.} No.
4139 The {Clerk.} Mr. Latta, no.
4140 Mrs. McMorris Rodgers?
4141 Mrs. {McMorris Rodgers.} No.
4142 The {Clerk.} Mrs. McMorris Rodgers, no.

4143 Mr. Harper?
4144 Mr. {Harper.} No.
4145 The {Clerk.} Mr. Harper, no.
4146 Mr. Lance?
4147 Mr. {Lance.} No.
4148 The {Clerk.} Mr. Lance, no.
4149 Mr. Cassidy?
4150 Dr. {Cassidy.} No.
4151 The {Clerk.} Mr. Cassidy, no.
4152 Mr. Guthrie?
4153 Mr. {Guthrie.} No.
4154 The {Clerk.} Mr. Guthrie, no.
4155 Mr. Olsen?
4156 Mr. {Olsen.} No.
4157 The {Clerk.} Mr. Olsen, no.
4158 Mr. McKinley?
4159 [No response.]
4160 The {Clerk.} Mr. Gardner?
4161 Mr. {Gardner.} No.
4162 The {Clerk.} Mr. Gardner, no.
4163 Mr. Pompeo?
4164 Mr. {Pompeo.} No.
4165 The {Clerk.} Mr. Pompeo, no.
4166 Mr. Kinzinger?

4167 Mr. {Kinzinger.} No.

4168 The {Clerk.} Mr. Kinzinger, no.

4169 Mr. Griffith?

4170 Mr. {Griffith.} No.

4171 The {Clerk.} Mr. Griffith, no.

4172 Mr. Waxman?

4173 [No response.]

4174 The {Clerk.} Mr. Dingell?

4175 Mr. {Dingell.} Aye.

4176 The {Clerk.} Mr. Dingell, aye.

4177 Mr. Markey?

4178 [No response.]

4179 The {Clerk.} Mr. Towns?

4180 Mr. {Towns.} Aye.

4181 The {Clerk.} Mr. Towns, aye.

4182 Mr. Pallone?

4183 Mr. {Pallone.} Aye.

4184 The {Clerk.} Mr. Pallone, aye.

4185 Mr. Rush?

4186 Mr. {Rush.} Aye.

4187 The {Clerk.} Mr. Rush, aye.

4188 Ms. Eshoo?

4189 Ms. {Eshoo.} Aye.

4190 The {Clerk.} Ms. Eshoo, aye.

4191 Mr. Engel?
4192 [No response.]
4193 The {Clerk.} Mr. Green?
4194 [No response.]
4195 The {Clerk.} Ms. DeGette?
4196 Ms. {DeGette.} Aye.
4197 The {Clerk.} Ms. DeGette, aye.
4198 Mrs. Capps?
4199 Mrs. {Capps.} Aye.
4200 The {Clerk.} Mrs. Capps, aye.
4201 Mr. Doyle?
4202 [No response.]
4203 The {Clerk.} Ms. Schakowsky?
4204 Ms. {Schakowsky.} Aye.
4205 The {Clerk.} Ms. Schakowsky, aye.
4206 Mr. Gonzalez?
4207 [No response.]
4208 The {Clerk.} Mr. Inslee?
4209 Mr. {Inslee.} Aye.
4210 The {Clerk.} Mr. Inslee, aye.
4211 Ms. Baldwin?
4212 Ms. {Baldwin.} Aye.
4213 The {Clerk.} Ms. Baldwin, aye.
4214 Mr. Ross?

4215 Mr. {Ross.} Aye.

4216 The {Clerk.} Mr. Ross, aye.

4217 Mr. Weiner?

4218 Mr. {Weiner.} Aye.

4219 The {Clerk.} Mr. Weiner, aye.

4220 Mr. Matheson?

4221 Mr. {Matheson.} Aye.

4222 The {Clerk.} Mr. Matheson, aye.

4223 Mr. Butterfield?

4224 [No Response.]

4225 The {Clerk.} Mr. Barrow?

4226 Mr. {Barrow.} Aye.

4227 The {Clerk.} Mr. Barrow, aye.

4228 Ms. Matsui?

4229 Ms. {Matsui.} Aye.

4230 The {Clerk.} Ms. Matsui, aye.

4231 Ms. Christensen?

4232 Dr. {Christensen.} Aye.

4233 The {Clerk.} Ms. Christensen, aye.

4234 Mr. Upton?

4235 The {Chairman.} Are there other members wishing to be

4236 recorded? Mr. Bass?

4237 Mr. {Bass.} Vote no.

4238 The {Clerk.} Mr. Bass, no.

4239 The {Chairman.} Mr. Stearns?
4240 Mr. {Stearns.} No.
4241 The {Clerk.} Mr. Stearns, no.
4242 The {Chairman.} Mr. Sullivan?
4243 Mr. {Sullivan.} No.
4244 The {Clerk.} Mr. Sullivan, no.
4245 The {Chairman.} Mr. Walden?
4246 The {Clerk.} Mr. Walden, no. That is about it, right?
4247 The {Chairman.} The Clerk will report the result.
4248 The {Clerk.} Mr. Chairman, on that there were 16 ayes,
4249 28 nays.
4250 The {Chairman.} The amendment is not agreed to. Are
4251 there further amendment?
4252 Mr. {Towns.} Mr. Chairman? I have an amendment at the
4253 desk.
4254 The {Chairman.} All right, the Clerk will report the
4255 amendment. Record the amendment.
4256 The {Clerk.} Number three, Mr. Towns?
4257 Mr. {Towns.} Number four.
4258 The {Clerk.} Number four. An amendment offered by Mr.
4259 Towns.
4260 [The amendment follows:]
4261 ***** INSERT 11 *****

|
4262 The {Chairman.} Without objection the reading of the
4263 amendment is dispensed with and the gentleman is recognized
4264 for 5 minutes in support of his amendment. Gentleman, Mr.
4265 Towns is recognized for 5 minutes.

4266 Mr. {Towns.} Thank you very much, Mr. Chairman. The
4267 Amendment that I am offering maintains the current mandatory
4268 funding structure for school based health centers. However,
4269 in lieu of putting the funds into construction, this
4270 amendment provides mandatory funds for the operating costs of
4271 these centers and I was happy to hear my colleague from Texas
4272 indicate that he felt the same way.

4273 Many of my colleagues on both sides of the aisle have
4274 indicated in last week's Health Subcommittee hearing that
4275 they would support funding for operating costs though I feel
4276 that we should do both: build more school based health
4277 centers and provide operating funds for them. I think this
4278 might be a place for us to meet in the middle. This
4279 amendment does that.

4280 In addition, some arguments have been raised that the
4281 ACA does not provide operation funding, so funds for
4282 construction would be wasted. It is worth noting that the
4283 HRSA guidelines issued for a funding through this program
4284 requires applicants to demonstrate their ability to maintain

4285 operations of the center for at least two years. About 76
4286 percent of school based health centers depend on funds from
4287 state governments while 37 percent receive funds from local
4288 governments for their operations. Half receive some support
4289 from private foundations while only 23 percent are sponsored
4290 by an only 28 percent are eligible for federal funds under
4291 section 330 of the Public Health Service Act. This source
4292 provides targeted federal funds towards the provision of
4293 primary healthcare for the nation's underserved populations.

4294 I am interested in working together on shared
4295 priorities. School based health centers have long been
4296 supported by Republicans, Democrats, Independents, all alike.
4297 Many are located in the Congressional districts of members on
4298 this committee: Republicans, Democrats, and Independents.
4299 Let us work together to support programs that have long been
4300 supported by members of this committee.

4301 I urge my colleagues to support this amendment and then
4302 I also note that the business community loves this amendment
4303 because what it does is that if a mother does not feel like
4304 leaving her daughter--but if there is a school based clinic
4305 then she is able to if the youngster has a little
4306 temperature, maybe a little problem not feeling too good.
4307 But the point is she knows that the health clinic is there
4308 that they will go on to work and of course and then be able

4309 to function in a normal kind of way. And of course I think
4310 that is something that we should not ignore as well.

4311 So, Mr. Chairman, I wait for a successful conclusion
4312 that will make life better for our children because I think
4313 that as I listen to some of the comments on the other side, I
4314 think this is the amendment that they have been waiting for
4315 that they are now ready to vote and to be able to show how we
4316 can work together and to make certain that we provide the
4317 best quality health care for our children. And I think that
4318 is what we all should be about. And if you are not about
4319 that then I am not sure you should be on this committee,
4320 because this is the committee to help people. And on that
4321 note I yield back.

4322 Mr. {Pitts.} The Chair thanks the gentleman. The Chair
4323 recognizes the gentleman from Illinois for 5 minutes.

4324 Mr. {Shimkus.} Thank you, Mr. Chairman. I move to
4325 speak out against the amendment.

4326 Mr. {Pitts.} The Chair is recognized.

4327 Mr. {Shimkus.} And I have great respect of my friend,
4328 Mr. Towns. We are glad to have him back on the Committee.
4329 He prefaced his comments talking about moving the mandatory
4330 fund from the building to the operation fund, and that brings
4331 up our opposition. It is mandatory funding that we have the
4332 problem with.

4333 Our national debt, which is \$14.5 trillion, is based
4334 upon mandatory funding. It is mandatory funding. That is
4335 what is driving us into--

4336 Mr. {Towns.} Will the gentleman yield?

4337 Mr. {Shimkus.} I would be happy to yield.

4338 Mr. {Towns.} You know, this money comes from a lot of
4339 different sources. You know, you have to understand,
4340 foundations are involved in--

4341 Mr. {Shimkus.} No, I understand and--

4342 Mr. {Towns.} Even community--

4343 Mr. {Shimkus.} Reclaiming my time, but this is \$50
4344 million of mandatory spending that we are going to borrow \$21
4345 million. We are going to borrow \$21 million and then about
4346 \$10 million will come from the Chinese and the Japanese and
4347 the Brits. So we are borrowing in essence 42 cents on every
4348 dollar. I mean, we could wrap this debate, this cloak,
4349 around for the kids. I mean, \$47,000 is what we are giving
4350 to our children and our grandchildren to pay for the national
4351 debt.

4352 So these debates, as Joe Barton mentioned, are really
4353 good debates to have, and we should do them with passion but
4354 we also should do them with talking through the process. We
4355 should be debating these clinics on an authorization level.
4356 How much do we think we should authorize for the building of

4357 these? Hold us accountable. We should debate how much we
4358 should authorize, if you think it is the Federal Government's
4359 role, to operate these school-based clinics. Some people
4360 would say I am not sure it is the national government's role
4361 to do that. And some people would say I am not sure it is
4362 the national government's role to build community health
4363 clinics. We have a great history in this country of local
4364 control of education.

4365 So our problem is in this bill, however we want to call
4366 it, is the mandatory aspect. And all we are trying to do is
4367 reclaim the constitutional legislative integrity of the
4368 process in which we authorize and we appropriate. So when
4369 the November election occurred and the debate was government
4370 is too big, it is spending too much, we fear what is going on
4371 in the national healthcare bill, we came back here to say,
4372 okay, what are the things that we can do to reclaim control
4373 of the legislative process. You reclaim control by going
4374 through an annual authorization, or at least authorizing a
4375 program for a set number of years, where you then have a
4376 reauthorization process. We were not sent here to put
4377 mandatory spending without checks and balances into the
4378 system where we are bankrupt.

4379 Again, it is a great debate to have, \$50 million of
4380 mandatory spending in which \$21 million is going to be

4381 borrowed. \$21 million is borrowed from China, it is borrowed
4382 from Japan, it is borrowed from the Brits. So let us get
4383 back, let us really reclaim and have these policy debates
4384 here in this great Committee, but let us do it the way it is
4385 supposed to work, not automatic pilots and mandatory
4386 spending, that is done, we are not going to look back, boom,
4387 let us go, 10 years in a row. Let us go back to say, is this
4388 a credible program, should we authorize is, at what level,
4389 and then if we do that in a bipartisan manner, then we take
4390 our Committee and we go through the budgetary process and we
4391 fight for the appropriation for that set amount of money.

4392 That is our problem, the mandatory aspects of what
4393 happened in the healthcare law which mandated mandatory
4394 spending without a check and balance on the legislative
4395 branch. That is why we oppose this. I know your amendment
4396 is well-intended. It does address Dr. Burgess' issue, but I
4397 can't speak for him. But I think the mandatory aspect of
4398 mandatory spending is why we are having these ills here
4399 today, and I have 13 seconds left. I yield back my time.

4400 Mr. {Pitts.} The Chair thanks the gentleman. Is there
4401 further discussion of the amendment? If there is no further
4402 discussion, the vote occurs on the amendment. All those in
4403 favor shall signify by saying aye--

4404 Mr. {Towns.} Mr. Chairman?

4405 Mr. {Pitts.} --all those opposed, no.

4406 Mr. {Towns.} Mr. Chairman? I ask for a roll call vote.

4407 Mr. {Pitts.} The roll call vote is requested. The

4408 Clerk will call the roll.

4409 The {Clerk.} Mr. Barton?

4410 Mr. {Barton.} No.

4411 The {Clerk.} Mr. Barton, no.

4412 Mr. Stearns?

4413 Mr. {Stearns.} Votes no.

4414 The {Clerk.} Mr. Stearns, no.

4415 Mr. Whitfield?

4416 Mr. {Whitfield.} No.

4417 The {Clerk.} Mr. Whitfield, no.

4418 Mr. Shimkus?

4419 Mr. {Shimkus.} No.

4420 The {Clerk.} Mr. Shimkus, no.

4421 Mr. Pitts?

4422 Mr. {Pitts.} No.

4423 The {Clerk.} Mr. Pitts, no.

4424 Mrs. Bono Mack?

4425 [No response.]

4426 The {Clerk.} Mr. Walden?

4427 Mr. {Walden.} No.

4428 The {Clerk.} Mr. Walden, no.

4429 Mr. Terry?
4430 Mr. {Terry.} No.
4431 The {Clerk.} Mr. Terry, no.
4432 Mr. Rogers?
4433 Mr. {Rogers.} No.
4434 The {Clerk.} Mr. Rogers, no.
4435 Mrs. Myrick?
4436 [No response.]
4437 The {Clerk.} Mr. Sullivan?
4438 Mr. {Sullivan.} No.
4439 The {Clerk.} Mr. Sullivan, no.
4440 Mr. Murphy?
4441 Mr. {Murphy.} No.
4442 The {Clerk.} Mr. Murphy, no.
4443 Mr. Burgess?
4444 Dr. {Burgess.} No.
4445 The {Clerk.} Mr. Burgess, no.
4446 Mrs. Blackburn?
4447 Mrs. {Blackburn.} No.
4448 The {Clerk.} Mrs. Blackburn, no.
4449 Mr. Bilbray?
4450 Mr. {Bilbray.} No.
4451 The {Clerk.} Mr. Bilbray, no.
4452 Mr. Bass?

4453 Mr. {Bass.} No.
4454 The {Clerk.} Mr. Bass, no.
4455 Mr. Gingrey?
4456 Dr. {Gingrey.} No.
4457 The {Clerk.} Mr. Gingrey, no.
4458 Mr. Scalise?
4459 Mr. {Scalise.} No.
4460 The {Clerk.} Mr. Scalise, no.
4461 Mr. Latta?
4462 Mr. {Latta.} No.
4463 The {Clerk.} Mr. Latta, no.
4464 Mrs. McMorris Rodgers?
4465 Mrs. {McMorris Rodgers.} No.
4466 The {Clerk.} Mrs. McMorris Rodgers, no.
4467 Mr. Harper?
4468 Mr. {Harper.} No.
4469 The {Clerk.} Mr. Harper, no.
4470 Mr. Lance?
4471 Mr. {Lance.} No.
4472 The {Clerk.} Mr. Lance, no.
4473 Mr. Cassidy?
4474 Dr. {Cassidy.} No.
4475 The {Clerk.} Mr. Cassidy, no.
4476 Mr. Guthrie?

4477 Mr. {Guthrie.} No.

4478 The {Clerk.} Mr. Guthrie, no.

4479 Mr. Olson?

4480 Mr. {Olson.} No.

4481 The {Clerk.} Mr. Olson, no.

4482 Mr. McKinley?

4483 [No response.]

4484 The {Clerk.} Mr. Gardner?

4485 Mr. {Gardner.} No.

4486 The {Clerk.} Mr. Gardner, no.

4487 Mr. Pompeo?

4488 Mr. {Pompeo.} No.

4489 The {Clerk.} Mr. Pompeo, no.

4490 Mr. Kinzinger?

4491 Mr. {Kinzinger.} No.

4492 The {Clerk.} Mr. Kinzinger, no.

4493 Mr. Griffith?

4494 Mr. {Griffith.} No.

4495 The {Clerk.} Mr. Griffith, no.

4496 Mr. Waxman?

4497 [No response.]

4498 The {Clerk.} Mr. Dingell?

4499 [No response.]

4500 The {Clerk.} Mr. Markey?

4501 [No response.]

4502 The {Clerk.} Mr. Towns?

4503 Mr. {Towns.} Aye.

4504 The {Clerk.} Mr. Towns, aye.

4505 Mr. Pallone?

4506 Mr. {Pallone.} Aye.

4507 The {Clerk.} Mr. Pallone, aye.

4508 Mr. Rush?

4509 Mr. {Rush.} Aye.

4510 The {Clerk.} Mr. Rush, aye.

4511 Ms. Eshoo?

4512 Ms. {Eshoo.} Aye.

4513 The {Clerk.} Ms. Eshoo, aye.

4514 Mr. Engel?

4515 [No response.]

4516 The {Clerk.} Mr. Green?

4517 [No response.]

4518 The {Clerk.} Ms. DeGette?

4519 Ms. {DeGette.} Aye.

4520 The {Clerk.} Ms. DeGette, aye.

4521 Mrs. Capps?

4522 [No response.]

4523 The {Clerk.} Mr. Doyle?

4524 [No response.]

4525 The {Clerk.} Ms. Schakowsky?
4526 Ms. {Schakowsky.} Aye.
4527 The {Clerk.} Ms. Schakowsky, aye.
4528 Mr. Gonzalez?
4529 [No response.]
4530 The {Clerk.} Mr. Inslee?
4531 Mr. {Inslee.} Aye.
4532 The {Clerk.} Mr. Inslee, aye.
4533 Ms. Baldwin?
4534 Ms. {Baldwin.} Aye.
4535 The {Clerk.} Ms. Baldwin, aye.
4536 Mr. Ross?
4537 [No response.]
4538 The {Clerk.} Mr. Weiner?
4539 [No response.]
4540 The {Clerk.} Mr. Matheson?
4541 Mr. {Matheson.} Aye.
4542 The {Clerk.} Mr. Matheson, aye.
4543 Mr. Butterfield?
4544 [No response.]
4545 The {Clerk.} Mr. Barrow?
4546 Mr. {Barrow.} Aye.
4547 The {Clerk.} Mr. Barrow, aye.
4548 Ms. Matsui?

4549 Ms. {Matsui.} Aye.

4550 The {Clerk.} Ms. Matsui, aye.

4551 Ms. Christensen?

4552 Dr. {Christensen.} Aye.

4553 The {Clerk.} Ms. Christensen, aye.

4554 Mr. Upton?

4555 [No response.]

4556 Mr. {Pitts.} Are there any other members wishing to be
4557 recorded? Mr. Ross?

4558 Mr. {Ross.} Aye.

4559 The {Clerk.} Mr. Ross, aye.

4560 Mr. {Pitts.} Mr. Butterfield?

4561 Mr. {Butterfield.} Aye.

4562 The {Clerk.} Mr. Butterfield, aye.

4563 Mr. {Pitts.} Mr. Weiner?

4564 Mr. {Weiner.} Aye.

4565 The {Clerk.} Mr. Weiner, aye.

4566 Mr. {Pitts.} The Clerk will report the result.

4567 The {Clerk.} Mr. Chairman, on that there were 15 ayes,
4568 27 nays.

4569 Mr. {Pitts.} The amendment is not agreed to. Are there
4570 further amendments?

4571 Mr. {Rush.} Mr. Chairman, I have an amendment at the
4572 desk.

4573 Mr. {Pitts.} The gentleman, Mr. Rush, is recognized to
4574 offer an amendment.

4575 The {Clerk.} Mr. Rush, which number?

4576 Mr. {Rush.} Amendment number 5.

4577 Mr. {Pitts.} The Clerk will report the amendment.

4578 The {Clerk.} Amendment offered by Mr. Rush.

4579 [The amendment follows:]

4580 ***** INSERT 12 *****

|
4581 Mr. {Pitts.} Without objection, the reading of the
4582 amendment is dispensed with, and the gentleman is recognized
4583 for 5 minutes in support of his amendment.

4584 Mr. {Rush.} Thank you, Mr. Chairman. Mr. Chairman, I
4585 am exceedingly disappointed by the level of the debate today.
4586 The National Healthcare Reform may just possibly be the most
4587 important if not historic piece of legislation ever passed by
4588 this Congress. Congress should be expanding healthcare
4589 coverage, not limiting it, not axing it. Congress should
4590 also be emphasizing preventive care and ensuring that care
4591 when it is needed is provided to all Americans, especially to
4592 our most needy, our children--provides healthcare for nearly
4593 46 million uninsured American citizens and with 8.6 million
4594 of those being vulnerable children. Why, Mr. Chairman, on
4595 Earth are we trying to unravel what has taken us so many,
4596 many years to stitch together?

4597 With respect to Mr. Burgess' bill, it will rescind \$60
4598 million in funding for school-based health centers
4599 construction. This funding provides critical resources to
4600 communities, allowing them to open new healthcare clinics at
4601 their schools. Without this funding--these centers will not
4602 be built and school- and community-based health centers that
4603 are already open to the children of my State, especially

4604 those 17 percent on the state's population who currently live
4605 in underserved communities, will be strained and hard-pressed
4606 to serve their needy patients, the children, and also the
4607 seniors who rely on them.

4608 Our children are spending most of their time in school
4609 while their parents are struggling to earn a living in order
4610 to care for them. This funding is vitally important given
4611 our school-based health system the capacity to serve and to
4612 care for our low-income population. By rescinding mandatory
4613 care, mandatory funding for school-based health clinic
4614 construction, my Republican colleagues are telling the
4615 American public that our children are not worthy of
4616 prioritized care.

4617 And Mr. Chairman, I think that this is really what we
4618 are missing here in this debate. It is mandatory, Mr.
4619 Chairman, because it is a priority. Without the mandatory
4620 wording in this legislation, it is doubtful that it would be
4621 a priority.

4622 Mr. Chairman, I think that Republicans centering their
4623 disagreement, their opposition to this amendment, based on
4624 the mandatory nature of it and the mandatory wording in it is
4625 a--but it is not, Mr. Chairman, relevant to the healthcare of
4626 these children who reside in poor areas, who need school-
4627 based health clinics. I have visited the school-based health

4628 clinics in my community, in my district, and I know the
4629 function that they serve. I know that we need more and more
4630 and more of these clinics. And Mr. Chairman, as I said
4631 earlier, if you build it, they will come. They need it, they
4632 want it, it is the least that we can do is to provide a basic
4633 sense and entry point for healthcare, basic health. That is
4634 what this Nation should be providing for all of its citizens,
4635 and Mr. Chairman, I think that it is really callous and it is
4636 cynical for those of us who care about and you admit, you say
4637 that you care about children's health, well, you ought to do
4638 something about it. And this is an opportunity for you to do
4639 something about it, if you really care.

4640 I yield back the balance of my time.

4641 Mr. {Pitts.} The Chair thanks the gentleman, and the
4642 Chair recognizes the gentleman from California for 5 minutes.

4643 Mr. {Bilbray.} Thank you, Mr. Chairman. Mr. Chairman,
4644 I had the privilege of 10 years supervising the baseline
4645 healthcare services for a population of 3 million people, and
4646 this idea of mandatory, automatic pilot being somehow a
4647 compassionate way of applying our services to the public just
4648 boggles my mind. There is not a mayor, county chairman,
4649 school board member that does not every year look at their
4650 budget, make priority decisions and address the issues for
4651 their constituency as they see fit. The trouble is in this

4652 town, it is always easy to put it on automatic pilot and then
4653 say I can't do anything about this year because it is already
4654 locked in.

4655 The issue is the 40 percent borrowing. We are spending
4656 40 percent more than what we can afford to do. There are
4657 some tough decisions. And somebody was pointing out on this,
4658 and let me just say this, be aware that we may be borrowing
4659 from China but we are stealing from our grandchildren because
4660 we are not even talking about repaying the debt we have to
4661 our grandchildren. We are talking about just running up the
4662 bill, and when the bill comes due, does anybody on either
4663 side of this aisle think that the healthcare provided to our
4664 grandchildren and our great-grandchildren is not going to be
4665 impacted? Do you really think that when we have to pay the
4666 piper, our grandchildren have to pay the piper, do you really
4667 think that they are going to look back to us and say thank
4668 God Grandpa did all of these great things and dropped this
4669 bill in our lap, where my children now, our great-
4670 grandchildren, aren't going to be able to get the services
4671 because all the money is going overseas to pay the interest
4672 on the debt.

4673 So I think we need to be aware of that, that there are
4674 limits like any good chairman, any mayor, any hospital knows,
4675 you have got to live within the fiscal realities or you are

4676 not doing anyone a service by overpromising what you can't
4677 afford and trying to over triage what is able to be
4678 delivered. And the minimum should be that Congress executes
4679 its responsibility and looks at these expenditures just like
4680 every mayor, every school board member does and make those
4681 priority decisions where the American people can see them
4682 made, see us vote, see us make those priorities and then live
4683 with the repercussions every year, not put it on automatic
4684 pilot so we can send this thing off like some ballistic
4685 missile and then run for cover whenever it hits and the
4686 financial disaster come in.

4687 So I think that we have got to be responsible about
4688 this, and it is not being cruel to be fiscally responsible.

4689 Mr. {Rush.} Will the gentleman yield?

4690 Mr. {Bilbray.} I do yield to the gentleman.

4691 Mr. {Rush.} Mr. Chairman, all--on the other side, they
4692 have always brought up this issue of the Chinese and the debt
4693 to the Chinese, and I just hope and I pray that the Chinese--

4694 Mr. {Bilbray.} Sir, I will reclaim my time on this. I
4695 know we all talk about independence. We want our children to
4696 work, we want people to be to work. I just want to make sure
4697 my grandchildren aren't working for foreign nationals to pay
4698 a debt that we ran up. And let me just say, one thing I
4699 would like to raise as we talk about these health clinics,

4700 you know, some of this have provided this in certain parts of
4701 the country, and everybody comes with their different
4702 experience. I went to schools where there were many foreign
4703 nationals going to school in my public schools that I went to
4704 that did not live in America, and don't assume that just
4705 because somebody is going to school in the United States that
4706 they qualify for health benefits across the board. That is
4707 an assumption you make, but it is not one that is reflected
4708 in reality in many communities in this country.

4709 Mr. {Rush.} Will the gentleman yield?

4710 Mr. {Bilbray.} I will yield to the gentleman.

4711 Mr. {Rush.} I just want to make a note that the Chinese
4712 provide healthcare for their schools.

4713 Mr. {Bilbray.} Excuse me, the Chinese--

4714 Mr. {Rush.} The Chinese provide--

4715 Mr. {Bilbray.} I am sorry. I don't think--

4716 Mr. {Rush.} --healthcare for their schools--

4717 Mr. {Bilbray.} --anyone wants to use the Chinese.

4718 Reclaiming my time.

4719 Mr. {Rush.} Well, you used them. You used them.

4720 Mr. {Bilbray.} Well, I just ask all of us to remember
4721 that what we do here today is setting example our
4722 grandchildren have to live with.

4723 Mr. {Pitts.} Will the--

4724 Mr. {Bilbray.} Will the gentleman--

4725 Mr. {Pitts.} The gentleman controls the time.

4726 Mr. {Bilbray.} Thank you. Mr. Chairman, I just want to
4727 say thank you for the time, but I think that the one thing we
4728 have got to agree again and again, that it is not humane to
4729 spend more than our grandchildren can afford where their
4730 healthcare is going to be degraded because we basically
4731 committed more funds than was affordable, and they have to
4732 make the cuts that we weren't brave enough to do, and I yield
4733 back.

4734 Mr. {Pitts.} The Chair thanks the gentleman and--

4735 Mr. {Bilbray.} I yield to the doctor, please.

4736 Mr. {Pitts.} For what purpose--

4737 Dr. {Burgess.} I just point out that--

4738 Mr. {Pitts.} The Ranking Member, the gentleman is
4739 recognized, for 5 minutes.

4740 Mr. {Pallone.} Thank you, Mr. Chairman. You know, I
4741 don't want to prolong it, but I listen to what the gentleman
4742 from California said. I mean, this Committee and Democrat,
4743 Republican majority, whoever is in the majority over the
4744 years, we can just list and go on and on about all the
4745 mandatory spending. The bottom line is you don't want to do
4746 mandatory spending for the things that you don't like, and
4747 you do want to do mandatory spending for the things that you

4748 like. That is what it really comes down to. And I can't
4749 stress over and over again, you know, if you don't have the
4750 school-based clinic, you know, then the kids are going to get
4751 sick, they are not going to get primary care. They are going
4752 to end up in the hospital, the emergency room, it is going to
4753 cost you more. Same thing could be said for, you know, the
4754 immigration status of whoever it is. I mean, you know, I
4755 think every state, most states certainly, have a requirement
4756 that you can't turn somebody away from the emergency room
4757 regardless of their status. So what is the point of, again,
4758 arguing over this because again, it is a form of prevention.

4759 And I know, somebody on the other side is going to say,
4760 oh, prevention doesn't work or prevention isn't the issue.
4761 But it is the issue. I started out today, when this bill
4762 first came up, and I will quote again, ``Patients seen at
4763 school-based health centers cost an average of \$30.40 less
4764 than comparable, non-school based health center patients.''
4765 We save money because the kids get primary care. They don't
4766 end up getting sick, they don't end up in the emergency room.
4767 That is what this is all about. It saves money. So you
4768 could talk about the debt all you want, and I will come back
4769 and say, fine. We are going to save money so there will be
4770 less debt. You know, in this case in particular where we
4771 have this amendment with Mr. Rush where he, the way I

4772 understand the amendment, that we are definitely going to
4773 provide the funding if it is an economically disadvantaged
4774 area or a health professional shortage area. I mean, again,
4775 this is where the greatest need is for these kinds of school-
4776 based clinics because these people have no primary care and
4777 they are just going to get sick, and then they are going to
4778 end up in the emergency room again.

4779 So I just think it is a spurious argument that is being
4780 used here. I yield back, Mr. Chairman.

4781 Mr. {Pitts.} The Chair thanks the gentleman and
4782 recognizes the gentlelady from Tennessee for 5 minutes.

4783 Mrs. {Blackburn.} Thank you, Mr. Chairman. It is
4784 always such a interesting argument for me to sit here, and I
4785 would remind my colleagues that as we have worked on this
4786 public option healthcare issue, there is no test case. There
4787 is not one program where you have ever spent and taken on
4788 near-term expenses in order to receive long-term savings
4789 where it has worked out that way.

4790 Anytime you incentivize use, the cost is going to go up,
4791 and as many different ways as you try to slice it, as many
4792 different arguments as you try to make, the bottom line is
4793 still this. Public option healthcare and programs like we
4794 have had in Tennessee, TennCare, are too expensive to afford.
4795 In our State, the program eventually was 35.3 percent of the

4796 budget, and our Democrat governor decided that it had to be
4797 reshaped. This is something that we cannot afford to do.
4798 You do not see more individuals receiving healthcare because
4799 even though they have access to the queue, at the end of the
4800 day, the money is not there to pay for the services that they
4801 are seeking to use. And with that, I yield the balance of my
4802 time to the gentleman from Texas, Mr. Burgess.

4803 Dr. {Burgess.} I thank the gentlelady for yielding.
4804 You know, I feel like I have to point out that there is no
4805 established link between an economically distressed area and
4806 the lack of a school-based health center. I am sure it does
4807 occur, but I am sure there are also economically distressed
4808 areas that have a plethora of school-based health centers.

4809 But you know, one of the great ironies of what we are
4810 debating here, the school-based health center will be built
4811 with mandatory funding but the staffing with discretionary
4812 funding, and the President has zeroed out that line item in
4813 the 2012 budget. So it is a health profession shortage area.
4814 They are already lacking in professionals. How are you going
4815 to entice them to work without paying them? We have got this
4816 thing exactly backwards, and this is the reason that this
4817 amendment needs to be defeated and the underlying bill
4818 supported.

4819 Mr. {Bilbray.} Will the gentleman yield?

4820 Dr. {Burgess.} Yeah, I will be happy to yield.

4821 Mr. {Bilbray.} Yeah, I mean, in reality, we talk all
4822 about healthcare. This really, in reality, is not a proposal
4823 for healthcare. It is a construction project. You build a
4824 building, you employ people to build the building and you
4825 walk away from the building. The building doesn't provide
4826 the healthcare. And so it really need to be reflected in
4827 reality. The structure is what is being mandated, not the
4828 service, and the concept that if you build it they will come,
4829 obviously is not reflected by a lot of facilities we have
4830 seen in this country.

4831 Mr. {Pallone.} Would the gentleman yield? I don't know
4832 whose time it is.

4833 Mr. {Pitts.} The gentlelady controls the time. Will
4834 the gentlewoman yield?

4835 Mrs. {Blackburn.} I had yielded the balance of my time
4836 to Mr. Burgess, and no I am not going to yield to the
4837 gentleman. I think what we have to keep our eye on here is
4838 you can build all sorts of buildings, you can name all sorts
4839 of programs but if there is a shortage, if you do not have
4840 enough physicians available to deliver the care, individuals
4841 end up with access to the queue, they do not end up with
4842 access to that care delivery, and you still have a problem.
4843 We saw this in Tennessee and had to take some drastic steps

4844 in order to address it.

4845 And with that, Mr. Chairman, I yield back the balance of
4846 my time.

4847 Mr. {Pitts.} Is there further discussion of the
4848 amendment?

4849 Mr. {Towns.} Mr. Chairman, you know--

4850 Mr. {Pitts.} For what purpose does the gentleman seek
4851 recognition?

4852 Mr. {Towns.} Strike the last word. The problem--

4853 Mr. {Pitts.} The gentleman is recognized for 5 minutes.

4854 Mr. {Towns.} I promise not to use the time, but I have
4855 to comment here that, you know, sometimes something looks
4856 good and looks like you might be saving but you are not
4857 saving. The point is that these young people in many
4858 instances are going to end up in the emergency room. It is a
4859 known fact that it costs a whole lot more to treat a person
4860 in the emergency room, and of course, we get away from the
4861 whole issue of prevention. And the other thing I think we
4862 need to recognize, that if a young person has a problem or a
4863 temperature or whatever it might be, that mother is not going
4864 to go to work. She is going to keep that child home. But if
4865 there is a health clinic, a school-based health clinic, that
4866 she could take the young person to the health clinic, knowing
4867 that that person is going to be taken care of and will be in

4868 touch with her if she needs to come back.

4869 The point is that because you think you are saving and
4870 it looks like you are not really saving, the business
4871 community in that case, they lose out in terms of the
4872 person's working that day, all of these issues should be
4873 taken into consideration. And I am afraid that we are just
4874 doing something here, not really looking at the bottom line,
4875 and I think that we should look at the bottom line. I want
4876 to save money, too. Don't think you are the only one that
4877 want to save money. I mean, I keep hearing this, the
4878 deficit. Look, we are all concerned about the deficit. But
4879 we are also concerned about lives. The only person that I
4880 know that should be supporting this is the undertakers.

4881 Mr. {Pitts.} The gentleman yields back. Is there
4882 further discussion on the amendment? If there is no further
4883 discussion, the vote occurs on the amendment. All those in
4884 favor shall signify by saying aye--

4885 Mr. {Rush.} Mr. Chairman--

4886 Mr. {Pitts.} --all those opposed, no.

4887 Mr. {Rush.} Mr. Chairman--

4888 Mr. {Pitts.} The nays have it.

4889 Mr. {Rush.} Mr. Chairman--

4890 Mr. {Pitts.} The amendment is not agreed to.

4891 Mr. {Rush.} Mr. Chairman, I ask for a roll call.

4892 Mr. {Pitts.} The gentleman requests a recorded vote.
4893 The Clerk will call the roll.
4894 The {Clerk.} Mr. Barton?
4895 Mr. {Barton.} No.
4896 The {Clerk.} Mr. Barton, no.
4897 Mr. Stearns?
4898 [No response.]
4899 The {Clerk.} Mr. Whitfield?
4900 Mr. {Whitfield.} No.
4901 The {Clerk.} Mr. Whitfield, no.
4902 Mr. Shimkus?
4903 Mr. {Shimkus.} No.
4904 The {Clerk.} Mr. Shimkus, no.
4905 Mr. Pitts?
4906 Mr. {Pitts.} No.
4907 The {Clerk.} Mr. Pitts, no.
4908 Mrs. Bono Mack?
4909 [No response.]
4910 The {Clerk.} Mr. Walden?
4911 Mr. {Walden.} No.
4912 The {Clerk.} Mr. Walden, no.
4913 Mr. Terry?
4914 Mr. {Terry.} No.
4915 The {Clerk.} Mr. Terry, no.

4916 Mr. Rogers?
4917 Mr. {Rogers.} No.
4918 The {Clerk.} Mr. Rogers, no.
4919 Mrs. Myrick?
4920 [No response.]
4921 The {Clerk.} Mr. Sullivan?
4922 Mr. {Sullivan.} No.
4923 The {Clerk.} Mr. Sullivan, no.
4924 Mr. Murphy?
4925 [No response.]
4926 The {Clerk.} Mr. Burgess?
4927 Dr. {Burgess.} No.
4928 The {Clerk.} Mr. Burgess, no.
4929 Mrs. Blackburn?
4930 Mrs. {Blackburn.} No.
4931 The {Clerk.} Mrs. Blackburn, no.
4932 Mr. Bilbray?
4933 Mr. {Pitts.} Mr. Bilbray?
4934 Mr. {Bilbray.} No.
4935 The {Clerk.} Mr. Bilbray, no.
4936 Mr. Bass?
4937 [No response.]
4938 The {Clerk.} Mr. Gingrey?
4939 Dr. {Gingrey.} No.

- 4940 The {Clerk.} Mr. Gingrey, no.
4941 Mr. Scalise?
4942 Mr. {Scalise.} No.
4943 The {Clerk.} Mr. Scalise, no.
4944 Mr. Latta?
4945 Mr. {Latta.} No.
4946 The {Clerk.} Mr. Latta, no.
4947 Mrs. McMorris Rodgers?
4948 Mrs. {McMorris Rodgers.} No.
4949 The {Clerk.} Mrs. McMorris Rodgers, no.
4950 Mr. Harper?
4951 Mr. {Harper.} No.
4952 The {Clerk.} Mr. Harper, no.
4953 Mr. Lance?
4954 Mr. {Lance.} No.
4955 The {Clerk.} Mr. Lance, no.
4956 Mr. Cassidy?
4957 Dr. {Cassidy.} No.
4958 The {Clerk.} Mr. Cassidy, no.
4959 Mr. Guthrie?
4960 Mr. {Guthrie.} No.
4961 The {Clerk.} Mr. Guthrie, no.
4962 Mr. Olson?
4963 Mr. {Olson.} No.

4964 The {Clerk.} Mr. Olson, no.
4965 Mr. McKinley?
4966 [No response.]
4967 The {Clerk.} Mr. Gardner?
4968 Mr. {Gardner.} No.
4969 The {Clerk.} Mr. Gardner, no.
4970 Mr. Pompeo?
4971 Mr. {Pompeo.} No.
4972 The {Clerk.} Mr. Pompeo, no.
4973 Mr. Kinzinger?
4974 Mr. {Kinzinger.} No.
4975 The {Clerk.} Mr. Kinzinger, no.
4976 Mr. Griffith?
4977 Mr. {Griffith.} No.
4978 The {Clerk.} Mr. Griffith, no.
4979 Mr. Waxman?
4980 [No response.]
4981 The {Clerk.} Mr. Dingell?
4982 [No response.]
4983 The {Clerk.} Mr. Markey?
4984 [No response.]
4985 The {Clerk.} Mr. Towns?
4986 Mr. {Towns.} Aye.
4987 The {Clerk.} Mr. Towns, aye.

4988 Mr. Pallone?
4989 Mr. {Pallone.} Aye.
4990 The {Clerk.} Mr. Pallone, aye.
4991 Mr. Rush?
4992 Mr. {Rush.} Aye.
4993 The {Clerk.} Mr. Rush, aye.
4994 Ms. Eshoo?
4995 Ms. {Eshoo.} Aye.
4996 The {Clerk.} Ms. Eshoo, aye.
4997 Mr. Engel?
4998 [No response.]
4999 The {Clerk.} Mr. Green?
5000 Mr. {Green.} Aye.
5001 The {Clerk.} Mr. Green, aye.
5002 Ms. DeGette?
5003 Ms. {DeGette.} Aye.
5004 The {Clerk.} Ms. DeGette, aye.
5005 Mrs. Capps?
5006 Mrs. {Capps.} Aye.
5007 The {Clerk.} Mrs. Capps, aye.
5008 Mr. Doyle?
5009 [No response.]
5010 The {Clerk.} Ms. Schakowsky?
5011 [No response.]

5012 The {Clerk.} Mr. Gonzalez?
5013 [No response.]
5014 The {Clerk.} Mr. Inslee?
5015 Mr. {Inslee.} Aye.
5016 The {Clerk.} Mr. Inslee, aye.
5017 Ms. Baldwin?
5018 Ms. {Baldwin.} Aye.
5019 The {Clerk.} Ms. Baldwin, aye.
5020 Mr. Ross?
5021 Mr. {Ross.} Aye.
5022 The {Clerk.} Mr. Ross, aye.
5023 Mr. Weiner?
5024 [No response.]
5025 The {Clerk.} Mr. Matheson?
5026 Mr. {Matheson.} Aye.
5027 The {Clerk.} Mr. Matheson, aye.
5028 Mr. Butterfield?
5029 Mr. {Butterfield.} Aye.
5030 The {Clerk.} Mr. Butterfield, aye.
5031 Mr. Barrow?
5032 Mr. {Barrow.} Votes aye.
5033 The {Clerk.} Mr. Barrow, aye.
5034 Ms. Matsui?
5035 Ms. {Matsui.} Aye.

5036 The {Clerk.} Ms. Matsui, aye.

5037 Ms. Christensen?

5038 Dr. {Christensen.} Aye.

5039 The {Clerk.} Ms. Christensen, aye.

5040 Ms. {Schakowsky.} Mr. Chairman--

5041 The {Clerk.} The gentlelady is not recorded.

5042 Ms. {Schakowsky.} Aye.

5043 The {Clerk.} Ms. Schakowsky, aye.

5044 Mr. {Pitts.} Are there any other members wishing to be

5045 recorded? Mr. Stearns?

5046 Mr. {Stearns.} No.

5047 The {Clerk.} Mr. Stearns, no.

5048 Mr. {Pitts.} Dr. Murphy?

5049 Mr. {Murphy.} No.

5050 The {Clerk.} Dr. Murphy, no.

5051 Mr. {Pitts.} Mr. Bass?

5052 Mr. {Bass.} No.

5053 The {Clerk.} Mr. Bass, no.

5054 Mr. {Pitts.} The Clerk will report the result.

5055 The {Clerk.} Mr. Chairman, on that there were 16 ayes,

5056 27 nays.

5057 Mr. {Pitts.} The amendment is not agreed to. The

5058 Ranking Member is recognized.

5059 Mr. {Pallone.} Mr. Chairman, pursuant to House Rule 11,

5060 clause 21, I request that all members have the requisite time
5061 to file supplemental minority or additional views to the
5062 bills considered at today's markup. I guess that would be
5063 for all the bills today, Mr. Chairman.

5064 Mr. {Pitts.} Without objection, so ordered. Are there
5065 any other amendments? If there is no further discussion, the
5066 question now occurs on favorably reporting the bill. All
5067 those in favor say aye, all those opposed say no. The ayes
5068 have it.

5069 Mr. {Pallone.} I request a roll call, Mr. Chairman.

5070 Mr. {Pitts.} The Clerk will call the roll.

5071 The {Clerk.} Mr. Barton?

5072 Mr. {Barton.} What are we doing here?

5073 Mr. {Pitts.} Recording the vote.

5074 The {Clerk.} Final.

5075 Mr. {Barton.} Aye.

5076 The {Clerk.} Mr. Barton, aye.

5077 Mr. Stearns?

5078 Mr. {Stearns.} Aye.

5079 The {Clerk.} Mr. Stearns, aye.

5080 Mr. Whitfield?

5081 Mr. {Whitfield.} Aye.

5082 The {Clerk.} Mr. Whitfield, aye.

5083 Mr. Shimkus?

5084 Mr. {Shimkus.} Aye.
5085 The {Clerk.} Mr. Shimkus, aye.
5086 Mr. Pitts?
5087 Mr. {Pitts.} Aye.
5088 The {Clerk.} Mr. Pitts, aye.
5089 Mrs. Bono Mack?
5090 [No response.]
5091 The {Clerk.} Mr. Walden?
5092 Mr. {Walden.} Aye.
5093 The {Clerk.} Mr. Walden, aye.
5094 Mr. Terry?
5095 Mr. {Terry.} Aye.
5096 The {Clerk.} Mr. Terry, aye.
5097 Mr. Rogers?
5098 Mr. {Rogers.} Aye.
5099 The {Clerk.} Mr. Rogers, aye.
5100 Mrs. Myrick?
5101 [No response.]
5102 The {Clerk.} Mr. Sullivan?
5103 Mr. {Sullivan.} Aye.
5104 The {Clerk.} Mr. Sullivan, aye.
5105 Mr. Murphy?
5106 [No response.]
5107 The {Clerk.} Mr. Burgess?

- 5108 Dr. {Burgess.} Aye.
- 5109 The {Clerk.} Mr. Burgess, aye.
- 5110 Mrs. Blackburn?
- 5111 Mrs. {Blackburn.} Aye.
- 5112 The {Clerk.} Mrs. Blackburn, aye.
- 5113 Mr. Bilbray?
- 5114 Mr. {Bilbray.} Aye.
- 5115 The {Clerk.} Mr. Bilbray, aye.
- 5116 Mr. Bass?
- 5117 Mr. {Bass.} Aye.
- 5118 The {Clerk.} Mr. Bass, aye.
- 5119 Mr. Gingrey?
- 5120 Dr. {Gingrey.} Aye.
- 5121 The {Clerk.} Mr. Gingrey, aye.
- 5122 Mr. Scalise?
- 5123 Mr. {Scalise.} Aye.
- 5124 The {Clerk.} Mr. Scalise, aye.
- 5125 Mr. Latta?
- 5126 Mr. {Latta.} Aye.
- 5127 The {Clerk.} Mr. Latta, aye.
- 5128 Mrs. McMorris Rodgers?
- 5129 Mrs. {McMorris Rodgers.} Aye.
- 5130 The {Clerk.} Mrs. McMorris Rodgers, aye.
- 5131 Mr. Harper?

5132 Mr. {Harper.} Aye.
5133 The {Clerk.} Mr. Harper, aye.
5134 Mr. Lance?
5135 Mr. {Lance.} Aye.
5136 The {Clerk.} Mr. Lance, aye.
5137 Mr. Cassidy?
5138 Dr. {Cassidy.} Aye.
5139 The {Clerk.} Mr. Cassidy, aye.
5140 Mr. Guthrie?
5141 Mr. {Guthrie.} Aye.
5142 The {Clerk.} Mr. Guthrie, aye.
5143 Mr. Olson?
5144 Mr. {Olson.} Aye.
5145 The {Clerk.} Mr. Olson, aye.
5146 Mr. McKinley?
5147 [No response.]
5148 The {Clerk.} Mr. Gardner?
5149 Mr. {Gardner.} Aye.
5150 The {Clerk.} Mr. Gardner, aye.
5151 Mr. Pompeo?
5152 Mr. {Pompeo.} Aye.
5153 The {Clerk.} Mr. Pompeo, aye.
5154 Mr. Kinzinger?
5155 Mr. {Kinzinger.} Aye.

5156 The {Clerk.} Mr. Kinzinger, aye.
5157 Mr. Griffith?
5158 Mr. {Griffith.} Aye.
5159 The {Clerk.} Mr. Griffith, aye.
5160 Mr. Waxman?
5161 [No response.]
5162 The {Clerk.} Mr. Dingell?
5163 [No response.]
5164 The {Clerk.} Mr. Markey?
5165 [No response.]
5166 The {Clerk.} Mr. Towns?
5167 Mr. {Towns.} No.
5168 The {Clerk.} Mr. Towns, no.
5169 Mr. Pallone?
5170 Mr. {Pallone.} No.
5171 The {Clerk.} Mr. Pallone, no.
5172 Mr. Rush?
5173 [No response.]
5174 The {Clerk.} Ms. Eshoo?
5175 Ms. {Eshoo.} No.
5176 The {Clerk.} Ms. Eshoo, no.
5177 Mr. Engel?
5178 [No response.]
5179 The {Clerk.} Mr. Green?

5180 Mr. {Green.} No.

5181 The {Clerk.} Mr. Green, no.

5182 Ms. DeGette?

5183 Ms. {DeGette.} No.

5184 The {Clerk.} Ms. DeGette, no.

5185 Mrs. Capps?

5186 Mrs. {Capps.} No.

5187 The {Clerk.} Mrs. Capps, no.

5188 Mr. Doyle?

5189 [No response.]

5190 The {Clerk.} Ms. Schakowsky?

5191 Ms. {Schakowsky.} No.

5192 The {Clerk.} Ms. Schakowsky, no.

5193 Mr. Gonzalez?

5194 [No response.]

5195 The {Clerk.} Mr. Inslee?

5196 Mr. {Inslee.} No.

5197 The {Clerk.} Mr. Inslee, no.

5198 Ms. Baldwin?

5199 Ms. {Baldwin.} No.

5200 The {Clerk.} Ms. Baldwin, no.

5201 Mr. Ross?

5202 [No response.]

5203 The {Clerk.} Mr. Weiner?

5204 [No response.]

5205 The {Clerk.} Mr. Matheson?

5206 Mr. {Matheson.} No.

5207 The {Clerk.} Mr. Matheson, no.

5208 Mr. Butterfield?

5209 Mr. {Butterfield.} No.

5210 The {Clerk.} Mr. Butterfield, no.

5211 Mr. Barrow?

5212 Mr. {Barrow.} No.

5213 The {Clerk.} Mr. Barrow, no.

5214 Ms. Matsui?

5215 Ms. {Matsui.} No.

5216 The {Clerk.} Ms. Matsui, no.

5217 Ms. Christensen?

5218 Dr. {Christensen.} No.

5219 The {Clerk.} Ms. Christensen, no.

5220 Mr. {Pitts.} Are there any other members wishing to be

5221 recorded? Dr. Murphy?

5222 Mr. {Murphy.} Aye.

5223 The {Clerk.} Mr. Murphy, aye.

5224 Mr. {Pitts.} Mr. Ross?

5225 The {Clerk.} Mr. Ross?

5226 Mr. {Ross.} No.

5227 The {Clerk.} Mr. Ross, no.

5228 Mr. {Pitts.} The Clerk will report the result.

5229 The {Clerk.} Mr. Chairman, on that there were 27 ayes,

5230 15 nays.

5231 Mr. {Pitts.} The ayes have it. The bill is reported

5232 favorably.

|

5233 H.R. 1217

5234 Mr. {Pitts.} The Chair calls up H.R. 1217 and asks the

5235 Clerk to report.

5236 The {Clerk.} H.R. 1217.

5237 [The information follows:]

5238 ***** INSERT 13 *****

|
5239 Mr. {Pitts.} Without objection, the first reading of
5240 the bill is dispensed with. So ordered. The Chair
5241 recognizes himself for 5 minutes.

5242 Section 4002 of PPACA establishes a prevention in public
5243 health fund and H.R. 1217 would repeal this section. The
5244 section authorizes the appropriations of and appropriates to
5245 the fund from the treasury the following amounts, \$500
5246 million for fiscal year 2010, \$750 million for 2011, \$1
5247 billion for 2012, \$1.25 billion for 2013, \$1.5 billion for
5248 2014 and for fiscal year 2015 and every fiscal year
5249 thereafter, \$2 billion.

5250 The Secretary of Health and Human Services has the full
5251 authority to use this account to fund any programs or
5252 activities under the Public Health Service Act that she
5253 chooses, without Congressional input, approval or oversight.
5254 On June 18, 2010, HHS announced \$250 million in Prevention
5255 and Public Health Fund dollars ``to support prevention
5256 activities and develop the Nation's public health
5257 infrastructure.'' On September 27, 2010, HHS announced
5258 another \$320 million in grants from the fund to ``expand the
5259 primary care workforce.'' On February 9, 2011, HHS announced
5260 an additional \$750 million from the fund for various
5261 prevention activities including preventing tobacco use,

5262 obesity, heart disease, stroke and other diseases and
5263 increasing immunizations. The goals of these three
5264 disbursements from the fund are laudable, and there is no
5265 doubt that we must focus on preventing disease rather than
5266 simply treating people once they become ill. But we must
5267 remember that this funding is over and above the amount that
5268 Congress has already decided should go to these activities
5269 and the amount that Congress has already appropriated for
5270 these activities.

5271 When Secretary Sebelius testified before the
5272 subcommittee, I asked her whether she needed further
5273 Congressional approval to spend the money from Section 4002
5274 fund, and she answered no. I then answered if she could fund
5275 activities above and beyond the level Congress appropriated,
5276 and she stated yes. This should concern every member that we
5277 have created a slush fund that the Secretary can spend from
5278 without any Congressional oversight or approval. No one here
5279 can tell us what this funding will be used for next year or
5280 5, 10, 20 or 50 years from now, and this fund exists in
5281 perpetuity.

5282 My friends on the other side of the aisle bring up
5283 potential uses for this funding like workforce development.
5284 There is no doubt that we are facing a provider shortage,
5285 especially in primary care nursing. But there is no

5286 guarantee that the Secretary will choose to fund workforce
5287 development with this money. Also, the priorities of the
5288 next Secretary may be very different from those of Secretary
5289 Sebelius, and that Secretary will also have complete
5290 discretion over the fund. We can't predict how the money
5291 will be spent and worse, we can't even influence it.

5292 I would suggest that if you wanted more funding to go
5293 toward training more doctors and nurses, the healthcare law
5294 should have contained a section explicitly authorizing that
5295 funding. If you are hoping that the Secretary will use the
5296 fund to finance smoking prevention and cessation programs or
5297 if you are hoping that money will be spent on obesity or
5298 disease prevention, and there is nothing wrong with any of
5299 these purposes, you must realize that you are not guaranteed
5300 a dime. A direct authorization should have been written into
5301 the law. By eliminating this fund, we are not cutting any
5302 specific program or activity because we have no idea what
5303 programs or activities will receive this funding.

5304 I am not against prevention and wellness. That is not
5305 what this is about, despite what some of my colleagues on the
5306 other side of the aisle will say. This is about reclaiming
5307 our oversight role of how federal tax dollars should be used.
5308 I urge support for my bill, H.R. 1217, and at this point, for
5309 what purposes does the gentleman--

5310 Mr. {Pallone.} Strike the last word.

5311 Mr. {Pitts.} The Chair recognizes the gentleman for 5
5312 minutes.

5313 Mr. {Pallone.} Mr. Chairman, since the Affordable Care
5314 Act was enacted, every state has benefited from the
5315 prevention and wellness fund. This year over \$750 million in
5316 grants were dispersed, building on a \$500 million investment
5317 last year, and repealing this program would mean putting the
5318 brakes on investments that are already beginning to make a
5319 difference.

5320 Now, you said how can the money be spent? Well, I will
5321 use my own State in New Jersey. Many of my constituents have
5322 benefited, and I should also add Congressman Lance, have
5323 benefitted from over \$15 million in prevention in public
5324 health grants for HIV prevention, tobacco cessation, mental
5325 healthcare, critical health public infrastructure
5326 improvements as well as support for primary care training and
5327 workforce development. Those are all examples, you asked how
5328 the money could be spent.

5329 In your own State, in your State, Chairman Pitts, and
5330 Representative Murphy's home State of Pennsylvania, there
5331 have been \$22.5 million in grants dispersed through the
5332 Prevention and Public Health Fund, everything again from
5333 community and clinical prevention, public health

5334 infrastructure, workforce development, the list goes on.

5335 Now, you also asked, Mr. Chairman, or suggested that
5336 Congress doesn't have any control over the fund. Contrary to
5337 what our Republicans have suggested, the mandatory spending
5338 nature of the fund does not disempower appropriators if
5339 Congress does its job in timely fashion. Under Section
5340 4002(d) of the Affordable Care Act, House and Senate
5341 Appropriations Committees have the explicit authority to
5342 allocate the fund at their discretion through the
5343 appropriations process. In fact, the Senate and the House
5344 appropriators attempted to allocate the 2011 Omnibus Bill
5345 under the 2011 Omnibus Bill, but that legislation was
5346 ultimately not enacted, and only under circumstances such as
5347 this when Congress fails to pass a Labor, Health and Human
5348 Services, Education, Related Agencies appropriations bill,
5349 does the Secretary of HHS have the authority to allocate the
5350 prevention fund.

5351 In fact, Congress should allocate the fund. Congress
5352 has the authority to allocate the fund. The Secretary only
5353 does it if the Congress doesn't act.

5354 Now, I just want to use my last 2-1/2 minutes talking
5355 about talking about how prevention saves money because I
5356 really think that part of the problem on the other side of
5357 the aisle is a lot of my Republican colleagues really don't

5358 think that prevention saves money, and it is simply not true.
5359 It does save money. The prevention fund is one of the most
5360 cost-effective uses of our healthcare dollars. Seventy-five
5361 percent of the \$2 trillion in healthcare costs are spent on
5362 treatment of chronic diseases, many of which can be
5363 prevented. Obesity alone costs us \$147 billion each year.
5364 Chronic diseases costs an additional trillion dollars each
5365 year in lost productivity.

5366 It is not surprising that prevention can save money. It
5367 is truly bending the cost curve. According to researchers at
5368 the New York Academy of Medicine, an investment of \$10 per
5369 person per year improving community-based interventions to
5370 increase physical activity, improve nutrition and prevent
5371 smoking can save the country more than \$16 billion each year.
5372 That is a return of \$5.60 for every dollar invested. The
5373 Urban Institute estimates in certain proven community-based
5374 diabetes prevention programs can save as much as \$191 billion
5375 over 10 years. Many immunizations save money. According to
5376 the CDC, for every dollar spent on diphtheria- tetanus-
5377 pertussis vaccine, we save \$27. Other vaccines save between
5378 \$5 and \$26. Childhood injury prevention saves money.
5379 According to the Pacific Institute for Research and
5380 Evaluation, for every \$46 spent on child safety seats, we
5381 save \$900 in medical costs.

5382 Now, I really think that part of the problem here is
5383 that many of my Republican colleagues don't believe that
5384 prevention saves money. We are trying to save money here.
5385 That is what this is all about. My friends on the other side
5386 can say as often as they want that prevention isn't going to
5387 save money. In fact, it does. It is the most effective way
5388 to use our healthcare dollars, and to me, it is so strange
5389 that you want to eliminate this prevention fund, because I
5390 don't think there is anything that we could have done in this
5391 healthcare reform or the Affordable Care Act that does more
5392 to save money, save lives, prolong lives, increase
5393 productivity, all the positive things that I think all of us
5394 feel very strongly about. I just think it is very sad that,
5395 you know, we focus on this as one of the five bills today
5396 because I think this is something that I think all of us
5397 should support. And therefore, I do oppose the bill that is
5398 before us.

5399 Mr. {Pitts.} The Chair thanks the gentleman. Are there
5400 any amendments to the bill? The gentlelady from California,
5401 Ms. Matsui is recognized to offer an amendment.

5402 Ms. {Matsui.} Thank you, Mr. Chairman. Mr. Chairman,
5403 I--

5404 Mr. {Pitts.} The Clerk will report the amendment.

5405 Ms. {Matsui.} I am ahead of myself.

5406 The {Clerk.} An amendment offered by Ms. Matsui.

5407 [The information follows:]

5408 ***** INSERT 14 *****

|
5409 Mr. {Pitts.} Without objection, the reading of the
5410 amendment is dispensed with, and the gentlelady is recognized
5411 for 5 minutes in support of her amendment.

5412 Ms. {Matsui.} Thank you, Mr. Chairman. I am adamantly
5413 opposed to this legislation. This bill would prevent much
5414 needed and longer overdue guaranteed funding to bolster
5415 primary and preventive care in this country.

5416 We spent \$2.5 trillion, that is trillion with a T, on
5417 healthcare as a country in 2009. Seventy percent of that was
5418 spent on managing chronic conditions and to treat preventable
5419 diseases. Yet, we spend only 3 cents on prevention for every
5420 healthcare dollar spent. Federal funding for prevention has
5421 been erratic which means that prevention priorities often go
5422 unfunded on an annual basis. That is why this dedicated
5423 funding is so important to the future health of our country.

5424 The Affordable Care Act refocuses much of our health
5425 system on the delivery of care to prevent disease and promote
5426 healthier living through incentives for patients to utilize
5427 primary care as opposed to treating people until after they
5428 get sick. By refocusing on disease prevention as the health
5429 reform law does, our healthcare system would be more
5430 effective for patients, more efficient for providers, and
5431 more affordable for Americans. This fund will invest at the

5432 state, local and community level an effective prevention
5433 effort such as childhood obesity prevention, tobacco
5434 cessation and cancer awareness.

5435 Chronic diseases like cancer account for seven in ten
5436 deaths in this country. The costs associated with treating
5437 people with chronic disease in California reached nearly \$27
5438 billion recently. Many of these cases could have potentially
5439 been prevented or managed better had adequate primary care
5440 programs and funding been in place.

5441 California has received over \$40 million in grants from
5442 the Prevention and Public Health Fund to enhance the public
5443 health infrastructure, expand the primary care workforce and
5444 to bolster community prevention programs such as cancer
5445 awareness and tobacco cessation. Without this funding,
5446 community cancer wellness programs may not be able to survive
5447 given the budgetary crisis in California and difficult
5448 economic times throughout most of the states. This is
5449 troubling as cancer rates among women have actually been
5450 declining in California due in large part to increased
5451 awareness by women and increased efforts by public health
5452 officials. My amendment seeks to ensure that this decline
5453 continues. It would ensure that increased numbers of women
5454 receive cancer screenings and consultations with their
5455 doctors. Short of a cure, prevention and awareness are two

5456 of our best tools in the fight against cancer. By providing
5457 adequate funding to primary care, especially at the local
5458 level, we can help ensure that women are more aware of the
5459 risk factors and signs for cancer.

5460 I urge my colleagues to vote for this amendment. I
5461 yield back the balance of my time.

5462 Mr. {Pitts.} Is there further discussion on the
5463 amendment? The Chair recognizes the gentleman from Illinois,
5464 Mr. Shimkus, for 5 minutes.

5465 Mr. {Shimkus.} Thank you, Mr. Chairman, to respectfully
5466 speak out against the amendment.

5467 I think the best way to ensure that cancer screening and
5468 testing occur is to pass a law signed by the President and
5469 then you fight through the appropriation process. Everything
5470 that my colleague mentioned that might be funded or could be
5471 funded, we have no idea whether it will be funded because it
5472 is at the discretion of the Secretary. We have empowered her
5473 to make these decision upwards of \$17.75 billion. That is
5474 why it is a slush fund. There is no intervention. There is
5475 no decision by us to public policy.

5476 We had this debate last fall, and I mentioned it earlier
5477 when we brought, the Committee did, we brought 20 public
5478 health bills through the Committee. Why? Because we were
5479 unsure whether the Secretary would fund these programs. And

5480 so even though we had the healthcare law, we still felt, and
5481 this is when the Democrats were in the majority, that we
5482 needed to pass these provisions in law to ensure that they
5483 were done.

5484 \$17.75 billion, that means we will borrow \$7.45 billion.
5485 I mean, we are borrowing 42 cents on every dollar. And the
5486 other thing about this fund is that is \$2 billion in
5487 perpetuity which means forever. And if we don't change the
5488 fiscal position of this country, and it will probably get
5489 worse in this provision, we will be borrowing \$800 million a
5490 year approximately just to fund the Secretary's slush fund on
5491 this.

5492 Now, when H.R. 3200 was moved through the Committee,
5493 which was your all bill, you addressed this issue, and in the
5494 House passed version of the healthcare law, it clearly
5495 demonstrated on page 665 that the amounts in the fund would
5496 be authorized to be appropriated for carrying out various
5497 designated provisions in Division C and would be in addition
5498 to any other amounts authorized to be appropriated for such
5499 purposes. Remember, as Dr. Burgess always says, this is the
5500 Senate bill that we had to accept on the floor that got
5501 passed and signed into law. It wasn't the House passed
5502 version, and your House passed version didn't have this. The
5503 House passed version had that these things had to be

5504 authorized, which that is all we are saying. They should be
5505 authorized. It should go through the regular process. So
5506 that is why if we want to get control and not provide this,
5507 if we want to reclaim the authority of the Committee, if we
5508 want to do what Committees do which is authorize, that we
5509 should not support a \$17.75 billion slush fund, and I would
5510 like to yield to my colleague from Kentucky who would like to
5511 address this.

5512 Mr. {Whitfield.} Well, thank you very much, and the
5513 comment I would make is that I am not aware of any criteria
5514 in providing this money to grantees, as a matter of fact, and
5515 we have concrete evidence of money being spent under this
5516 fund that would raise serious questions about what good is
5517 this really doing for healthcare immediately. For example,
5518 one community in California, the grantee used the money to
5519 pass a city ordinance to ban any fast food restaurant. Well,
5520 in one sense, that may be good. In another sense, that
5521 prevents the creation of jobs that people may have necessary
5522 to have insurance to provide health insurance for their
5523 children. So there is no criteria. In addition to that, in
5524 the District of Columbia, they purchased \$1 million worth of
5525 Blackberries so that people on a smoking cessation program
5526 could call their counselor if they felt the urge to smoke.

5527 So what kind of guidelines do we have with this fund?

5528 With that, I would yield back my 20 seconds.

5529 Mr. {Shimkus.} And just reclaiming the final 17
5530 seconds, I would say the authorization process that we go
5531 through really helps us identify problems in the bills and
5532 changes those bills which we have done in the process.
5533 Allowing the Secretary her own discretion doesn't give us
5534 that opportunity. I yield back my time.

5535 Mr. {Pitts.} The gentleman's time is expired. For what
5536 purposes does the lady, Ms. Christensen, seek recognition?

5537 Dr. {Christensen.} Strike the last word, Mr. Chairman.

5538 Mr. {Pitts.} The gentlelady is recognized for 5
5539 minutes.

5540 Dr. {Christensen.} Thank you, and I want to speak in
5541 support of the amendment. I am not sure that any amendment
5542 could improve on this piece of legislation, but my colleague
5543 from California probably comes as close as you can get to
5544 improving upon it. So I support the amendment.

5545 But I really don't understand why my Republican
5546 colleagues are doing this. You have supported prevention
5547 efforts in the past, efforts to empower individuals and equip
5548 them with the tools necessary to take control of their health
5549 and to make the changes necessary to lead healthier lives.
5550 Helping them to take personal responsibility in them. As I
5551 understand it, you have always been in favor of that

5552 Repealing the Prevention and Public Health Fund will
5553 hurt Americans across the spectrum and set the stage for an
5554 even more unhealthy Nation than we are today. I do not like
5555 being behind all of the industrialized nations, and most
5556 health indicators, including infant and maternal mortality.
5557 All of us should want to save the lives of mothers and
5558 children, and this fund would be a fund that would help us to
5559 do that.

5560 But beyond improving health, it is precisely this fund
5561 that would provide the greatest savings and have the biggest
5562 impact on lowering healthcare costs and help to reduce a
5563 deficit that all of us are concerned about.

5564 Just as an example, one study found that investing \$10
5565 per person in a proven community-based, disease prevention
5566 program could yield savings of more than \$2.8 billion
5567 annually, and by 10 years, almost \$18 billion. This is core
5568 of the healthcare reform effort. It is needed, not only for
5569 individuals and families, but it is needed for our Nation.
5570 And I just would like to add we can't predict what might
5571 happen in the next few years. We didn't predict SARS just a
5572 few years ago. We were worrying about an avian flu epidemic,
5573 and we could still have that epidemic. The Secretary needs
5574 the flexibility to decide where that funding needs to go.
5575 This bill helps protect the health of all of our

5576 constituents, it helps our country to be healthier Nation and
5577 I strongly oppose the bill but I will support my colleague's
5578 amendment.

5579 Mr. {Pitts.} The Chair thanks the gentlelady. I
5580 recognize the gentleman from Georgia, Dr. Gingrey, for 5
5581 minutes.

5582 Dr. {Gingrey.} Mr. Chairman, thank you, and I want to
5583 go back to Counsel, and I asked Counsel this same question
5584 last week but I think it is appropriate to ask again since
5585 the gentleman from New Jersey touched on this subject.

5586 Counsel, I had previously asked whether the Congress has
5587 the power to appropriate funds absent Section 4002(d) of the
5588 Patient Protection Affordable Care Act. You answered yes
5589 last week, that Congress did, and I repeat that question.
5590 Does the Congress have the power to appropriate funds absent
5591 Section 4002(d) of Obamacare?

5592 {Counsel.} Yes.

5593 Dr. {Gingrey.} Well, you know, some have criticized
5594 that eliminating this slush fund it established by the
5595 Secretary of Health and Human Services, by eliminating that
5596 it eliminates funding for activities like prevention and
5597 obesity, and I think there is some misunderstanding of how
5598 the fund works.

5599 The fund can only be used for existing programs and is

5600 designed to be in addition to the level of funding that
5601 Congress provides. And I will note that the House healthcare
5602 bill did contain a public health fund. However, the authors
5603 of the House bill made that fund subject to future
5604 appropriations, even though every member of the other side
5605 claims this fund must be mandatory. Not one offered an
5606 amendment to the House health bill marked up in this
5607 Committee that would have converted that discretionary fund
5608 to mandatory spending at that time. Every member who
5609 supports this fund because it provides additional money for a
5610 project they deem worthy should understand that no one knows
5611 where this money will be spent. If you support increased
5612 smoking cessation programs, the only way to guarantee that
5613 that funding goes to those programs is to repeal this slush
5614 fund, as this bill calls for, and appropriate the money
5615 through the regular appropriations process. Could this be
5616 used for jungle gyms and bike paths? And the answer, as
5617 silly as that sounds, is yes.

5618 So for every program that supporters cite, there is an
5619 equal probability that the funds will be used for something
5620 entirely different with which they may very well disagree
5621 with. For that reason I am very much opposed to the
5622 amendment, Mr. Chairman, and I yield back my time.

5623 The {Chairman.} [Presiding] The gentleman yields back

5624 his time. Are there other members wishing to speak on the
5625 amendment? The gentlelady from California is recognized for
5626 5 minutes.

5627 Mrs. {Capps.} Thank you, Mr. Chairman. I do want to
5628 associate myself strongly with this amendment by our
5629 colleague, Ms. Matsui, and I do want to also speak in
5630 opposition to the underlying bill, 1217, a bill that would
5631 defund a really strategic investment into our Nation's long-
5632 term health and that is the Prevention and Public Health
5633 Fund.

5634 This fund is the critical piece to making our Nation
5635 healthier, hanging from a sickness-based system, very costly,
5636 actually way too costly, into a wellness-based, prevention-
5637 and education-based, primary care-based healthcare system.
5638 The attempts by the leadership of this Committee to repeal
5639 this section of the healthcare law is not only misguided but
5640 it is really foolish. Before the Affordable Care Act became
5641 law, we had numerous bipartisan discussions of how the status
5642 quo was not working. We lived in a Nation, as I said,
5643 focused only on sick care and ignoring the monetary and
5644 quality of life savings that can come with prevention, and
5645 the cost to our healthcare system from preventable disease
5646 highlights the imbalance in the system as we have known it in
5647 the past.

5648 Just a five weeks ago this Committee heard from the
5649 governors of Michigan and Mississippi about the tough
5650 financial times they are facing and how Medicaid spending is
5651 impacting their budgets. One of the key drivers in these
5652 costs is preventable chronic disease, and that is what makes
5653 this bill so short-sighted. The Prevention and Public Health
5654 Funds helps defray the growth of both public and private
5655 healthcare costs by preventing the chronic diseases and
5656 delaying their onset that drives so much of the entitlement
5657 spending, all the while improving the lives of the people
5658 that are afflicted by it. And states and counties all over
5659 the country are realizing this.

5660 As I mentioned last week in my home State of California,
5661 we are putting these kinds of funds to work by investing in
5662 programs to promote tobacco control, to implement tobacco
5663 cessation services and campaigns, to build up our State and
5664 local capacity to prevent and detect and respond to
5665 infectious disease outbreaks and to take steps to slow the
5666 alarming rise in obesity rates. And there has been a big
5667 objection in this underlying legislation on prevention funds
5668 and public health funds to the fact that there is no mandate
5669 for them, that they are flexible. And I would say that is
5670 exactly the strength of the legislation, is that it gives
5671 flexibility to local jurisdictions who know exactly what

5672 effective programs are needed because they know the
5673 populations and the kind of programs that they will respond
5674 to in terms of changing behaviors. It is one of the most
5675 difficult challenges you face in any community, and to have
5676 those dictated from on high goes cross-purpose to the
5677 grassroots efforts that are springing up across this Nation
5678 to deal with some of our epidemics, like obesity.

5679 We are also using these funds to support and train our
5680 current and next generation of public health professionals,
5681 to build our healthcare workforces so we can assure all
5682 Americans have access to quality preventive care. And this
5683 is at a time when counties have laid off thousands of staff,
5684 struggle to maintain essential public health services through
5685 our downturn times in the recession, so the program becomes
5686 even more critical.

5687 It is a sound investment. Reports have shown that an
5688 investment of \$10 per person per year in a proven community-
5689 based program to increase physical activity, improve
5690 nutrition, prevent smoking or other tobacco use could save
5691 the country more than \$16 billion annually within 5 years.
5692 That is a return of \$5 for every \$1 spent, not to mention the
5693 quality of life improvements for the people who are enjoying
5694 the health benefits of this effort. That is why so many
5695 national groups, so many local governments are so opposed to

5696 this dangerous bill.

5697 So I want to join with them and urge a yes vote on the
5698 Matsui amendment and a no vote on the underlying bill. And I
5699 yield back the balance of my time.

5700 The {Chairman.} The gentlelady yields back her time.
5701 Are there further members wishing to speak? The gentleman is
5702 recognized for 5 minutes.

5703 Dr. {Cassidy.} I have a question for the author. Why
5704 would not California fund this, the State of California?

5705 Ms. {Matsui.} Well, we do have some funding, but as you
5706 know, just like all states, we are having some difficulties
5707 in the budget. But I must say, we are talking here about
5708 this Affordable Healthcare Act, which is law here.

5709 Dr. {Cassidy.} Well, I think--

5710 Ms. {Matsui.} Nationwide law.

5711 Dr. {Cassidy.} Reclaiming my time. I think there is a
5712 relationship you just acknowledged about the fiscal health of
5713 a government entity and the ability to sustain even good
5714 programs. Now, maybe where we differ is that apparently, if
5715 it is federal money, it is okay to borrow 43 percent of it,
5716 but if it is state money, you can't. And so I agree, these
5717 are great programs, many of them, not all of them, but maybe
5718 our disagreement is whether or not when we go into it we
5719 should have a plan to be able to fiscally sustain.

5720 Ms. {Matsui.} Will the gentleman yield?

5721 Dr. {Cassidy.} I will.

5722 Ms. {Matsui.} We are talking here about healthcare,
5723 access to healthcare. We are talking about having healthier
5724 Americans. And quite frankly, I mean, most people here truly
5725 believe that prevention is probably the best way to do this.
5726 It is the best way to use our federal dollars in order to
5727 ensure we have healthier Americans--

5728 Dr. {Cassidy.} Reclaiming my time.

5729 Ms. {Matsui.} --so they won't have the chronic
5730 diseases.

5731 Dr. {Cassidy.} Reclaiming my time. Without going into
5732 the argument of the value of preventative medicine, which I
5733 strongly believe in many aspects of preventative medicine,
5734 the fact is California doesn't do it because they are in a
5735 budget crisis. You said they, like many other states, don't
5736 have the money. Now, we can print money, we can borrow
5737 money, and we are borrowing it from our future generations,
5738 but it is clear that we also have budgetary problems. I
5739 guess what I don't understand is why the federal budgetary
5740 problems differ from the state budgetary problems.

5741 Ms. {Matsui.} Will the gentleman yield?

5742 Dr. {Cassidy.} I will.

5743 Mrs. {Capps.} I appreciate your yielding to me, perhaps

5744 because I am also from California. I wanted to point out and
5745 speaking also on behalf of the local initiatives that these
5746 preventative funds are used for. In almost every case that I
5747 know of in California, it is a matching fund, and in fact,
5748 then it is a multiplying effect that the federal dollars have
5749 when they come into a community, when they are requested by
5750 the community for programs that have already been put in
5751 place--

5752 Dr. {Cassidy.} Reclaiming my time. It is still a
5753 fundamental question. Why doesn't the local or state
5754 government pay the whole freight? Now, the fact is if it
5755 comes from the Federal Government, it is considered to be
5756 free money, but it turns out it is not free money. The
5757 federal taxpayers are paying or it or it is being borrowed.
5758 And I guess I don't see why there is a distinction drawn
5759 between indebtedness on the part of states and local
5760 governments and that of the federal liability. Is there a
5761 distinction anymore than, well, it is federal so it is free
5762 as opposed to no, we should have a different standard for
5763 local, state versus federal?

5764 Mr. {Waxman.} Will the gentleman yield to me?

5765 Dr. {Cassidy.} I will

5766 Mr. {Waxman.} We do have federal programs because we
5767 recognize that every child in this country ought to have an

5768 opportunity for good health, and that is why we have a
5769 Medicaid program with certain standards that all children be
5770 covered. The states may not be able to choose to pay for
5771 that if they did it on their own. And we have such a strong
5772 involvement in, as you put it often on your side of the
5773 aisle, government takeover. Well, government is not taking
5774 over healthcare, but we are certainly trying to make sure
5775 that we spend less money in healthcare, and one of the best
5776 ways to do that is prevention. So for the Federal
5777 Government, there is a clear reason to spend the money.

5778 Now, we can handle that a lot better than the states
5779 when we have a time like now when--

5780 Dr. {Cassidy.} Reclaiming my time. I am not quite sure
5781 why you can do it better than the states.

5782 Mr. {Waxman.} Well, I was going to give you an answer.

5783 Dr. {Cassidy.} Reclaiming my time. If the only
5784 limiting factor for this program as described in this
5785 amendment is money, well, then, those who are closest to the
5786 situation should know where to spend it, and that would be
5787 the local or state government. California has got a lot of
5788 wealthy people.

5789 Mr. {Waxman.} Will the gentleman yield?

5790 Dr. {Cassidy.} I will

5791 Mr. {Waxman.} It is harder for the people at the local

5792 level during a time of recession, particularly, to raise the
5793 money, and what we need--

5794 Dr. {Cassidy.} Reclaiming my time, then, my point being
5795 there seems to be a perception that if it is federal, it is
5796 free money, that sure, we don't have to raise it on a federal
5797 level, we just kind of, my gosh, borrow it, and there is no
5798 harm, no foul, because it is a future generation that pays it
5799 back.

5800 Mr. {Waxman.} This is not--if the gentleman would
5801 further?

5802 Dr. {Cassidy.} I will.

5803 Mr. {Waxman.} This is not money that is going to the--
5804 it is going to programs, not to the states to help them with
5805 their budget. These are programs.

5806 Dr. {Cassidy.} No, but I was told, reclaiming my time,
5807 that the reason the State isn't funding it is because the
5808 State is out of money, but apparently, the Federal Government
5809 is not, at least that is the perception of those who advocate
5810 for this deficit spending. I am out of time, but I
5811 appreciate the conversation. I yield back.

5812 The {Chairman.} The gentleman's time is expired. The
5813 gentleman from California, Mr. Waxman, is recognized for 5
5814 minutes.

5815 Mr. {Waxman.} Thank you, Mr. Chairman. Look, these are

5816 all very good questions, and it also becomes a recipe if we
5817 follow them to their logical extreme that problems can be
5818 ignored by both the federal and the state level. The state
5819 and local level have a harder time raising money. L.A.
5820 County, for example, is the healthcare system of last resort,
5821 and yet, they have that requirement under California law and
5822 they are the least able to raise the money. The State is a
5823 little better off. But everybody is having a difficult time
5824 paying for things. It really does become the burden of the
5825 Federal Government which has a much greater say over the
5826 economy--

5827 Dr. {Cassidy.} Will the gentleman yield?

5828 Mr. {Waxman.} I am not going to yield to you because I
5829 am in the middle of my sentence and I don't have to yield in
5830 the middle of a sentence until I have completed my thought.
5831 The Federal Government has a much better say over the
5832 economy. For example, with this recession, one of the best
5833 things we can do would be to make investments that the local
5834 governments couldn't possibly undertake but can produce jobs.
5835 We ought to be doing a lot more infrastructure projects
5836 because those are things that are needed throughout this
5837 country. For business to succeed we need the infrastructure
5838 to be rebuilt, and no better time could this happen than now
5839 when borrowing low, interest rates are low, and it would

5840 provide jobs. The thing that we have a disagreement on I
5841 think on a party-line basis is that I speak for myself, and I
5842 know many Democrats, but I don't want to be so presumptuous
5843 to speak for others, that if we make investments, it produces
5844 jobs. When people work, it produces income for them and it
5845 produces more income for local and Federal Government
5846 coffers.

5847 One of the reasons why I think some of the cuts that are
5848 being proposed are so damaging is that those are cuts of
5849 people's jobs, and when they are uninsured, excuse me, when
5850 they are unemployed, then it is tough for them, it is tougher
5851 on the local government, it is also tough for the Federal
5852 Government. I have heard many people on the other side of
5853 the aisle say President Obama has seen in the last month a
5854 widening of the deficit. Well, of course. There is a
5855 widening of the deficit because he inherited a very deep
5856 recession, the biggest and most severe recession since the
5857 Great Depression. Well, you have got to deal with that
5858 problem, not act as if the dominant issue before us is how to
5859 cut people out of work because we are going to cut the
5860 expenditures for the jobs that they now have.

5861 We are talking about a very small amount of money to
5862 keep people healthier, and that should come from the Federal
5863 Government because we are better able to handle it, we can

5864 control the economy better, we can get people working faster,
5865 hopefully we can do things that are fair in providing just
5866 opportunities in the economic patterns of our country. That
5867 is why I think it is important that we do this at the federal
5868 level. The states and local governments will not have the
5869 ability to do it until times get better, and when times are
5870 better, states could do more things. But until we get people
5871 to work and do some of the things that are important for the
5872 future for people to get jobs and work, all these other cuts
5873 like the savaging of Medicare and Medicaid that is being
5874 proposed in the budget I think will have a negative impact on
5875 the economy and certainly a negative impact on middle class
5876 and lower income people. Who is asking me to yield?

5877 Dr. {Cassidy.} Cassidy, over here. I am sorry.

5878 Mr. {Waxman.} Yes, yield.

5879 Dr. {Cassidy.} Maybe the real difference between the
5880 two sides of the aisle is I see no difference from a taxpayer
5881 writing a check to L.A. County and that same taxpayer writing
5882 the check to California, and the State of California, and to
5883 the Federal Government. I mean, the fact is the same
5884 taxpayer is just spreading it three different places. Now
5885 there is again a perception that the check going to the
5886 Federal Government is an expandable check, that somehow there
5887 is no reason it has to be based into the income of the

5888 Nation, but rather it is just free money. Now, there is lots
5889 of--

5890 Mr. {Waxman.} Reclaiming my time.

5891 Dr. {Cassidy.} Oh, I am sorry.

5892 Mr. {Waxman.} Reclaiming my time. I don't agree with
5893 that. I know you have stated that it is free money if it is
5894 coming from Washington, but I don't agree with that. A
5895 taxpayer, we have a broader base of federal taxpayers to do
5896 things in the federal and the national interest. We ought
5897 not to take on everything because we do have a system of
5898 government where we have local governments as well as the
5899 Federal Government. This is the responsibility I believe for
5900 the national government, especially since we are spending so
5901 much money in the healthcare services area. Medicaid and
5902 Medicare and other public health things come from Washington,
5903 and we ought to continue and we will let the states and local
5904 governments do other things. But this is already a clear
5905 responsibility, and I think we are better able to handle it.

5906 The {Chairman.} The gentleman's time is expired. If
5907 there are no further members seeking time, I think we can
5908 vote on this amendment. All those in favor of the amendment
5909 say aye, all those opposed say no. The no's appear to have
5910 it, the no's have it, the amendment is not adopted.

5911 Are there further amendments to the bill? If not, the

5912 question now is on passage of H.R. 1217. All those in favor
5913 say aye, all those oppose say no--

5914 Mr. {Pallone.} Mr. Chairman, I would ask for a roll
5915 call.

5916 The {Chairman.} Roll call is asked, the Clerk will read
5917 the names.

5918 The {Clerk.} Mr. Barton?

5919 Mr. {Barton.} Aye.

5920 The {Clerk.} Mr. Barton, aye.

5921 Mr. Stearns?

5922 [No response.]

5923 The {Clerk.} Mr. Whitfield?

5924 [No response.]

5925 The {Clerk.} Mr. Shimkus?

5926 Mr. {Shimkus.} Yes.

5927 The {Clerk.} Mr. Shimkus, aye.

5928 Mr. Pitts?

5929 Mr. {Pitts.} Aye.

5930 The {Clerk.} Mr. Pitts, aye.

5931 Mrs. Bono Mack?

5932 [No response.]

5933 The {Clerk.} Mr. Walden?

5934 Mr. {Walden.} Aye.

5935 The {Clerk.} Mr. Walden, aye.

5936 Mr. Terry?
5937 Mr. {Terry.} Aye.
5938 The {Clerk.} Mr. Terry, aye.
5939 Mr. Rogers?
5940 Mr. {Rogers.} Aye.
5941 The {Clerk.} Mr. Rogers, aye.
5942 Mrs. Myrick?
5943 [No response.]
5944 The {Clerk.} Mr. Sullivan?
5945 Mr. {Sullivan.} Aye.
5946 The {Clerk.} Mr. Sullivan, aye.
5947 Mr. Murphy?
5948 Mr. {Murphy.} Aye.
5949 The {Clerk.} Mr. Murphy, aye.
5950 Mr. Burgess?
5951 [No response.]
5952 The {Clerk.} Mrs. Blackburn?
5953 Mrs. {Blackburn.} Aye.
5954 The {Clerk.} Mrs. Blackburn, aye.
5955 Mr. Bilbray?
5956 [No response.]
5957 The {Clerk.} Mr. Bass?
5958 Mr. {Bass.} Aye.
5959 The {Clerk.} Mr. Bass, aye.

5960 Mr. Gingrey?
5961 Dr. {Gingrey.} Aye.
5962 The {Clerk.} Mr. Gingrey, aye.
5963 Mr. Scalise?
5964 Mr. {Scalise.} Aye.
5965 The {Clerk.} Mr. Scalise, aye.
5966 Mr. Latta?
5967 Mr. {Latta.} Aye.
5968 The {Clerk.} Mr. Latta, aye.
5969 Mrs. McMorris Rodgers?
5970 [No response.]
5971 The {Clerk.} Mr. Harper?
5972 Mr. {Harper.} Aye.
5973 The {Clerk.} Mr. Harper, aye.
5974 Mr. Lance?
5975 Mr. {Lance.} Aye.
5976 The {Clerk.} Mr. Lance, aye.
5977 Mr. Cassidy?
5978 Dr. {Cassidy.} Aye.
5979 The {Clerk.} Mr. Cassidy, aye.
5980 Mr. Guthrie?
5981 Mr. {Guthrie.} Aye.
5982 The {Clerk.} Mr. Guthrie, aye.
5983 Mr. Olson?

5984 Mr. {Olson.} Aye.

5985 The {Clerk.} Mr. Olson, aye.

5986 Mr. McKinley?

5987 [No response.]

5988 The {Clerk.} Mr. Gardner?

5989 Mr. {Gardner.} Aye.

5990 The {Clerk.} Mr. Gardner, aye.

5991 Mr. Pompeo?

5992 Mr. {Pompeo.} Aye.

5993 The {Clerk.} Mr. Pompeo, aye.

5994 Mr. Kinzinger?

5995 Mr. {Kinzinger.} Aye.

5996 The {Clerk.} Mr. Kinzinger, aye.

5997 Mr. Griffith?

5998 Mr. {Griffith.} Aye.

5999 The {Clerk.} Mr. Griffith, aye.

6000 Mr. Waxman?

6001 Mr. {Waxman.} No.

6002 The {Clerk.} Mr. Waxman, no.

6003 Mr. Dingell?

6004 [No response.]

6005 The {Clerk.} Mr. Markey?

6006 [No response.]

6007 The {Clerk.} Mr. Towns?

6008 [No response.]

6009 The {Clerk.} Mr. Pallone?

6010 Mr. {Pallone.} No.

6011 The {Clerk.} Mr. Pallone, no.

6012 Mr. Rush?

6013 [No response.]

6014 The {Clerk.} Ms. Eshoo?

6015 Ms. {Eshoo.} No.

6016 The {Clerk.} Ms. Eshoo, no.

6017 Mr. Engel?

6018 [No response.]

6019 The {Clerk.} Mr. Green?

6020 Mr. {Green.} No.

6021 The {Clerk.} Mr. Green, no.

6022 Ms. DeGette?

6023 Ms. {DeGette.} No.

6024 The {Clerk.} Ms. DeGette, no.

6025 Mrs. Capps?

6026 Mrs. {Capps.} No.

6027 The {Clerk.} Mrs. Capps, no.

6028 Mr. Doyle?

6029 [No response.]

6030 The {Clerk.} Ms. Schakowsky?

6031 Ms. {Schakowsky.} No.

6032 The {Clerk.} Ms. Schakowsky, no.
6033 Mr. Gonzalez?
6034 [No response.]
6035 The {Clerk.} Mr. Inslee?
6036 Mr. {Inslee.} No.
6037 The {Clerk.} Mr. Inslee, no.
6038 Ms. Baldwin?
6039 Ms. {Baldwin.} No.
6040 The {Clerk.} Ms. Baldwin, no.
6041 Mr. Ross?
6042 Mr. {Ross.} No.
6043 The {Clerk.} Mr. Ross, no.
6044 Mr. Weiner?
6045 Mr. {Weiner.} No.
6046 The {Clerk.} Mr. Weiner, no.
6047 Mr. Matheson?
6048 [No response.]
6049 The {Clerk.} Mr. Butterfield?
6050 Mr. {Butterfield.} No.
6051 The {Clerk.} Mr. Butterfield, no.
6052 Mr. Barrow?
6053 Mr. {Barrow.} Votes no.
6054 The {Clerk.} Mr. Barrow, no.
6055 Ms. Matsui?

6056 Ms. {Matsui.} No.

6057 The {Clerk.} Ms. Matsui, no.

6058 Ms. Christensen?

6059 Dr. {Christensen.} No.

6060 The {Clerk.} Ms. Christensen, no.

6061 Mr. Upton?

6062 The {Chairman.} Aye.

6063 The {Clerk.} Mr. Upton, aye.

6064 The {Chairman.} Other members that wish to vote. Mr.

6065 Stearns?

6066 Mr. {Stearns.} Aye.

6067 The {Clerk.} Mr. Stearns, aye.

6068 The {Chairman.} Mr. Matheson?

6069 Mr. {Matheson.} Votes no.

6070 The {Clerk.} Mr. Matheson, no.

6071 The {Chairman.} Mr. Pompeo, have you voted? Are there

6072 other members wishing to cast a vote? If not the Clerk--

6073 Mr. {Walden.} I am sorry, how am I recorded?

6074 The {Clerk.} Mr. Walden is recorded as aye.

6075 The {Chairman.} Dr. Burgess?

6076 Dr. {Burgess.} Aye.

6077 The {Clerk.} Dr. Burgess, aye.

6078 The {Chairman.} Are there further members? Seeing

6079 none, the Clerk will count the tally.

6080 Mr. {Bilbray.} Clerk, how am I recorded?

6081 The {Clerk.} The gentleman is not recorded.

6082 Mr. {Bilbray.} Aye.

6083 The {Clerk.} Mr. Bilbray, aye. Ready. On that there
6084 were 26 ayes, 16 nays.

6085 The {Chairman.} Twenty-six ayes, 16 nays. The bill,
6086 H.R. 1217, is passed and adopted.

|

6087 H.R. 1216

6088 The {Chairman.} The next order of business is H.R.
6089 1216, a bill to amend the Public Health Service Act to
6090 convert funding for graduate medical education and qualified
6091 teaching health centers from direct appropriation to an
6092 authorization. So I call that bill up and ask the Clerk to
6093 report.

6094 The {Clerk.} H.R. 1216.

6095 [The information follows:]

6096 ***** INSERT 15 *****

|
6097 The {Chairman.} Without objection, the first reading of
6098 the bill is dispensed with, so ordered, and would look to Mr.
6099 Green to offer an amendment.

6100 Mr. {Green.} I have an amendment at the desk, Mr.
6101 Chairman.

6102 The {Chairman.} The clerk will report the title of the
6103 amendment.

6104 The {Clerk.} Which number, Mr. Green?

6105 Mr. {Green.} Mr. Chairman, I ask unanimous consent to--

6106 The {Clerk.} Which amendment?

6107 Mr. {Green.} Amendment number two.

6108 The {Clerk.} An amendment offered by Mr. Green.

6109 [The amendment follows:]

6110 ***** INSERT 16 *****

|
6111 The {Chairman.} The amendment is considered read, and
6112 the clerks will pass the amendment out. And the gentleman
6113 from Texas is recognized for 5 minutes in support of his
6114 amendment.

6115 Mr. {Green.} Thank you, Mr. Chairman. The Affordable
6116 Care Act authorized and appropriated \$230 million for a 5-
6117 year payment program to support accredited primary care
6118 residency training operated by community-based entities
6119 including our community-based health centers, our FBHCs.

6120 The Teaching Health Center program supports the training
6121 of individuals who are practiced in family medicine, internal
6122 medicine, pediatrics, internal medicine pediatrics,
6123 obstetrics, gynecology, psychiatry, general dentistry,
6124 pediatric dentistry and geriatrics. These disciplines are
6125 where we are experiencing significant physician shortages.
6126 This training takes place in community-based settings such
6127 as our community-based health centers. Research shows that
6128 the CHC, community health center, training physicians for
6129 example are more than twice as likely as their non-CHC
6130 trained counterparts to work in an underserved area, ensuring
6131 that this kind of training takes place, which is what
6132 mandatory spending support for the program does. It will
6133 help strengthen the primary workforce in underserved areas,

6134 particularly rural and frontier areas that are struggling to
6135 recruit and retain a sufficient workforce.

6136 I know even before the Affordable Care Act, we worked
6137 across the party lines, both on support for community-based
6138 health centers but also support for primary care training.
6139 It is ironic that this bill, H.R. 216, would want to take
6140 away this funding. Again, Republicans and Democrats continue
6141 to argue that there are not enough physicians now, let alone
6142 when the Affordable Care Act is fully operational to provide
6143 care to these people in need of primary care services. This
6144 program is designed to help address this problem, and they
6145 will keep trying to have it both ways at the end of the day.
6146 But whether we have healthcare reform or not, this program
6147 repeal, I think this program is something that I will enjoy
6148 on bipartisan support.

6149 There are already 11 community-based entities from
6150 states across the country that have committed to training 44
6151 primary care residents that will be supported by an estimated
6152 \$7.6 million in funding for a full year in its first year of
6153 program. Why would we want to stop this? I suspect there is
6154 no other reason than to slow down or just disrupt the full
6155 impact of affordable care. But I think this section can
6156 stand alone. The Teaching Health Centers program should
6157 continue to receive mandatory funding. It is a terrific

6158 investment and will pay off handsomely. The program will
6159 increase the ranks of primary care physicians resulting in
6160 improved patient access to primary care and fewer patients
6161 seeking care and costlier settings like emergency departments
6162 and hospitals. Turning the program into a discretionary one
6163 will make it challenging for these 11 programs that have
6164 already been made the decision to participate in consultation
6165 with key stakeholders, like teaching hospitals--based on an
6166 expectation their continued funding will be available.
6167 Converting this program to discretionary funding will also
6168 deter other entities from making those business decisions
6169 necessary to expand residency training, securing commitments
6170 from key stakeholders and to agree to train new or additional
6171 residents, applying for accreditation if not already part of
6172 the eligible consortia, hiring new faculties since funding
6173 over the next few years will be subject to an annual
6174 appropriations fight.

6175 That is why I am offering this amendment. I think
6176 compared to the other bills that we have today, this is so
6177 important. It should be considered under mandatory funding
6178 for the teaching health center program under Secretary of HHS
6179 determines there is no longer any health professional
6180 shortage in areas in the United States. Health professional
6181 shortage areas, HPSAs, are designated by HRSA as having

6182 shortages of primary medical care, dental or mental health
6183 providers and may be geographic, a county or service area, or
6184 demographic, a low income population or institutional
6185 comprehensive health center, federally qualified health
6186 center or other public entity. Medically underserved area or
6187 populations or areas of populations designated by HRSA may
6188 have too few primary care providers or high infant mortality,
6189 high poverty or high elderly percentage. HPSAs may be
6190 designated as having shortage of primary medical care, dental
6191 or mental care health providers. They may also provide for
6192 rural or urban or population groups in the medical.

6193 According to HRSA, there are 6,204 primary care health
6194 professional shortage areas with 65 million people living in
6195 them. It would take 16,643 practitioners to meet their needs
6196 in primary care. We need 4,230 dental healthcare service
6197 areas with 49 million people living in them, and we have
6198 3,291 mental healthcare professional service areas with 80
6199 million living in them.

6200 I guess my point is that this should be separated
6201 because again, I know we enjoyed bipartisan support for
6202 community-based health centers, and we have also enjoyed
6203 bipartisan support for the need for continued medical
6204 training particular in the underserved areas, whether we have
6205 the current Affordable Care Act stays in existence or not.

6206 We need to ensure we have physicians so they no longer have
6207 health professional service area that is what the teaching
6208 health center provision is intended to do.

6209 By stripping the program of mandatory funding leaves the
6210 discretion to appropriators and again, this is a need that I
6211 think no matter what happens with the Affordable Care Act,
6212 this is something I think we probably ought to do. And I may
6213 introduce it separately as legislation if this bill goes
6214 forward and--

6215 Mr. {Pitts.} [Presiding] The gentleman's time is
6216 expired.

6217 Mr. {Green.} Thank you, Mr. Chairman.

6218 Mr. {Pitts.} Is there further discussion on the
6219 amendment?

6220 Mr. {Guthrie.} Mr. Chairman?

6221 Mr. {Pitts.} The Chair recognizes Mr. Guthrie for 5
6222 minutes.

6223 Mr. {Guthrie.} Thank you, Mr. Chairman. I would like
6224 to speak against the amendment, and I appreciate the
6225 opportunity that we have come together today to try to look
6226 at changing mandatory programs in the healthcare act into
6227 appropriated programs. And I agree, and I think everyone
6228 here agrees and I appreciate the bipartisan work that has
6229 been done before on the need for more primary care physicians

6230 in our health system, the need for more healthcare providers
6231 in our health system. But what we are talking about is
6232 moving it from automatic, mandatory funding to discretionary
6233 funding. And it is not just a set of priorities because the
6234 nursing program, I think all of us realize that we need more
6235 nurses in our system. In the healthcare act there was a
6236 section for grants for nursing retention grant program. But
6237 that was discretionary. It was authorized and left up to the
6238 appropriators to decide.

6239 Secretary Sebelius said here in her testimony before the
6240 Committee that the President's budget eliminates graduate
6241 medical education for children's hospitals and what we are
6242 saying is that that will go through the appropriations
6243 process, and we are asking just to go through the
6244 appropriations process as well.

6245 We are facing monumental budget constraints. For \$230
6246 million, we will borrow \$96 million at the 42 cents per
6247 dollar for this program to go forward. And I was traveling
6248 through my district just a couple weeks ago, and talking
6249 about people--somebody mentioned earlier about individuals
6250 that will be hurt by different bills that are moving forward.
6251 I talked to businesses and businessmen and women who are
6252 saying their businesses could be hurt if we don't change not
6253 this particular program but the bill overall. And as you

6254 showed a pie chart of 2011 spending, you look at a pie chart
6255 and you see non-defense discretionary and defense
6256 discretionary side, and greater than half is in the mandatory
6257 spending, Social Security Medicare, Medicaid, interest on the
6258 debt. And there is a subject on the pie chart called other
6259 mandatory spending, and it is over \$400 billion. And all we
6260 are saying is we need the opportunity for our Appropriations
6261 Committee, if it is an annual basis that has been before. I
6262 know there are things in the discretionary side that people
6263 say we would like to have it mandatory because it is longer
6264 and you can plan better. But we have an annual
6265 appropriations process, and all we are saying, like the
6266 nurses are going to have to do, the rural health services is
6267 authorized at \$45 million and it should be fully funded, but
6268 we are creating a new program that is mandatory, takes
6269 discretion away from the appropriators, and I oppose the
6270 amendment and I support the bill. I yield back.

6271 Mr. {Pitts.} The Chair thanks the gentleman and
6272 recognizes the gentleman from New Jersey, Mr. Pallone.

6273 Mr. {Pallone.} I am not going to use the whole time,
6274 but I just wanted to say following up on Mr. Green, I know
6275 that Mr. Green has been a long-time supporter of community
6276 health centers and the authorization bill for the community
6277 health centers in the previous Congress. But what he said,

6278 and I listened to it carefully, is that you know when you are
6279 trying to train residents, whether it be doctors, nurses,
6280 others for primary care, it takes a while for those people to
6281 be trained, and they need to have the certainty that the
6282 dollars are there to perform that function. And that is why
6283 when we train medical residents with the Medicare GME
6284 funding, since its inception in 1965, it has been funded
6285 using Medicare trust fund dollars, and it was mandatory
6286 spending because teaching health centers, you know, had to
6287 have the stability, if you will, of the Medicare GME. So
6288 what we have done here is very similar. You know, residents
6289 aren't trained in a short period of time. It takes years.
6290 So in the same way that we use the Medicare GME, we are
6291 trying to do the same thing here with those who are trained
6292 in the community setting. And we know if people are trained
6293 in a community setting, they are more likely to continue on
6294 when they graduate and they are physicians to stay in the
6295 community center situation.

6296 I just think that for the Republicans to say they want
6297 to take away this funding and make it discretionary, well,
6298 why is it any different from what we do under Medicare GME?
6299 I don't see any difference. Bottom line is you have to have
6300 some kind of stability, and you are only going to have that
6301 if you have the mandatory funding. So as Mr. Green said,

6302 this is a perfect example of why you need mandatory funding,
6303 rather than the discretionary funding. It makes perfect
6304 sense in this context, and I would yield back.

6305 Mr. {Pitts.} The Chair thanks the gentleman. Is there
6306 further discussion? The gentlelady from California is
6307 recognized for 5 minutes.

6308 Mrs. {Capps.} Thank you, Mr. Chairman. I want to speak
6309 in support of Mr. Green's amendment and in opposition to H.R.
6310 1216. The critical medical education program in our
6311 community, the Teaching Health Centers program, this is a
6312 classic example of cutting our nose to spite our face in this
6313 Committee. An all-out assault to repeal and defund the
6314 program that would normally have bipartisan support fulfills
6315 the need to each of our Congressional districts is caught in
6316 a political crossfire. I can't count the number of times
6317 that we sat here talking about shortages in primary care
6318 workforce, underserved areas, and often working in a
6319 bipartisan way to think of ways to increase our primary care
6320 ranks. That is one of the reasons that I can't help but
6321 speak now, even though we have been at this markup for a very
6322 long time today.

6323 I wanted to just mention that one of the big obstacles
6324 to delivering primary healthcare in this country is the
6325 expense of education and the reward of going into a specialty

6326 by becoming a resident which entices people in medical school
6327 to continue on with their education because of their huge
6328 bills. And so much of the part of our new healthcare law is
6329 allowing scholarships and loan forgiveness programs so that
6330 people can go into primary care and underserved communities.

6331 Having the community-based health centers provides an
6332 opportunity for culturally appropriate centers to train and
6333 educate people in those things that they are skilled to do.
6334 These programs expand primary care services to the very
6335 people who need them most and trains new providers with
6336 expertise needed to serve these populations. Here we are
6337 going to defund these programs. There are already 11
6338 community-based entities from states across the country
6339 already committed to training primary care residents and
6340 expanding their programs to do so, and they are ready to go.

6341 Just last week in this subcommittee, members on the
6342 other side of the aisle warned of a shortage of medical
6343 professionals and that the Affordable Care Act would permit
6344 too many Americans access to primary care and we don't have
6345 enough providers. Well, this is the exact part of the
6346 legislation that allows for the training of people to do this
6347 kind of work.

6348 So we have to make a choice here. Defunding the
6349 teaching healthcare centers would only occur under this

6350 amendment once we eliminate the shortage areas in our Nation.
6351 That makes sense to me. We know we have a need for the
6352 centers now and for the funding for them. So let us take
6353 care of the under funding, underprepared field that we have,
6354 and then when that reaches its maximum and we no longer have
6355 people waiting in line, then we can cease to fund this
6356 program.

6357 With that, I want to yield the balance of my time to the
6358 author of the legislation, Mr. Green, the amendment.

6359 Mr. {Green.} Thank you, and I thank my California
6360 colleague. Let me just ask you to wait a minute and let us
6361 talk about it because this is part of the Affordable Care
6362 Act, and I know my Republican colleagues want to just
6363 eliminate it all. But this was actually passed on a voice
6364 vote, this program, because just like my colleague from New
6365 Jersey said, Medicare has graduate medical education that is
6366 mandatory, and if we are ever going to get a handle on how we
6367 can serve the underserved in our country, federally qualified
6368 health centers are the solution. I know I share that with a
6369 lot of my Republican colleagues who work for years to try and
6370 expand them. President Bush every year upped his budget for
6371 federally qualified health centers. So it is something we do
6372 enjoy across party lines. But the whole goal is to get those
6373 health care professionals in that underserved area. Most of

6374 the district I represent is underserved. I have physicians
6375 though who practiced in my area, and they support our
6376 expansion of FQHCs so much because they don't have enough
6377 time in their day to see the people who show up at their
6378 offices. So the medical community actually supports it, and
6379 that is why the mandatory is needed so we will have a
6380 continuity so they will know that over a period of three
6381 years and a fellowship you will actually have--and the
6382 success of the program shows that they will come back into
6383 these harder-to-serve communities instead of the regular
6384 graduate if they are in these FQHCs. That is why it is so
6385 important. And again, federally qualified health centers,
6386 community centers, has enjoyed bipartisan support no matter
6387 who is in charge and no matter who is the president. And
6388 this just adds to that, and I can't say too much that it was
6389 passed in our Committee in one of our late-nights on a voice
6390 vote because there is support on both sides of the aisle. So
6391 that is why I am disappointed to see this here because it is
6392 one of the great things that we did in there, in the
6393 Affordable Care Act.

6394 And with that, Mr. Chairman, I yield back my time.

6395 Mr. {Pitts.} Is there further--

6396 Mr. {Green.} I yield back my colleague's--

6397 Mr. {Pitts.} --discussion on the amendment. The

6398 gentlelady, Ms. Christensen, is recognized for 5 minutes on
6399 the amendment.

6400 Dr. {Christensen.} Thank you, and I won't take all of
6401 the 5 minutes. I also wanted to speak in support of the
6402 amendment and against the bill itself.

6403 I think like several of the other amendments that have
6404 been offered, this is a really good approach. It makes no
6405 sense to stop the training while there are still health
6406 professional shortage areas. We have heard over and over
6407 again today that we need more providers. This amendment
6408 ensures that we keep the funding to train those providers,
6409 and it is true that the centers, those 11 centers and any
6410 other centers that are going to participate in this program,
6411 need certainty. They can't depend on a year-to-year
6412 appropriation.

6413 Yes, we need nurses, but we need all the providers,
6414 community health workers, physician assistants, dentists and
6415 doctors. In my training, I had the opportunity to do part of
6416 it in a community health center. I think it made me a better
6417 physician, and so I just want to again support this amendment
6418 and oppose the underlying bill.

6419 Mr. {Weiner.} Will the gentlelady yield?

6420 Mr. {Pitts.} The chair thanks--

6421 Dr. {Christensen.} Yes, I will yield to my colleague

6422 form New York.

6423 Mr. {Weiner.} I appreciate the gentle lady yielding, and
6424 I see that Chairman Emeritus Barton is here, and perhaps he
6425 or the Chair can address this issue.

6426 You know all of the portraits that are around this room,
6427 including Mr. Barton's, represent an ethos in the Energy and
6428 Commerce Committee that maybe transcends all political lines
6429 and that is the idea that we wanted to always claim as much
6430 jurisdiction for ourselves as we could, you know? It is kind
6431 of like, you know, you guys are our opponents, the Senate is
6432 our enemy, the other committees--I don't know how to extend
6433 the metaphor further than that. And here we are, we pass a
6434 bill, and like it or dislike it, it gives us the authority
6435 over this bill.

6436 Now, there are a series of bills that I am seeing today,
6437 Mr. Barton, which say let us give the appropriators more
6438 authority over legislation that we wrote in this Committee.
6439 It seems wildly counterintuitive. We used to be a Committee
6440 that we would proudly join shoulder to shoulder to fight for
6441 the jurisdiction you have, since you know what, we really
6442 can't be trusted with this. Let us give it to the
6443 Appropriation Committee. I want to tell you something. That
6444 is not, you know, the Nobel committee over there in that
6445 panel. I mean, I am not sure that they can do that much of a

6446 better job than we could. We wrote the bill here, it is in
6447 our jurisdiction. Let us keep it in our jurisdiction. Why
6448 are we suddenly offer a series of bills saying, oh, we don't
6449 trust ourselves to do this. Let us give it to the annual
6450 appropriation process. I just don't think that should be
6451 where we go, and whether it is a Democrat in that chair or a
6452 Republican in that chair, I would hope that one of the things
6453 that we join together to do is make sure the jurisdiction in
6454 this Committee is as big and powerful as possible, and here
6455 we are. This afternoon has been a pretty bad day. A lot of
6456 these guys who are up on these walls, and some of them that I
6457 have the good fortune to know and a couple of them that still
6458 work here, every single day we get together and huddle in a
6459 bipartisan way to fend off efforts by other committees to
6460 take our jurisdiction, and now we are willingly giving it
6461 away. This is a pretty dark day in this Committee, and I
6462 hope that it doesn't reflect a new kind of roll over and rub
6463 our belly mentality here in the Energy and Commerce
6464 Committee. This used to be the fighting Energy and Commerce
6465 Committee when Mr. Barton was the chair.

6466 Mr. {Barton.} Will the gentleman yield?

6467 Mr. {Weiner.} I certainly will.

6468 Mr. {Barton.} You wondered how long you would egg me on
6469 before I took the bait.

6470 Mr. {Weiner.} You lasted longer than I thought, Mr.
6471 Barton.

6472 Mr. {Barton.} It is almost 5:00, you know. It is 5:00
6473 somewhere. Actually, the Republican portraits up here
6474 believe that this is an authorizing committee, and we would
6475 authorize programs and then send them to the appropriators to
6476 fund at the authorized levels. And that is what this bill is
6477 doing. It is converting a mandatory spending program to an
6478 authorized program.

6479 With no disrespect to my friend from New York's
6480 metaphor--

6481 Mr. {Weiner.} Reclaim my time.

6482 Mr. {Barton.} --we never claimed to be an appropriation
6483 committee. Now, I will say in the last Congress or perhaps
6484 the Congress before that, I think when Mr. Dingell was
6485 Chairman, we did try to become the Ways and Means Committee,
6486 too, in one of the healthcare bills.

6487 Mr. {Weiner.} Reclaiming my time. Mr. Barton, where
6488 have you gone, Joe DiMaggio. Look at us now. We are a mere
6489 authorizing committee? We are not. We are the Energy and--

6490 Mr. {Barton.} I didn't say mere.

6491 Mr. {Weiner.} We are the Energy and Commerce--

6492 Mr. {Barton.} We are the authorizing committee.

6493 Mr. {Weiner.} Somewhere next door there is a picture of

6494 the Earth photographed from the moon. That is our
6495 jurisdiction, Mr. Chairman.

6496 The {Chairman.} Which is only half of the Earth.

6497 Mr. {Weiner.} That is this Committee. There is nothing
6498 that is not in our jurisdiction, and we may give up
6499 jurisdiction from time to time but we do so fighting. We
6500 don't do so willingly. We are no mere authorizing committee.
6501 We are like no other committee in this body. And I have to
6502 tell you something. You built that proud tradition. This is
6503 not a proud day when we start characterizing saying we are
6504 just a little old authorizing. We are not. We are the
6505 Energy and f-ing Commerce Committee.

6506 Mr. {Barton.} I didn't use the term little.

6507 Mr. {Weiner.} We are not going to yield jurisdiction.
6508 We may lose this vote, but we are not going to stop fighting,
6509 I want to tell you that right now.

6510 Mr. {Pitts.} The gentleman's time has expired. Is
6511 there further discussion of the amendment? If there is no
6512 further discussion, the vote occurs on the amendment. All
6513 those in favor shall signify by saying aye, all those opposed
6514 no. The nays have it. The amendment is not agreed to. The
6515 Ranking Member requests a recorded vote. The Clerk will call
6516 the roll.

6517 The {Clerk.} Mr. Barton?

6518 Mr. {Barton.} No.

6519 The {Clerk.} Mr. Barton, no.

6520 Mr. Stearns?

6521 Mr. {Stearns.} Stearns votes no.

6522 The {Clerk.} Mr. Stearns, no.

6523 Mr. Whitfield?

6524 Mr. {Whitfield.} No.

6525 The {Clerk.} Mr. Whitfield, no.

6526 Mr. Shimkus?

6527 [No response.]

6528 The {Clerk.} Mr. Pitts?

6529 Mr. {Pitts.} No.

6530 The {Clerk.} Mr. Pitts, no.

6531 Mrs. Bono Mack?

6532 [No response.]

6533 The {Clerk.} Mr. Walden?

6534 Mr. {Walden.} No.

6535 The {Clerk.} Mr. Walden, no.

6536 Mr. Terry?

6537 Mr. {Terry.} No.

6538 The {Clerk.} Mr. Terry, no.

6539 Mr. Rogers?

6540 Mr. {Rogers.} No.

6541 The {Clerk.} Mr. Rogers, no.

6542 Mrs. Myrick?
6543 [No response.]
6544 The {Clerk.} Mr. Sullivan?
6545 Mr. {Sullivan.} No.
6546 The {Clerk.} No.
6547 Mr. Murphy?
6548 [No response.]
6549 The {Clerk.} Mr. Burgess?
6550 [No response.]
6551 The {Clerk.} Mrs. Blackburn?
6552 [No response.]
6553 The {Clerk.} Mr. Bilbray?
6554 Mr. {Bilbray.} No.
6555 The {Clerk.} Mr. Bilbray, no.
6556 Mr. Bass?
6557 Mr. {Bass.} No.
6558 The {Clerk.} Mr. Bass, no.
6559 Mr. Gingrey?
6560 Dr. {Gingrey.} No.
6561 The {Clerk.} Mr. Gingrey, no.
6562 Mr. Scalise?
6563 [No response.]
6564 The {Clerk.} Mr. Latta?
6565 Mr. {Latta.} No.

6566 The {Clerk.} Mr. Latta, no.
6567 [No response.]
6568 The {Clerk.} Mr. Harper?
6569 Mr. {Harper.} No.
6570 The {Clerk.} Mr. Harper, no.
6571 Mr. Lance?
6572 Mr. {Lance.} No.
6573 The {Clerk.} Mr. Lance, no.
6574 Mr. Cassidy?
6575 Dr. {Cassidy.} No.
6576 The {Clerk.} Mr. Cassidy, no.
6577 Mr. Guthrie?
6578 Mr. {Guthrie.} No.
6579 The {Clerk.} Mr. Guthrie, no.
6580 Mr. Olson?
6581 Mr. {Olson.} No.
6582 The {Clerk.} Mr. Olson, no.
6583 Mr. McKinley?
6584 [No response.]
6585 The {Clerk.} Mr. Gardner?
6586 Mr. {Gardner.} No.
6587 The {Clerk.} Mr. Gardner, no.
6588 Mr. Pompeo?
6589 [No response.]

6590 The {Clerk.} Mr. Kinzinger?
6591 Mr. {Kinzinger.} No.
6592 The {Clerk.} Mr. Kinzinger, no.
6593 Mr. Griffith?
6594 Mr. {Griffith.} No.
6595 The {Clerk.} Mr. Griffith, no.
6596 Mr. Waxman?
6597 [No response.]
6598 The {Clerk.} Mr. Dingell?
6599 [No response.]
6600 The {Clerk.} Mr. Markey?
6601 [No response.]
6602 The {Clerk.} Mr. Towns?
6603 [No response.]
6604 The {Clerk.} Mr. Pallone?
6605 Mr. {Pallone.} Aye.
6606 The {Clerk.} Mr. Pallone, aye.
6607 [No response.]
6608 The {Clerk.} Ms. Eshoo?
6609 Ms. {Eshoo.} Aye.
6610 The {Clerk.} Ms. Eshoo, aye.
6611 Mr. Engel?
6612 [No response.]
6613 The {Clerk.} Mr. Green?

6614 Mr. {Green.} Aye.
6615 The {Clerk.} Mr. Green, aye.
6616 Ms. DeGette?
6617 Ms. {DeGette.} Aye.
6618 The {Clerk.} Ms. DeGette, aye.
6619 Mrs. Capps?
6620 Mrs. {Capps.} Aye.
6621 The {Clerk.} Mrs. Capps, aye.
6622 Mr. Doyle?
6623 [No response.]
6624 The {Clerk.} Ms. Schakowsky?
6625 [No response.]
6626 The {Clerk.} Mr. Gonzalez?
6627 [No response.]
6628 The {Clerk.} Mr. Inslee?
6629 Mr. {Inslee.} Aye.
6630 The {Clerk.} Mr. Inslee, aye.
6631 Ms. Baldwin?
6632 Ms. {Baldwin.} Aye.
6633 The {Clerk.} Ms. Baldwin, aye.
6634 Mr. Ross?
6635 Mr. {Ross.} Aye.
6636 The {Clerk.} Mr. Ross, aye.
6637 Mr. Weiner?

- 6638 Mr. {Weiner.} Aye.
- 6639 The {Clerk.} Mr. Weiner, aye.
- 6640 Mr. Matheson?
- 6641 Mr. {Matheson.} Aye.
- 6642 The {Clerk.} Mr. Matheson, aye.
- 6643 Mr. Butterfield?
- 6644 Mr. {Butterfield.} Aye.
- 6645 The {Clerk.} Mr. Butterfield, aye.
- 6646 Mr. Barrow?
- 6647 Mr. {Barrow.} Votes aye.
- 6648 The {Clerk.} Mr. Barrow, aye.
- 6649 Ms. Matsui?
- 6650 Ms. {Matsui.} Aye.
- 6651 The {Clerk.} Ms. Matsui, aye.
- 6652 Ms. Christensen?
- 6653 Dr. {Christensen.} Aye.
- 6654 The {Clerk.} Ms. Christensen, aye.
- 6655 Mr. Upton?
- 6656 The {Chairman.} No.
- 6657 The {Clerk.} Mr. Upton, no.
- 6658 Mr. {Pitts.} Are there any other members? Cathy
- 6659 McMorris Rodgers?
- 6660 Ms. {McMorris Rodgers.} No.
- 6661 The {Clerk.} Ms. McMorris Rodgers, no.

6662 Mr. {Pitts.} Dr. Burgess?
6663 Dr. {Burgess.} No.
6664 The {Clerk.} Dr. Burgess, no.
6665 Mr. {Pitts.} Ms. Blackburn?
6666 Ms. {Blackburn.} No.
6667 The {Clerk.} Ms. Blackburn, no.
6668 Mr. {Pitts.} Any other members wishing to be recorded?
6669 Mr. Scalise?
6670 Mr. {Scalise.} No.
6671 The {Clerk.} Mr. Scalise, no.
6672 Mr. {Pitts.} The Clerk will report the result.
6673 The {Clerk.} Mr. Chairman, on that there were 14 ayes,
6674 25 nays.
6675 Mr. {Pitts.} The amendment is not agreed to. Are there
6676 any further amendments? The gentlelady, Ms. Matsui, has an
6677 amendment.
6678 The {Clerk.} An amendment offered by Ms. Matsui.
6679 [The amendment follows:]

6680 ***** INSERT 17 *****

|
6681 Mr. {Pitts.} The gentlelady is recognized for 5
6682 minutes.

6683 Ms. {Matsui.} Thank you, Mr. Chairman. H.R. 1216 will
6684 put the future of the primary care workforce into question.
6685 The Affordable Care Act, our current law, provides a historic
6686 investment in primary care. As we have heard already today,
6687 primary care has long been neglected in this country.
6688 However, refocusing on the importance of primary care is
6689 critical. It will turn our delivery system from one of sick
6690 care to one that focuses on keeping people healthy. One of
6691 the barriers to providing better primary care is a lack of
6692 primary care providers. The law which this bill tries to
6693 chip away at would help train, develop and place 16,000 new
6694 primary care providers. That means 16,000 more primary care
6695 doctors to children, teenagers, young adults and seniors.
6696 That coupled with the important insurance market reforms in
6697 the Affordable Care Act will mean their primary care is
6698 focal point rather than an afterthought for patients of all
6699 ages. This means that Americans will have better access to
6700 ongoing care.

6701 Studies strongly associate healthier outcomes to the
6702 regular access to care. Ensuring that regular source of care
6703 is a primary care provider and not the emergency room is

6704 critical to not only providing quality and coordinated care
6705 but also helping to keep costs down for patients and the
6706 system in general. Having a primary care provider as a usual
6707 source of care will increase a likelihood of appropriate care
6708 and act as a trusted health counsel that will help better
6709 coordinate care to ensure that complications do not arise,
6710 something that is sadly lacking in far too many seniors'
6711 lives.

6712 And that is what my amendment works to ensure, that all
6713 Americans have a source of ongoing care, especially those
6714 over the age 65. However, without this funding, without this
6715 investment, we will likely continue to see a decrease in the
6716 number of medical students interested in primary care. This
6717 will further exacerbate the growing shortage of primary care
6718 providers in our country. This will in turn further continue
6719 the sick care model as opposed to working to keep people
6720 healthy. This is something of which I am immensely
6721 concerned.

6722 I recently held the roundtable discussion with a group
6723 of University of California at Davis medical students who are
6724 seeking careers in primary care. I was elated to hear of
6725 their enthusiasm for not only primary care but also the new
6726 incentives and current law for primary care providers.
6727 However, as I said a moment ago, should this funding come

6728 into question, we threaten the future of primary care in our
6729 country and the futures of these medical students seeking a
6730 career in primary care. Primary care as a main, ongoing
6731 source of care is critical to a healthier America. For
6732 seniors, it means a trusted source of consultation, someone
6733 to help coordinate care to better ensure that proper care is
6734 administered.

6735 I urge my colleagues to vote for my amendment which
6736 again would help ensure that children, teenagers, young
6737 adults and seniors who merely receive the care they need and
6738 deserve, and I yield back the balance of my time.

6739 Mr. {Pitts.} The Chair thanks the gentlelady and
6740 recognizes the gentleman from Georgia, Dr. Gingrey for 5
6741 minutes.

6742 Dr. {Gingrey.} Mr. Chairman, thank you, and with all
6743 due respect to my good friend from California, I am in
6744 opposition to her amendment and want to speak favorably for
6745 the bill, H.R. 1216 that my colleague from Kentucky, Mr.
6746 Guthrie, has brought forward.

6747 Healthy People 20/20 is an office within HHS that
6748 develops objectives to improve the level of healthcare in a
6749 decade, in 10 years. The objectives are determined even when
6750 there is no or insufficient national data available. So some
6751 of these objectives are still evolving. They are

6752 developmental and should not be used to make specific
6753 decisions on health policy and programs until there is
6754 sufficient data.

6755 Today the debate is about whether nor not my Democratic
6756 colleagues should have voted to appropriate \$230 million
6757 without going through regular order. If you look at Section
6758 5508 of Patient Protection and Affordable Care Act, it
6759 provides \$230 million direct appropriation for teaching
6760 health centers' residency programs. H.R. 1216, Mr. Guthrie's
6761 bill, would convert the direct appropriations into an
6762 authorization of appropriations. The legislation allows for
6763 teaching health centers to receive funding through the normal
6764 appropriations process.

6765 If you look at Section 5301 of PPACA, that allows
6766 hospitals, and I am talking about accredited, public and non-
6767 profit, to receive funds for training in family medicine,
6768 general internal medicine, general pediatrics and physician
6769 assistantships. Section 5301 is authorized and it is subject
6770 to appropriations, whereas Section 5508 of PPACA provides
6771 automatic funds for these teaching health centers.

6772 Many members of this Committee have supported graduate
6773 medical education for children's hospitals like Children
6774 Healthcare Center of Atlanta. In her testimony before the
6775 Committee, Secretary Sebelius stated that the President's

6776 fiscal year 2012 budget eliminates duplication and then
6777 specifically she said eliminating spending on children's
6778 hospitals' graduate education. By providing mandatory funds
6779 to these teaching health centers, this section of PPACA
6780 actually disadvantages children's hospitals like the
6781 Children's Healthcare Center of Atlanta who must go through
6782 the normal appropriations process to receive funding. Some
6783 have advocated the need to move away from hospital-based
6784 medical education. That may or may not be the appropriate,
6785 correct policy. I have my bias.

6786 But if we need to have a discussion on the most
6787 appropriate sites for medical education or change in the mix
6788 of where providers are trained, let us have that discussion.
6789 But we should not have this hodge-podge set of policies where
6790 some facilities get mandatory funding while others have to go
6791 through the normal appropriations process. Really, that is
6792 what this is all about. That is what this is all about at
6793 all five of these bills, and I am just amazed that my
6794 colleagues on the other side can't seem to understand that.
6795 But for that reason, I respectfully oppose Mrs. Matsui's
6796 amendment and continue to be very supportive of 2016, the
6797 bill that the gentleman from Kentucky has presented today.
6798 And Mr. Chairman, I yield back my time.

6799 Mr. {Pitts.} The Chair thanks the gentleman. Is there

6800 further discussion of the amendment? If there is no further
6801 discussion, the vote occurs on the amendment. All those in
6802 favor shall signify by saying aye, all those opposed no. The
6803 nays have it. The amendment is not agreed to.

6804 Are there further amendments on the bill? If there is
6805 no further discussion, the question now occurs on favorably
6806 reporting the bill. All those in favor, say aye, all those
6807 opposed say no.

6808 Mr. {Pallone.} I would ask for a roll call, Mr.
6809 Chairman.

6810 Mr. {Pitts.} Roll call votes. The Clerk will call the
6811 roll.

6812 The {Clerk.} Mr. Barton?

6813 Mr. {Barton.} This is final passage?

6814 Mr. {Pitts.} It is reporting the bill, yeah.

6815 Mr. {Barton.} Reporting the bill, aye.

6816 The {Clerk.} Mr. Barton, aye.

6817 Mr. Stearns?

6818 [No response.]

6819 The {Clerk.} Mr. Whitfield?

6820 [No response.]

6821 The {Clerk.} Mr. Shimkus?

6822 [No response.]

6823 The {Clerk.} Mr. Pitts?

6824 Mr. {Pitts.} Aye.
6825 The {Clerk.} Mr. Pitts, aye.
6826 Mrs. Bono Mack?
6827 [No response.]
6828 The {Clerk.} Mr. Walden?
6829 Mr. {Walden.} Aye.
6830 The {Clerk.} Mr. Walden, aye.
6831 Mr. Terry?
6832 Mr. {Terry.} Aye.
6833 The {Clerk.} Mr. Terry, aye.
6834 Mr. Rogers?
6835 [No response.]
6836 The {Clerk.} Mrs. Myrick?
6837 [No response.]
6838 The {Clerk.} Mr. Sullivan?
6839 Mr. {Sullivan.} Aye.
6840 The {Clerk.} Mr. Sullivan, aye.
6841 Mr. Murphy?
6842 [No response.]
6843 The {Clerk.} Mr. Burgess?
6844 Dr. {Burgess.} Aye.
6845 The {Clerk.} Mr. Burgess, aye.
6846 Mrs. Blackburn?
6847 Mrs. {Blackburn.} Aye.

6848 The {Clerk.} Mrs. Blackburn, aye.
6849 Mr. Bilbray?
6850 Mr. {Bilbray.} Aye.
6851 The {Clerk.} Mr. Bilbray, aye.
6852 Mr. Bass?
6853 Mr. {Bass.} Aye.
6854 The {Clerk.} Mr. Bass, aye.
6855 Mr. Gingrey?
6856 Dr. {Gingrey.} Aye.
6857 The {Clerk.} Mr. Gingrey, aye.
6858 Mr. Scalise?
6859 [No response.]
6860 The {Clerk.} Mr. Latta?
6861 Mr. {Latta.} Aye.
6862 The {Clerk.} Mr. Latta, aye.
6863 Mrs. McMorris Rodgers?
6864 Mrs. {McMorris Rodgers.} Aye.
6865 The {Clerk.} Mrs. McMorris Rodgers, aye.
6866 Mr. Harper?
6867 Mr. {Harper.} Aye.
6868 The {Clerk.} Mr. Harper, aye.
6869 Mr. Lance?
6870 Mr. {Lance.} Aye.
6871 The {Clerk.} Mr. Lance, aye.

6872 Mr. Cassidy?
6873 Dr. {Cassidy.} Aye.
6874 The {Clerk.} Mr. Cassidy, aye.
6875 Mr. Guthrie?
6876 Mr. {Guthrie.} Aye.
6877 The {Clerk.} Mr. Guthrie, aye.
6878 Mr. Olson?
6879 Mr. {Olson.} Aye.
6880 The {Clerk.} Mr. Olson, aye.
6881 Mr. McKinley?
6882 [No response.]
6883 The {Clerk.} Mr. Gardner?
6884 Mr. {Gardner.} Aye.
6885 The {Clerk.} Mr. Gardner, aye.
6886 Mr. Pompeo?
6887 [No response.]
6888 The {Clerk.} Mr. Kinzinger?
6889 [No response.]
6890 The {Clerk.} Mr. Griffith?
6891 Mr. {Griffith.} Aye.
6892 The {Clerk.} Mr. Griffith, aye.
6893 Mr. Waxman?
6894 Mr. {Waxman.} Aye. No.
6895 The {Clerk.} Mr. Waxman, no.

6896 Mr. Dingell?
6897 [No response.]
6898 The {Clerk.} Mr. Markey?
6899 [No response.]
6900 The {Clerk.} Mr. Towns?
6901 [No response.]
6902 The {Clerk.} Mr. Pallone?
6903 Mr. {Pallone.} No.
6904 The {Clerk.} Mr. Pallone, no.
6905 Mr. Rush?
6906 [No response.]
6907 The {Clerk.} Ms. Eshoo?
6908 Ms. {Eshoo.} No.
6909 The {Clerk.} Ms. Eshoo, no.
6910 Mr. Engel?
6911 [No response.]
6912 The {Clerk.} Mr. Green?
6913 Mr. {Green.} No.
6914 The {Clerk.} Mr. Green, no
6915 [No response.]
6916 The {Clerk.} Mrs. Capps?
6917 Mrs. {Capps.} No.
6918 The {Clerk.} Mrs. Capps, no.
6919 Mr. Doyle?

6920 [No response.]

6921 The {Clerk.} Ms. Schakowsky?

6922 [No response.]

6923 The {Clerk.} Mr. Gonzalez?

6924 Mr. {Mr. Gonzalez.} No.

6925 The {Clerk.} Mr. Gonzalez, no.

6926 Mr. Inslee?

6927 Mr. {Inslee.} No.

6928 The {Clerk.} Mr. Inslee, no.

6929 Ms. Baldwin?

6930 Ms. {Baldwin.} No.

6931 The {Clerk.} Ms. Baldwin, no.

6932 Mr. Ross?

6933 Mr. {Ross.} No.

6934 The {Clerk.} Mr. Ross, no.

6935 Mr. Weiner?

6936 Mr. {Weiner.} No.

6937 The {Clerk.} Mr. Weiner, no.

6938 Mr. Matheson?

6939 Mr. {Matheson.} No.

6940 The {Clerk.} Mr. Matheson, no.

6941 Mr. Butterfield?

6942 [No response.]

6943 The {Clerk.} Mr. Barrow?

6944 Mr. {Barrow.} Votes no.
6945 The {Clerk.} Mr. Barrow votes no.
6946 Ms. Matsui?
6947 Ms. {Matsui.} No.
6948 The {Clerk.} Ms. Matsui, no.
6949 Ms. Christensen?
6950 Dr. {Christensen.} No.
6951 The {Clerk.} Ms. Christensen, no.
6952 The {Chairman.} Mr. Upton?
6953 [No response.]
6954 Mr. {Pitts.} Are there further members wishing to be
6955 recorded? Mr. Rogers?
6956 The {Clerk.} Mr. Rogers?
6957 Mr. {Rogers.} Aye.
6958 The {Clerk.} Mr. Rogers, aye.
6959 Mr. {Pitts.} Mr. Scalise?
6960 The {Clerk.} Mr. Scalise?
6961 Mr. {Scalise.} Aye.
6962 The {Clerk.} Mr. Scalise, aye.
6963 Mr. {Pitts.} The Clerk will report the result.
6964 The {Clerk.} Mr. Chairman, on that there were 21 ayes,
6965 14 nays.
6966 Mr. {Pitts.} The ayes have it, the bill is favorably
6967 reported.

|

6968 H.R. 1215

6969 Mr. {Pitts.} The Chair calls up H.R. 1215 and asks the

6970 Clerk to report.

6971 The {Clerk.} H.R. 1215.

6972 [The information follows:]

6973 ***** INSERT 18 *****

|
6974 Mr. {Pitts.} Without objection, the first reading of
6975 the bill is dispensed with, so ordered. Are there any
6976 amendments to the bill? The gentlelady, Ms. Baldwin, is
6977 recognized to offer an amendment.

6978 Ms. {Baldwin.} Mr. Chairman, I move to strike the last
6979 word. I do indeed have an amendment, but I wanted to ask
6980 counsel a couple of questions before offering it.

6981 Mr. {Pitts.} The gentlelady is recognized for 5
6982 minutes.

6983 Ms. {Baldwin.} Thank you. Because I have a couple of
6984 questions related to both the Personal Responsibility
6985 Education Program known as PREP and also Section 2954 of the
6986 Affordable Care Act, that section that restores mandatory
6987 funding for the abstinence-only education program under the
6988 Social Security Act, I would start by asking is the
6989 abstinence-only program that is authorized under Section 510
6990 of the Social Security Act supported by mandatory spending?

6991 {Counsel.} Yes.

6992 Ms. {Baldwin.} And is the amount of this mandatory
6993 spending \$50 million per year?

6994 {Counsel.} That is correct.

6995 Ms. {Baldwin.} Are you aware of any statutory
6996 requirement or directive in Section 510 that abstinence-only

6997 education programs funded under this authority be based on
6998 any kind of evidence that the program actually works? Is
6999 there an evidence-based aspect to this?

7000 {Counsel.} To the best of my knowledge, no.

7001 Ms. {Baldwin.} Okay, and this is very different from
7002 the statutory requirements of the Personal Responsibility
7003 Education Program which state that an education program must
7004 ``replicate evidence-based effective programs'' and be
7005 ``medically accurate.'' Isn't that correct?

7006 {Counsel.} That is correct.

7007 Ms. {Baldwin.} So the abstinence-only program has no
7008 similar standards, this replicate evidence-based effective
7009 programs or be medically accurate as far as you know?

7010 {Counsel.} That is correct.

7011 Ms. {Baldwin.} Okay. And just to be clear, Section
7012 2954 of the Affordable Care Act restores \$50 million in
7013 mandatory spending per year for the next 5 years to the
7014 abstinence-only program, correct?

7015 {Counsel.} Correct.

7016 Ms. {Baldwin.} All right. It is the end of my
7017 questions, but I have to say I am really confused by what we
7018 are doing today with this bill. We are about to end
7019 mandatory funding for PREP which must be evidence-based and
7020 require substantial emphasis on both contraception and

7021 abstinence for the prevention of teen pregnancy, but we are
7022 leaving intact \$250 million of mandatory spending over 5
7023 years that evidence clearly indicates does not work.

7024 I wanted to ask the Chairman unanimous consent to submit
7025 a letter from the Sex Education Coalition. I had previously
7026 given it to the majority to review and would ask unanimous
7027 consent at this point in time.

7028 Mr. {Pitts.} Without objection, so ordered.

7029 [The information follows:]

7030 ***** COMMITTEE INSERT *****

|
7031 Ms. {Baldwin.} And Mr. Chairman, if appropriate, I
7032 would now yield back my debate time and seek recognition to
7033 offer an amendment.

7034 Mr. {Pitts.} The Chair recognizes the lady to offer an
7035 amendment.

7036 Ms. {Baldwin.} Thank you, Mr. Chairman. I have an
7037 amendment at the desk.

7038 Mr. {Pitts.} The Clerk will report the amendment. It
7039 is amendment number 6.

7040 The {Clerk.} Amendment to H.R. 1215 offered by Ms.
7041 Baldwin.

7042 [The amendment follows:]

7043 ***** INSERT 19 *****

|
7044 Mr. {Pitts.} Without objection, the reading of the
7045 amendment is dispensed with. The gentlelady is recognized
7046 for 5 minutes in support of her amendment.

7047 Ms. {Baldwin.} Thank you, Mr. Chairman. The measure
7048 that we are considering at present would repeal the mandatory
7049 funding for the Personal Responsibility Education Program, or
7050 PREP, and make funding for this program discretionary.

7051 I have heard my colleagues on the other side of the
7052 aisle assert time and time again that this shift is necessary
7053 because as Members of Congress, we should have the ultimate
7054 say over how much funding each program gets each year. If my
7055 colleagues accept that premise, then it would logically
7056 follow that mandatory funding for the Title 5 abstinence-only
7057 program should also be subject to annual spending decisions
7058 by members. However, as we have just heard from counsel, the
7059 bills we are considering today will not impact the mandatory
7060 funding for the Title 5 abstinence-only program.

7061 My amendment is simple. It states that the bill to
7062 repeal the funding cannot take effect until the Title 5
7063 abstinence-only program is repealed. I would assume that my
7064 colleagues who are supportive of H.R. 1215 would also be
7065 supportive of this amendment.

7066 While I would like to give Congressman Latta and his

7067 colleagues the benefit of the doubt and assume that the
7068 decision to threaten the funding for the PREP program but not
7069 the abstinence-only program was inadvertent, I am skeptical
7070 that this was indeed the case.

7071 However, if I am incorrect, I welcome my colleagues to
7072 help accept this amendment. I think the members on both
7073 sides of aisle would agree that abstaining from sex is
7074 certainly the safest and most effective way to prevent
7075 unintended pregnancies and most sexually transmitted
7076 diseases. This is precisely why abstinence is a key
7077 component of comprehensive sex education offered through the
7078 PREP program. But unlike the Title 5 abstinence-only
7079 program, PREP must be evidence-based and must also provide
7080 information on contraception and sexually transmitted
7081 diseases.

7082 Forty-three states have applied for PREP funding,
7083 including Congressman Latta's home State of Ohio and my own
7084 home State of Wisconsin. Notably, of those 43 states, 16
7085 have only applied for PREP funding and not for abstinence-
7086 only funding including Ohio and Wisconsin. This demonstrate
7087 that our cash-strapped states understand the cost is too high
7088 to accept abstinence-only funding at the exclusion of
7089 comprehensive sex education.

7090 Wisconsin will receive \$4.7 million over the next 5

7091 years through PREP. Upon receipt of this grant funding,
7092 former Secretary of the Wisconsin Department of Health
7093 Services, Karen Timberlake, praised another critical benefit
7094 of PREP funding. The program will lead to cost savings in
7095 other areas of our healthcare system. Secretary Timberlake
7096 said for each child making a healthier choice for themselves,
7097 we also realize cost savings in Wisconsin's Medicaid program
7098 and other programs as well.

7099 Mr. Chairman, I fail to see how endangering funding for
7100 this critical program will lead to an overall reduction in
7101 healthcare spending. I fail to see how endangering this
7102 funding for this critical program is fiscally responsible. I
7103 also fail to see how endangering funding for a program that
7104 will improve the health of young people is morally or
7105 socially responsible. Furthermore, I would like to point out
7106 that supporting abstinence only at the exclusion of
7107 comprehensive sex education is yet another example of the
7108 very disappointing attack we have seen lately on women, and
7109 this time especially on young women.

7110 I remind my colleagues that we should see this in the
7111 greater context of what has been the agenda of the majority
7112 so far this Congress. The first hearing and markup of this
7113 Committee was on legislation to take away women's abilities
7114 to make their own important life decisions about their

7115 reproductive health. Since then, Republicans have taken to
7116 the Floor in support of measures to block women's access to
7117 reproductive healthcare and especially planning. And now
7118 today, they are offering yet another measure that will impact
7119 young women, this time putting a critical program at risk
7120 that provides these woman and young men, too, with evidence-
7121 based information about their health and their choices.

7122 I urge my colleagues to support this amendment and to
7123 vote against the underlying bill, and I yield back my
7124 remaining 20 seconds.

7125 Mr. {Pitts.} The Chair thanks the gentlelady. Is there
7126 further discussion on the amendment? The gentleman from
7127 Illinois, Mr. Shimkus, is recognized.

7128 Mr. {Shimkus.} Thank you, Mr. Chairman. Just to ask a
7129 question of counsel because I ran in and out, does H.R. 1215,
7130 does it repeal Section 2953?

7131 {Counsel.} It does not.

7132 Mr. {Shimkus.} It does not? That is all the question I
7133 have. Thank you very much. I yield back.

7134 Mr. {Pitts.} Is there further discussion? The
7135 gentlelady from California is recognized for 5 minutes.

7136 Ms. {Eshoo.} Thank you, Mr. Chairman. I just wanted to
7137 ask the majority if there is anyone that wishes to respond on
7138 the questions that were raised by Ms. Baldwin about this

7139 program being mandatory spending, these points that were
7140 raised in other bills that the majority used as the
7141 foundations for their objections to amendments that were
7142 being offered? Does anyone care to answer that? This is--

7143 Mr. {Shimkus.} Will the gentlelady yield? That is part
7144 of my question because 1215 does not repeal Section 2953, it
7145 just makes it deal with annual authorization process. Is
7146 that correct, Counsel?

7147 {Counsel.} That is correct.

7148 Mr. {Shimkus.} So I mean, that is why--

7149 Ms. {Eshoo.} So you are repealing--

7150 Mr. {Shimkus.} It doesn't repeal Section--

7151 Ms. {Eshoo.} I am taking back my time.

7152 Mr. {Shimkus.} It does not repeal Section--

7153 Ms. {Eshoo.} Mr. Shimkus, I am reclaiming my time.

7154 Mr. {Shimkus.} Okay. You can have it. It is your
7155 time.

7156 Ms. {Eshoo.} This is repealing the mandatory part of
7157 the legislation? The mandatory funding?

7158 {Counsel.} The underlying legislation gets rid of the
7159 mandatory funding of the program and rescinds any unobligated
7160 funds.

7161 Ms. {Eshoo.} So that is how it is justified.

7162 Mr. {Shimkus.} Will the gentlelady yield?

7163 Ms. {Eshoo.} I would be glad to.

7164 Mr. {Shimkus.} Well, I just said it doesn't repeal the
7165 section. It repeals the mandatory funding. You can still do
7166 annual authorizations. It is really part of that whole
7167 debate we have had all day.

7168 Ms. {Eshoo.} But reclaiming my time.

7169 Mr. {Shimkus.} Do we want to authorize--

7170 Ms. {Eshoo.} Wait a minute.

7171 Mr. {Shimkus.} --or do we want to appropriate?

7172 Ms. {Eshoo.} Wait a minute. Reclaiming my time. You
7173 still keep the mandatory funding for abstinence. So you
7174 still have mandatory funding. You know, that is why I said
7175 what I said earlier. This is like pretend, you know. You
7176 build a whole foundation for opposing amendments saying that
7177 this is wrong, the Chinese are funding everything, our debt,
7178 and we simply can't and we can't afford it, we can't do it
7179 and if you build it they will come and then there won't be
7180 people there or it will cost too much and it is mandatory, it
7181 is mandatory, mandatory, mandatory, mandatory since 10:00
7182 this morning, and now here comes along one of your favorite
7183 things and you abandon what your principles were today. So
7184 that is just the point that I wanted to make. I think it
7185 took until 25 to 6:00 to pull the veil off the face of the
7186 whole effort but--

7187 Ms. {DeGette.} Will the gentlelady yield?

7188 Ms. {Eshoo.} --we finally have gotten to it. Yes, I
7189 would be glad to.

7190 Ms. {DeGette.} What the gentlelady is saying is the
7191 underlying bill repeals the mandatory funding for the
7192 science-based sex education that includes abstinence
7193 education but it keeps in place the mandatory funding for the
7194 abstinence-only sex education which has been proved by study
7195 after study to not work. So what the gentlelady from
7196 California is saying is if you are going to be consistent
7197 about getting rid of mandatory funding programs, you should
7198 do it especially when the programs don't work. And I yield
7199 back.

7200 Ms. {Eshoo.} I will yield back the balance of my time--

7201 Mr. {Pitts.} The gentlelady--

7202 Ms. {Eshoo.} --unless there is anyone in the House that
7203 wants to use my time.

7204 Mr. {Pitts.} The gentlelady yields back.

7205 Mr. {Latta.} Could I--

7206 Mr. {Pitts.} Is there further discussion on the
7207 amendment? The gentleman from Ohio, Mr. Latta, is recognized
7208 for 5 minutes.

7209 Mr. {Latta.} Well, thank you very much, Mr. Chairman.

7210 Again, what this amendment does, as the gentleman from

7211 Illinois pointed out, is making this from mandatory to a
7212 yearly authorization.

7213 Let us just point out a few things that when we are
7214 talking about duplicative when we are talking about what the
7215 amendment would do or what the bill would do on 1215. Under
7216 the fiscal year 2012 request, for teenage pregnancy
7217 prevention right now we are talking \$22,300,000; HIV school
7218 health, \$40 million; successful safe and healthy students,
7219 \$365 million; promise neighborhoods, \$150 million. Again,
7220 these are fiscal 2012 requests, and that is from the
7221 Department of Education. Substance abuse and mental health
7222 services administration, it is \$41,400,000; minority AIDS
7223 initiative; health resources services administration,
7224 maternal and child health block grants, \$64,489,000; Title
7225 10, \$327,356,000; Office of Assistant Secretary for Health
7226 Administration for Children and Families, Office of Minority
7227 Health, that is \$57,980,000; promoting safe and stable
7228 families, \$443,311.

7229 And again, you know, what this bill also does is make
7230 sure that we are not duplicating programs that are out there
7231 right now. It also would, as I said, take it from the direct
7232 appropriation down to just an authorization.

7233 Over the 5 years you are looking at about a \$375 million
7234 savings if you don't have these duplicative programs out

7235 there. Also, as the gentleman from Illinois pointed out
7236 earlier that we are looking at between 42 to 43 percent of
7237 every dollar out there, so you are looking at we would be
7238 borrowing about \$157.5 million on what potentially could be
7239 then a duplicative program, especially when you are looking
7240 at this year at a \$1.65 trillion deficit. So you know,
7241 again, what the bill does is to make sure that we are not
7242 duplicating or make sure that the Congress can look at it
7243 each year because you are looking at well over a billion
7244 dollars right here that could be duplicated in all these
7245 other programs that I listed for the fiscal year 2012. We
7246 want to make sure that Congress has the ability to look at
7247 that during the authorization process and that these are not
7248 made direct.

7249 And you are absolutely correct. You know, when you are
7250 talking about what we are borrowing out there, if you look at
7251 the January major holdings, foreign holdings of the Treasury,
7252 mainland China right now has--trillion of U.S. security.
7253 Japan has \$885.9. Interesting enough, when you get down into
7254 the category of oil exporters, some of the countries out
7255 there that also hold our debt, are Iran and Libya and you are
7256 also looking at Venezuela.

7257 So again, we want to make sure that we don't have this
7258 duplication out there so we don't have to borrow those

7259 dollars. And with that, Mr. Chairman, I yield back.

7260 Mr. {Pallone.} Mr. Chairman--

7261 Ms. {DeGette.} Will the gentleman yield?

7262 Mr. {Pallone.} --can I ask the gentleman to yield? Mr.

7263 Latta? I am not sure I understood--I think you were talking

7264 about the debt again? Is that accurate, about the debt?

7265 Mr. {Latta.} Yeah, reclaiming my time. What we are

7266 looking at is what has been talked about a little bit

7267 earlier, is that if you are duplicating programs at \$375

7268 million, as Mr. Shimkus had pointed out, that you are looking

7269 at \$375 million, it would be about approximately \$157.5

7270 million that we would have to borrow of that \$375 again,

7271 which would go to--we would have to go out into the market to

7272 borrow those dollars. And again, as I just mentioned at who

7273 is holding the majority of our debt today, of that \$4.4

7274 trillion, it is 1.15.47 trillion for mainland China and for

7275 Japan \$885.9 billion. And as I said, oil exporters, we owe

7276 them \$215.5 billion.

7277 Ms. {Eshoo.} Yield just for a quick question? Will the

7278 gentleman yield?

7279 Mr. {Latta.} With my time remaining, I will yield.

7280 Ms. {Eshoo.} Thank you very much. My question is why

7281 one and not the other?

7282 Mr. {Latta.} Reclaiming my time with 13 seconds left.

7283 Again, as I read through all these other programs that are
7284 out there in the fiscal year 2012 request, you are looking at
7285 well over a billion dollars that would be duplicated by the
7286 \$375 million that is under the Section 2953, and with that I
7287 see my time is expired and I yield back.

7288 Mr. {Pitts.} The gentleman yields back. For what
7289 purposes?

7290 Mr. {Pallone.} Strike the last word, and I am not going
7291 to be--

7292 Mr. {Pitts.} The gentleman is recognized for 5 minutes.

7293 Mr. {Pallone.} Thank you, Mr. Chairman. I mean, I am
7294 not going to use all my time. I will yield some of it to
7295 others if they want it. But the point is that this
7296 abstinence program, I guess it is about \$50 million per year,
7297 the abstinence-only that is mandatory, we have had
7298 discussions as Ms. Eshoo said all day about different
7299 programs in these five bills that were, you know, comparable
7300 to that \$50 million annually. The PREP program is I think
7301 the teaching program that we just had on the previous bill.
7302 I forget how much. And all we kept hearing over and over
7303 again was how we were recreating debt, you know, debt to
7304 China, debt to I don't even know how many other countries.
7305 And I think Mr. Latta was going into that debt situation
7306 again.

7307 Our only point on this side of the aisle is if your
7308 whole premise today was that mandatory spending was bad
7309 because somehow it was creating all this debt, why is it any
7310 different for the abstinence-only program, and no one on the
7311 other side of the aisle seems to be willing to answer the
7312 question. So I will just repeat Ms. Eshoo's question again
7313 and say how do you justify the mandatory spending on
7314 abstinence only but say that we shouldn't use it for other
7315 things. That is my question. I will ask Mr. Latta, if the
7316 gentleman would respond. To talk about debt and more debt--

7317 Mr. {Latta.} Is the--

7318 Mr. {Pallone.} --we can talk about debt all day.

7319 Mr. {Latta.} --Chairman yielding?

7320 Mr. {Pallone.} I would yield.

7321 Mr. {Latta.} Again, as I read off, we have all these
7322 other programs that were duplicative, and again, as I said--

7323 Mr. {Pallone.} But if I can reclaim my time,
7324 abstinence-only is only abstinence. We, in the PREP program,
7325 include abstinence. It seems to me that, you know, you go
7326 for the program that is more comprehensive. But in any case
7327 it doesn't matter because the bottom line is that you have
7328 been saying that mandatory spending is wrong because it
7329 creates debt. So there is no difference. I don't know if
7330 anybody else--

7331 Ms. {DeGette.} Will the gentleman yield?

7332 Mr. {Pallone.} Yeah, I yield to the gentlewoman from
7333 Colorado.

7334 Ms. {DeGette.} Well, it is true that there are a lot of
7335 other programs as Mr. Latta said, but those aren't programs
7336 that provide comprehensive sex education. And the one they
7337 are keeping that covers this field, is the abstinence-only.
7338 That is the one mandatory spending program they are keeping
7339 that would cover sex education, and it doesn't work. Study
7340 after study after study shows that it doesn't work. So why
7341 would you keep this mandatory spending program and cut the
7342 one that works? I mean, that is the question that we are
7343 trying to ask, and we are not getting an answer.

7344 Mr. {Shimkus.} Would my friend from Colorado yield?

7345 Ms. {DeGette.} I don't control any time.

7346 Mr. {Pallone.} It is my time, but I yield to Mr.
7347 Shimkus.

7348 Mr. {Shimkus.} I would think that this is just the
7349 first of many bites at the apple on the healthcare law where
7350 we will continue to look at provisions, and I would suggest
7351 that if you are so focused on this that you submit a bill to
7352 defund the mandatory aspects of that and have it go through
7353 the process.

7354 Ms. {Baldwin.} Will the gentleman yield?

7355 Mr. {Pallone.} Reclaiming my time. I yield to the
7356 gentlewoman from Wisconsin.

7357 Ms. {Baldwin.} We don't need to submit a bill because I
7358 have just submitted an amendment that does precisely that,
7359 and if you support it we will--

7360 Mr. {Shimkus.} Well, then let us have a vote.

7361 Ms. {Baldwin.} Absolutely. I am--

7362 Mr. {Shimkus.} Then we are ready to vote.

7363 Ms. {Baldwin.} --that process. But we have a program
7364 that is evidence-based, medically accurate that is going from
7365 mandatory to discretion in the underlying bill. We have
7366 another program that as my colleague from Colorado emphasizes
7367 appropriately is not evidence-based, is not scientifically
7368 based and has proven to be ineffective. Look, if we can all
7369 agree in this Committee on something is that we want to
7370 reduce the number of unintended pregnancies, that we want to
7371 reduce the incidents of sexually transmitted disease, that we
7372 want to make sure that our youth make healthy choices. Let
7373 us adopt this amendment and focus on evidence-based,
7374 successful efforts at doing that. That is something that I
7375 hope we can all agree on. I yield back to the gentleman from
7376 New Jersey.

7377 Mr. {Pallone.} Unless someone else wants the time, I
7378 will yield back, Mr. Chairman.

7379 Mr. {Pitts.} The Chair thanks the gentleman. Is there
7380 any further discussion on the amendment? If there is no
7381 further discussion, the vote occurs on the amendment. All
7382 those in favor shall signify by saying aye, all those
7383 opposed, no.

7384 Mr. {Pallone.} Chairman, I would ask for a roll call.

7385 Mr. {Pitts.} The Ranking Member is requesting a roll
7386 call vote. The Clerk will call the roll.

7387 The {Clerk.} Mr. Barton?

7388 [No response.]

7389 The {Clerk.} Mr. Stearns?

7390 [No response.]

7391 The {Clerk.} Mr. Whitfield?

7392 [No response.]

7393 The {Clerk.} Mr. Shimkus?

7394 Mr. {Shimkus.} No.

7395 The {Clerk.} Mr. Shimkus, no.

7396 Mr. Pitts?

7397 Mr. {Pitts.} No.

7398 The {Clerk.} Mr. Pitts, no.

7399 Mrs. Bono Mack?

7400 [No response.]

7401 The {Clerk.} Mr. Walden?

7402 Mr. {Walden.} Votes no.

7403 The {Clerk.} Mr. Walden, no.
7404 Mr. Terry?
7405 Mr. {Terry.} No.
7406 The {Clerk.} Mr. Terry, no.
7407 Mr. Rogers?
7408 [No response.]
7409 The {Clerk.} Mrs. Myrick?
7410 Mrs. {Myrick.} No.
7411 The {Clerk.} Mrs. Myrick, no.
7412 Mr. Sullivan?
7413 Mr. {Sullivan.} No.
7414 The {Clerk.} Mr. Sullivan, no.
7415 Mr. Murphy?
7416 [No response.]
7417 The {Clerk.} Mr. Burgess?
7418 [No response.]
7419 The {Clerk.} Mrs. Blackburn?
7420 [No response.]
7421 The {Clerk.} Mr. Bilbray?
7422 [No response.]
7423 The {Clerk.} Mr. Bass?
7424 Mr. {Bass.} Yes.
7425 The {Clerk.} Mr. Bass, aye.
7426 Mr. Gingrey?

7427 Dr. {Gingrey.} No.

7428 The {Clerk.} Mr. Gingrey, no.

7429 Mr. Scalise?

7430 [No response.]

7431 The {Clerk.} Mr. Latta?

7432 Mr. {Latta.} No.

7433 The {Clerk.} Mr. Latta, no.

7434 Mrs. McMorris Rodgers?

7435 Mrs. {McMorris Rodgers.} No.

7436 The {Clerk.} Mrs. McMorris Rodgers, no.

7437 Mr. Harper?

7438 Mr. {Harper.} No.

7439 The {Clerk.} Mr. Harper, no.

7440 Mr. Lance?

7441 Mr. {Lance.} No.

7442 The {Clerk.} Mr. Lance, no.

7443 Mr. Cassidy?

7444 [No response.]

7445 The {Clerk.} Mr. Guthrie?

7446 Mr. {Guthrie.} No.

7447 The {Clerk.} Mr. Guthrie, no.

7448 Mr. Olson?

7449 Mr. {Olson.} No.

7450 The {Clerk.} Mr. Olson, no.

7451 Mr. McKinley?
7452 [No response.]
7453 The {Clerk.} Mr. Gardner?
7454 Mr. {Gardner.} No.
7455 The {Clerk.} Mr. Gardner, no.
7456 Mr. Pompeo?
7457 [No response.]
7458 The {Clerk.} Mr. Kinzinger?
7459 [No response.]
7460 The {Clerk.} Mr. Griffith?
7461 Mr. {Griffith.} No.
7462 The {Clerk.} Mr. Griffith, no.
7463 Mr. Waxman?
7464 Mr. {Waxman.} Aye.
7465 The {Clerk.} Mr. Waxman, aye.
7466 Mr. Dingell?
7467 [No response.]
7468 The {Clerk.} Mr. Markey?
7469 [No response.]
7470 The {Clerk.} Mr. Towns?
7471 [No response.]
7472 The {Clerk.} Mr. Pallone?
7473 Mr. {Pallone.} Aye.
7474 The {Clerk.} Mr. Pallone, aye.

7475 Mr. Rush?
7476 [No response.]
7477 The {Clerk.} Ms. Eshoo?
7478 Ms. {Eshoo.} Aye.
7479 The {Clerk.} Ms. Eshoo, aye.
7480 Mr. Engel?
7481 [No response.]
7482 The {Clerk.} Mr. Green?
7483 [No response.]
7484 The {Clerk.} Ms. DeGette?
7485 Ms. {DeGette.} Aye.
7486 The {Clerk.} Ms. DeGette, aye.
7487 Mrs. Capps?
7488 Mrs. {Capps.} Aye.
7489 The {Clerk.} Mrs. Capps, aye.
7490 Mr. Doyle?
7491 [No response.]
7492 The {Clerk.} Ms. Schakowsky?
7493 Ms. {Schakowsky.} Aye.
7494 The {Clerk.} Ms. Schakowsky, aye.
7495 Mr. Gonzalez?
7496 Mr. {Gonzalez.} Aye.
7497 The {Clerk.} Mr. Gonzalez, aye.
7498 Mr. Inslee?

7499 Mr. {Inslee.} Aye.
7500 The {Clerk.} Mr. Inslee, aye.
7501 Ms. Baldwin?
7502 Ms. {Baldwin.} Aye.
7503 The {Clerk.} Ms. Baldwin, aye.
7504 Mr. Ross?
7505 Mr. {Ross.} Aye.
7506 The {Clerk.} Mr. Ross, aye.
7507 Mr. Weiner?
7508 Mr. {Weiner.} Aye.
7509 The {Clerk.} Mr. Weiner, aye.
7510 Mr. Matheson?
7511 Mr. {Matheson.} Aye.
7512 The {Clerk.} Mr. Matheson, aye.
7513 Mr. Butterfield?
7514 Mr. {Butterfield.} Aye.
7515 The {Clerk.} Mr. Butterfield, aye.
7516 Mr. Barrow?
7517 Mr. {Barrow.} Votes aye.
7518 The {Clerk.} Mr. Barrow, aye.
7519 Ms. Matsui?
7520 Ms. {Matsui.} Aye.
7521 The {Clerk.} Ms. Matsui, aye.
7522 Ms. Christensen?

7523 Dr. {Christensen.} Aye.

7524 The {Clerk.} Ms. Christensen, aye.

7525 Mr. Upton?

7526 The {Chairman.} Votes no.

7527 The {Clerk.} Mr. Upton, no.

7528 The {Chairman.} [Presiding] Other members wishing to be
7529 cast a vote? Mr. Rogers from Michigan?

7530 Mr. {Rogers.} No.

7531 The {Clerk.} Mr. Rogers, no.

7532 The {Chairman.} Dr. Burgess?

7533 The {Clerk.} Dr. Burgess?

7534 Dr. {Burgess.} No.

7535 The {Clerk.} Dr. Burgess, no.

7536 The {Chairman.} Other members wishing to cast--

7537 Mr. {Scalise.} Mr. Chairman.

7538 The {Clerk.} Mr. Scalise is not recorded.

7539 Mr. {Scalise.} No.

7540 The {Clerk.} Mr. Scalise, no.

7541 The {Chairman.} Other members wishing to cast a vote?

7542 Mr. Barton?

7543 Mr. {Barton.} No.

7544 The {Clerk.} Mr. Barton, no.

7545 The {Chairman.} If no other members wish to cast the
7546 vote, we will ask The Clerk to report the tally.

7547 The {Clerk.} Mr. Chairman, on that there were 17 ayes,
7548 20 nays.

7549 The {Chairman.} Twenty nays, the amendment is not
7550 agreed to. Are there further amendments to the bill?

7551 Ms. {DeGette.} Mr. Chairman?

7552 The {Chairman.} The Chair recognizes the gentlelady
7553 from Colorado.

7554 Ms. {DeGette.} Thank you very much, Mr. Chairman. I
7555 have an amendment at the desk.

7556 The {Chairman.} The Clerk will report the title.

7557 The {Clerk.} Number 1, Ms, DeGette?

7558 Ms. {DeGette.} Yes, number 1.

7559 The {Clerk.} An amendment offered by Ms. DeGette.

7560 [The amendment follows:]

7561 ***** INSERT 20 *****

|
7562 The {Chairman.} It is the Chair's understanding this
7563 may be the last amendment to the bill. So the Clerk will
7564 disperse the amendment, and the gentlelady is recognized for
7565 5 minutes in support of her amendment.

7566 Ms. {DeGette.} Thank you very much, Mr. Chairman. Mr.
7567 Chairman, this is an amendment that follows up on what I was
7568 talking about with the Baldwin amendment which is if you are
7569 going to have mandatory funding for abstinence-only sex
7570 education programs, which this underlying bill apparently
7571 retains, you should also have mandatory funding for sex
7572 education that actually works.

7573 And so what the amendment does, is it makes the
7574 effective date of the bill the date of the last fiscal years
7575 for which the abstinence-only program receives funding, which
7576 is October 1, 2014.

7577 You know, I agree with Ms. Baldwin and everybody else in
7578 this room that we need to teach teens that abstaining from
7579 sex is certainly the safest thing they can do in terms of
7580 preventing unwanted pregnancies and sexually transmitted
7581 diseases and many, many other issues. But in fact, the
7582 United States has one of the highest rates of teen pregnancy
7583 in the industrialized world. U.S. rates are up to nine times
7584 higher than in other developed countries, and more than

7585 400,000 teen girls ages 15 to 19 give birth each year in the
7586 United States. Most of those are unintended, and one out of
7587 every four women in that age group has a sexually transmitted
7588 disease.

7589 So here is the thing is this Committee, by defeating the
7590 Baldwin amendment, said well, we are going to make
7591 abstinence-only sex education a mandatory program. Now,
7592 look, as a mother of at least one young lady in that age
7593 group right now and someone who represents many more, I want
7594 to make sure that they can get the information they need to
7595 prevent sexually transmitted diseases and unwanted
7596 pregnancies, and the only way to do that is to have this PREP
7597 program which gives all of the information.

7598 Now, if you really want to improve healthcare reform, if
7599 you really want to reduce the deficit, then you should
7600 eliminate the \$250 million abstinence-only program, but we
7601 don't do that.

7602 So let me just give you a couple of statistics if I--

7603 Mr. {Waxman.} Will the gentlelady yield?

7604 Ms. {DeGette.} Let me just--

7605 Mr. {Waxman.} Sure. Go ahead.

7606 Ms. {DeGette.} Let me just--I want to give a couple
7607 statistics so I can have them in the record because we
7608 haven't done that yet in this Congress.

7609 In 2007, the Mathematica Policy Research completed a 9-
7610 year study, and in that study, what they found was,
7611 ``Findings indicate that youth in the program group were no
7612 more likely than the control group used to abstain from sex.
7613 Federally funded abstinence programs don't stop teen sex, and
7614 they are a poor use of all of the federal money that has been
7615 spent against them''

7616 One of my favorite statistics that I have talked about
7617 in this Committee before was the Texas A&M evaluation of five
7618 abstinence-only programs being taught in Texas schools, and
7619 what they found, what this study found, is that at virtually
7620 every level, all high school grades, the kids were more
7621 sexually active after they took the abstinence only course.
7622 I don't know. It is Texas, so I don't know.

7623 But my point is that you have to have science-based
7624 policy. Otherwise, you are just wasting money. And if we
7625 don't want to waste money, then we should give people
7626 science-based sex education, just like everything else.

7627 And so I really think if you are going to keep mandatory
7628 spending for abstinence-only, you should at least keep
7629 spending for something that works. And with that, I will
7630 yield to the Ranking Member, Mr. Waxman.

7631 Mr. {Waxman.} It seems to me the essential point is
7632 that if they are going to insist that the abstinence only

7633 program which doesn't seem to do anybody any good is going to
7634 be mandatory funding, then this one should not be anything
7635 other than the same. So I think it is an issue that we have
7636 already debated very clearly. If you are against mandatory
7637 spending, you should be against both programs being mandatory
7638 in terms of spending, and if you are for mandatory spending,
7639 let us make them both the same.

7640 Ms. {DeGette.} Reclaiming my time. And let us do
7641 something that works.

7642 Mr. {Waxman.} Yes.

7643 Ms. {DeGette.} And I yield back.

7644 The {Chairman.} The gentlelady yields back. Are there
7645 other members wishing to speak on the amendment? I hear let
7646 us go.

7647 Mr. {Shimkus.} Will the gentleman yield?

7648 The {Chairman.} The gentleman from Illinois.

7649 Mr. {Shimkus.} I am glad he encouraged me to speak out.
7650 I would just say that of all the attacks on abstinence
7651 education, it was in the bill that you all passed, and I
7652 would assume that you passed it for a reason.

7653 Ms. {Baldwin.} Well, will the gentleman yield?

7654 Mr. {Shimkus.} I am just making a point that it is in
7655 the bill that you passed or that the Senate passed that we
7656 eventually accepted, you all did, and was signed into law.

7657 So the President signed it into law, so I guess he must have
7658 assumed abstinence education--

7659 Mr. {Waxman.} Will the gentleman yield?

7660 Mr. {Shimkus.} Yes, sir.

7661 Mr. {Waxman.} Both programs in the bill we passed are
7662 mandatory spending. The proposal before us--

7663 Mr. {Shimkus.} Yeah, and you must have thought it was a
7664 good idea to have abstinence education as mandatory funding.

7665 Mr. {Waxman.} Will the gentleman yield further?

7666 Mr. {Shimkus.} I would yield.

7667 Mr. {Waxman.} So let us treat them alike, either make
7668 neither one mandatory or make--

7669 Mr. {Shimkus.} Reclaiming my time. I don't know if you
7670 were in the room, there is nothing that prohibits you all
7671 from dropping a bill that addresses this same issue.

7672 Ms. {DeGette.} There is--

7673 Ms. {Baldwin.} Here in this amendment.

7674 Mr. {Shimkus.} And now is not the time to stop a bill.
7675 Give it the--

7676 Ms. {DeGette.} Will the gentleman yield?

7677 Mr. {Shimkus.} I would be happy to yield.

7678 Ms. {DeGette.} Good news. There is a bill sponsored by
7679 Representative Lee. You can co-sponsor it tomorrow.

7680 Mr. {Shimkus.} I am not sure I will be co-sponsoring

7681 it, and I yield back my time.

7682 The {Chairman.} Are there other members wishing to
7683 speak on the amendment? The gentlelady from Illinois.

7684 Mr. {Schakowsky.} First, Mr. Chairman, I would like to
7685 ask unanimous consent to submit for the record a letter of
7686 support for the Personal Responsibility Education Program led
7687 by youth advocates and signed by 120 national, state and
7688 local organizations, including the AIDS Foundation of
7689 Chicago, Illinois Caucus for Adolescent Health, Illinois
7690 Maternal and Child Health Coalition.

7691 [The information follows:]

7692 ***** COMMITTEE INSERT *****

|
7693 The {Chairman.} Without objection.

7694 Mr. {Schakowsky.} And just a second. You know, if our
7695 goal is to reduce teen pregnancies, if it is to reduce HIV-
7696 AIDS and other STDs, if it is to delay the onset of sexual
7697 intercourse and to reduce the number of sexual partners, then
7698 what we want to do is have both programs. I support
7699 abstinence programs. But it is the combination of abstinence
7700 and a comprehensive sex education that does those things.
7701 Without having all of that combined, we don't have the
7702 results that we want.

7703 So the idea of doing these, all day, these counter-
7704 productive kinds of measures that actually reduce the goals
7705 that we all agree that we want to achieve is just utterly
7706 baffling, and I would be happy to yield to the gentlewoman
7707 from California.

7708 Mrs. {Capps.} Respecting the fact that the hour is
7709 late, and the points have been made, but I think this piece
7710 of legislation highlights the hypocrisy of the debate that we
7711 have been having today over mandatory versus discretionary.
7712 The program that works is on the chopping block. The program
7713 that has been demonstrated not to work, which is mandatory,
7714 is kept sacrosanct. All the years I worked in the schools, I
7715 worked with teen parents and watched them struggle to do

7716 their best for themselves and their children. As a public
7717 health nurse, I have seen the economic and community impacts
7718 of the spread of sexually transmitted diseases. As a mother
7719 and the grandmother, I know as we all share the trepidation
7720 and anxiety but we owe them the importance of teaching our
7721 children about healthy relationships so that they can set
7722 themselves up for success in their personal family life.

7723 These are the critical components that the PREP program
7724 teaches, and any attempt to play politics with this program I
7725 think is a very dangerous game, especially when we are
7726 wasting taxpayer dollars on programs that have been
7727 discredited. So I believe it is fair as the underlying
7728 health law demonstrates, that we can take both of them and
7729 allow them to be at work and alive in our communities. And
7730 that is why I strongly urge support for this amendment, and I
7731 yield back to my colleague from Chicago.

7732 Mr. {Schakowsky.} I yield back.

7733 The {Chairman.} Okay, are there other members wishing
7734 to speak on the amendment?

7735 Mr. {Schakowsky.} Yeah, I yield back.

7736 The {Chairman.} The gentlelady yields back. Are there
7737 other members wishing to speak on the amendment? Seeing
7738 none, I think we will ask for a recorded vote on the
7739 amendment. The Clerk will call the roll.

7740 The {Clerk.} Mr. Barton?
7741 Mr. {Barton.} No.
7742 The {Clerk.} Mr. Barton, no.
7743 Mr. Stearns?
7744 [No response.]
7745 The {Clerk.} Mr. Whitfield?
7746 [No response.]
7747 The {Clerk.} Mr. Shimkus?
7748 Mr. {Shimkus.} No.
7749 The {Clerk.} Mr. Shimkus, no.
7750 Mr. Pitts?
7751 Mr. {Pitts.} No.
7752 The {Clerk.} Mr. Pitts, no.
7753 Mrs. Bono Mack?
7754 [No response.]
7755 The {Clerk.} Mr. Walden?
7756 Mr. {Walden.} No.
7757 The {Clerk.} Mr. Walden, no.
7758 Mr. Terry?
7759 [No response.]
7760 The {Clerk.} Mr. Rogers?
7761 Mr. {Rogers.} No.
7762 The {Clerk.} Mr. Rogers, no.
7763 Mrs. Myrick?

7764 Mrs. {Myrick.} No.
7765 The {Clerk.} Mrs. Myrick, no.
7766 Mr. Sullivan?
7767 [No response.]
7768 The {Clerk.} Mr. Murphy?
7769 [No response.]
7770 The {Clerk.} Mr. Burgess?
7771 Dr. {Burgess.} No.
7772 The {Clerk.} Mr. Burgess, no.
7773 Mrs. Blackburn?
7774 Mrs. {Blackburn.} No.
7775 The {Clerk.} Mrs. Blackburn, no.
7776 Mr. Bilbray?
7777 [No response.]
7778 The {Clerk.} Mr. Bass?
7779 Mr. {Bass.} No.
7780 The {Clerk.} Mr. Bass, no.
7781 Mr. Gingrey?
7782 Dr. {Gingrey.} No.
7783 The {Clerk.} Mr. Gingrey, no.
7784 Mr. Scalise?
7785 Mr. {Scalise.} No.
7786 The {Clerk.} Mr. Scalise, no.
7787 Mr. Latta?

7788 Mr. {Latta.} No.
7789 The {Clerk.} Mr. Latta, no.
7790 Mrs. McMorris Rodgers?
7791 Mrs. {McMorris Rodgers.} No.
7792 The {Clerk.} Mrs. McMorris Rodgers, no.
7793 Mr. Harper?
7794 Mr. {Harper.} No.
7795 The {Clerk.} Mr. Harper, no.
7796 Mr. Lance?
7797 Mr. {Lance.} No.
7798 The {Clerk.} Mr. Lance, no.
7799 Mr. Cassidy?
7800 [No response.]
7801 The {Clerk.} Mr. Guthrie?
7802 Mr. {Guthrie.} No.
7803 The {Clerk.} Mr. Guthrie, no.
7804 Mr. Olson?
7805 Mr. {Olson.} No.
7806 The {Clerk.} Mr. Olson, no.
7807 Mr. McKinley?
7808 [No response.]
7809 The {Clerk.} Mr. Gardner?
7810 Mr. {Gardner.} No.
7811 The {Clerk.} Mr. Gardner, no.

7812 Mr. Pompeo?
7813 [No response.]
7814 The {Clerk.} Mr. Kinzinger?
7815 Mr. {Kinzinger.} No.
7816 The {Clerk.} Mr. Kinzinger, no.
7817 Mr. Griffith?
7818 Mr. {Griffith.} No.
7819 The {Clerk.} Mr. Griffith, no.
7820 Mr. Waxman?
7821 Mr. {Waxman.} Aye.
7822 The {Clerk.} Mr. Waxman, aye.
7823 Mr. Dingell?
7824 [No response.]
7825 The {Clerk.} Mr. Markey?
7826 [No response.]
7827 The {Clerk.} Mr. Towns?
7828 [No response.]
7829 The {Clerk.} Mr. Pallone?
7830 Mr. {Pallone.} Aye.
7831 The {Clerk.} Mr. Pallone, aye.
7832 Mr. Rush?
7833 [No response.]
7834 The {Clerk.} Ms. Eshoo?
7835 Ms. {Eshoo.} Aye.

7836 The {Clerk.} Ms. Eshoo, aye.
7837 Mr. Engel?
7838 [No response.]
7839 The {Clerk.} Mr. Green?
7840 Mr. {Green.} Aye.
7841 The {Clerk.} Mr. Green, aye.
7842 Ms. DeGette?
7843 Ms. {DeGette.} Aye.
7844 The {Clerk.} Ms. DeGette, aye.
7845 Mrs. Capps?
7846 Mrs. {Capps.} Aye.
7847 The {Clerk.} Mrs. Capps, aye.
7848 Mr. Doyle?
7849 [No response.]
7850 The {Clerk.} Ms. Schakowsky?
7851 Ms. {Schakowsky.} Aye.
7852 The {Clerk.} Ms. Schakowsky, aye.
7853 Mr. Gonzalez?
7854 [No response.]
7855 The {Clerk.} Mr. Inslee?
7856 Mr. {Inslee.} Aye.
7857 The {Clerk.} Mr. Inslee, aye.
7858 Ms. Baldwin?
7859 Ms. {Baldwin.} Aye.

- 7860 The {Clerk.} Ms. Baldwin, aye.
- 7861 Mr. Ross?
- 7862 Mr. {Ross.} Aye.
- 7863 The {Clerk.} Mr. Ross, aye.
- 7864 Mr. Weiner?
- 7865 Mr. {Weiner.} Aye.
- 7866 The {Clerk.} Mr. Weiner, aye.
- 7867 Mr. Matheson?
- 7868 Mr. {Matheson.} Aye.
- 7869 The {Clerk.} Mr. Matheson, aye.
- 7870 Mr. Butterfield?
- 7871 Mr. {Butterfield.} Aye.
- 7872 The {Clerk.} Mr. Butterfield, aye.
- 7873 Mr. Barrow?
- 7874 Mr. {Barrow.} Aye.
- 7875 The {Clerk.} Mr. Barrow, aye.
- 7876 Ms. Matsui?
- 7877 Ms. {Matsui.} Aye.
- 7878 The {Clerk.} Ms. Matsui, aye.
- 7879 Ms. Christensen?
- 7880 Dr. {Christensen.} Aye.
- 7881 The {Clerk.} Ms. Christensen, aye.
- 7882 Mr. Upton?
- 7883 The {Chairman.} Votes no.

7884 The {Clerk.} Votes no.

7885 The {Chairman.} Are there any other members wishing to
7886 be recorded? The gentleman is not recorded.

7887 The {Chairman.} I am sorry.

7888 The {Clerk.} Mr. Terry, no.

7889 The {Chairman.} Are there other members wishing to cast
7890 a vote? Mr. Sullivan?

7891 Mr. {Sullivan.} No.

7892 The {Clerk.} Mr. Sullivan, no.

7893 Mr. {Pallone.} Are there other members wishing to cast
7894 a vote? If not, the Clerk will report the tally.

7895 The {Clerk.} Mr. Chairman, on that there were 16 ayes,
7896 23 nays.

7897 The {Chairman.} Sixteen ayes, 23 nays. The amendment
7898 is not agreed to. It is my understanding that there are no
7899 other amendments for this. Gentleman, for what purpose does
7900 the gentleman--

7901 Mr. {Weiner.} Just to strike the last word for purposes
7902 of asking the Chair a question.

7903 The {Chairman.} The gentleman is recognized.

7904 Mr. {Weiner.} Mr. Chairman, can I just get a handle on
7905 the schedule of the Committee? We are now most of the way
7906 through--

7907 The {Chairman.} We are done.

7908 Mr. {Weiner.} No, I understand that. We are most of
7909 the way through--

7910 The {Chairman.} We have got one more vote.

7911 Mr. {Weiner.} --the repeal part of the repeal and
7912 replace. Should we as a Committee be expecting to get the
7913 replacement legislation to provide insurance for the
7914 uninsured, reduce deficits by \$1.2 trillion over 20 years?
7915 Is that coming soon? I have been monitoring the
7916 Congressional Record. That is how I spend my idle hours. I
7917 have been monitoring the Congressional Record, waiting for
7918 that legislation. Should we be expecting that next week to
7919 be before the Committee, the week after? When should we
7920 reasonably be expecting that legislation? And I yield to the
7921 gentleman.

7922 The {Chairman.} You will be seeing a number of pieces
7923 of legislation as it relates to the replacement part in the
7924 coming weeks.

7925 Mr. {Waxman.} Will the gentleman from New York--

7926 The {Chairman.} And we will make sure that they are all
7927 in line with the Constitution.

7928 Mr. {Weiner.} Yeah and--

7929 The {Chairman.} We have learned that lesson.

7930 Mr. {Weiner.} And if I could reclaim my time. Will it
7931 be living up to the objectives that we share, covering the

7932 uninsured, reducing the deficit, improving competition so
7933 that costs are kept down.

7934 Mr. {Weiner.} Because you have got repeal and replace.
7935 There should be something to replace everything you repealed,
7936 I think the gentleman would acknowledge. Should we be
7937 reasonably expecting something that accomplishes the same
7938 goals of what--

7939 The {Chairman.} You will be excited about what we are
7940 doing.

7941 Mr. {Weiner.} Well, as the Chairman knows, getting me
7942 too excited is not a very high bar. I yield--

7943 Mr. {Waxman.} Will the gentleman yield?

7944 The {Chairman.} We will either make a mistake and put
7945 your name as a co-sponsor and object when you ask unanimous
7946 consent to remove your name.

7947 Mr. {Walden.} Would the gentleman yield?

7948 The {Chairman.} The gentleman from New York has the
7949 time.

7950 Mr. {Weiner.} I certainly would.

7951 Mr. {Waxman.} The gentleman yields to me when he--

7952 Mr. {Weiner.} Let me just yield to--

7953 Mr. {Barton.} Didn't the gentleman just recently get
7954 married?

7955 Mr. {Weiner.} Well, it is kind of old news now, but if

7956 I forgot to send you a--

7957 Mr. {Barton.} I mean, I would hope if you would have--

7958 Mr. {Weiner.} --thank-you note for your gift, I

7959 apologize for that. Apparently I have a year for that kind
7960 of thing.

7961 Mr. {Barton.} I just thought maybe there would more
7962 productive uses of your idle time than reading the
7963 Congressional Record.

7964 Mr. {Weiner.} I appreciate it, but Mr. Barton, unlike
7965 some members of this Committee, I have no marketable skills.
7966 I don't really have anything else to kind of go and do. This
7967 is kind of my gig. But I appreciate it.

7968 While I have your attention, Mr. Barton, will you be
7969 sponsoring the replace portion of this bill, I mean, reclaim
7970 some of the jurisdiction?

7971 Mr. {Barton.} I am very judicious about what I sponsor,
7972 but I will certainly coordinate my sponsorship with the
7973 gentleman from New York.

7974 Mr. {Weiner.} I look forward to that day in hell. I
7975 yield to the gentleman from California.

7976 Mr. {Waxman.} Well, I think if you are yielding to me,
7977 I think we found out today some of the things they want to
7978 add to replace our bill, rather than cover more Americans, 30
7979 million as we do in the healthcare bill, hold down costs.

7980 Their way is to shift onto the elderly the cost for Medicare.
7981 If they make a voucher plan, it would say this is how much
7982 money you have, you go out and buy some private insurance
7983 policy. And that is how they want to replace this Medicare
7984 program.

7985 Mr. {Weiner.} Well, if I can reclaim my time, and also
7986 \$750 billion in cost cuts for Medicaid which are going to be
7987 transferred to the states.

7988 Mr. {Waxman.} And to the poor people who will be
7989 dropped from the program.

7990 Mr. {Weiner.} As I am sure you understand, Mr. Waxman,
7991 that is simply because you cut money from Medicaid doesn't do
7992 anything to reduce the cost of healthcare or--

7993 Mr. {Waxman.} The gentleman is absolutely right.

7994 Mr. {Walden.} Would the gentleman yield?

7995 The {Chairman.} The gentleman controls the time.

7996 Mr. {Walden.} Would the gentleman yield?

7997 Mr. {Waxman.} You will get more time on this because
7998 this is a very good debate at this time of the evening, but
7999 it is a clear sign of what they think is a good replacement
8000 for the healthcare bill.

8001 Mr. {Weiner.} Well, I would also say this, and then I
8002 will yield to the gentleman from Oregon. I certainly hope
8003 one of the things we should do on this Committee is take that

8004 piece of Swiss cheese that Mr. Ryan produced today and put it
8005 through the rigors of a hearing in this Committee. Let us
8006 see what it means when you eliminate Medicare, let us see
8007 what it means when you move Medicaid costs entirely to the
8008 states. We should have an examination of what that--we
8009 should try to reclaim some of that jurisdiction because
8010 certainly having a head in the sand ostrich approach isn't
8011 going to work.

8012 Mr. {Walden.} Would the gentleman--

8013 Mr. {Weiner.} I certainly will.

8014 Mr. {Walden.} Will the gentleman, the future mayor of
8015 New York, yield because I am told you are talking about a
8016 plan that would do something like that, merge Medicare and
8017 Medicaid in New York City and deal with all your issues and
8018 get a waiver to do that. So I just want to make sure that
8019 you get a chance---

8020 Mr. {Weiner.} Let me reclaim my time. It is a common
8021 misconception that someone educating themselves by watching
8022 Fox News might be under that impression.

8023 Mr. {Walden.} I am actually reading from Politico.

8024 Mr. {Weiner.} In fact, the difference between the
8025 waivers, which are a debate we have had here, and something
8026 that Mr. Wyden and Mr. Brown proposed that the President
8027 adopted, an opt-out in 2017 for states or localities that

8028 think they can administer the program themselves.

8029 Mr. {Walden.} Will the gentleman yield?

8030 Mr. {Weiner.} That is something I would hope all
8031 states, Oregon included, would endeavor to follow itself. In
8032 fact, the waivers that are offered as a sign of flexibility
8033 by HHS is not something that New York is going to need.
8034 However, we are going to need this Committee to do true
8035 oversight of the--

8036 The {Chairman.} The gentleman--

8037 Mr. {Weiner.} --Ryan Swiss cheese act of 2011.

8038 The {Chairman.} The gentleman's time is expired. It is
8039 my understanding that this may be the last roll call vote of
8040 the night. We have got one bill after this, but it is likely
8041 to go by voice.

8042 Are there further amendments to the bill? Seeing none,
8043 we are ready for final passage. I will ask the Clerk to call
8044 the roll.

8045 The {Clerk.} Mr. Barton?

8046 Mr. {Barton.} Is this final?

8047 The {Clerk.} Final.

8048 Mr. {Barton.} Yes.

8049 The {Clerk.} Mr. Barton, aye.

8050 Mr. Stearns?

8051 [No response.]

8052 The {Clerk.} Mr. Whitfield?
8053 [No response.]
8054 The {Clerk.} Mr. Shimkus?
8055 Mr. {Shimkus.} Yes.
8056 The {Clerk.} Mr. Shimkus, aye.
8057 Mr. Pitts?
8058 Mr. {Pitts.} Aye.
8059 The {Clerk.} Mr. Pitts, aye.
8060 Mrs. Bono Mack?
8061 [No response.]
8062 The {Clerk.} Mr. Walden?
8063 Mr. {Walden.} Aye.
8064 The {Clerk.} Mr. Walden, aye.
8065 Mr. Terry?
8066 Mr. {Terry.} Aye.
8067 The {Clerk.} Mr. Terry, aye.
8068 Mr. Rogers?
8069 Mr. {Rogers.} Aye.
8070 The {Clerk.} Mr. Rogers, aye.
8071 Mrs. Myrick?
8072 Mrs. {Myrick.} Aye.
8073 The {Clerk.} Mrs. Myrick, aye.
8074 Mr. Sullivan?
8075 Mr. {Sullivan.} Aye.

8076 The {Clerk.} Mr. Sullivan, aye.
8077 Mr. Murphy?
8078 [No response.]
8079 The {Clerk.} Mr. Burgess?
8080 Dr. {Burgess.} Aye.
8081 The {Clerk.} Mr. Burgess, aye.
8082 Mrs. Blackburn?
8083 [No response.]
8084 The {Clerk.} Mr. Bilbray?
8085 Mr. {Bilbray.} Aye.
8086 The {Clerk.} Mr. Bilbray, aye.
8087 Mr. Bass?
8088 Mr. {Bass.} Aye.
8089 The {Clerk.} Mr. Bass, aye.
8090 Mr. Gingrey?
8091 Dr. {Gingrey.} Aye.
8092 The {Clerk.} Mr. Gingrey, aye.
8093 Mr. Scalise?
8094 Mr. {Scalise.} Aye.
8095 The {Clerk.} Mr. Scalise, aye.
8096 Mr. Latta?
8097 Mr. {Latta.} Aye.
8098 The {Clerk.} Mr. Latta, aye.
8099 Mrs. McMorris Rodgers?

8100 Mrs. {McMorris Rodgers.} Aye.
8101 The {Clerk.} Mrs. McMorris Rodgers, aye.
8102 Mr. Harper?
8103 Mr. {Harper.} Aye.
8104 The {Clerk.} Mr. Harper, aye.
8105 Mr. Lance?
8106 Mr. {Lance.} Aye.
8107 The {Clerk.} Mr. Lance, aye.
8108 Mr. Cassidy?
8109 Dr. {Cassidy.} Aye.
8110 The {Clerk.} Mr. Cassidy, aye.
8111 Mr. Guthrie?
8112 Mr. {Guthrie.} Aye.
8113 The {Clerk.} Mr. Guthrie, aye.
8114 Mr. Olson?
8115 Mr. {Olson.} Aye.
8116 The {Clerk.} Mr. Olson, aye.
8117 Mr. McKinley?
8118 [No response.]
8119 The {Clerk.} Mr. Gardner?
8120 Mr. {Gardner.} Aye.
8121 The {Clerk.} Mr. Gardner, aye.
8122 Mr. Pompeo?
8123 [No response.]

8124 The {Clerk.} Mr. Kinzinger?
8125 Mr. {Kinzinger.} Aye.
8126 The {Clerk.} Mr. Kinzinger, aye.
8127 Mr. Griffith?
8128 Mr. {Griffith.} Aye.
8129 The {Clerk.} Mr. Griffith, aye.
8130 Mr. Waxman?
8131 Mr. {Waxman.} No.
8132 The {Clerk.} Mr. Waxman, no.
8133 Mr. Dingell?
8134 [No response.]
8135 The {Clerk.} Mr. Markey?
8136 [No response.]
8137 The {Clerk.} Mr. Towns?
8138 [No response.]
8139 The {Clerk.} Mr. Pallone?
8140 Mr. {Pallone.} No.
8141 The {Clerk.} Mr. Pallone, no.
8142 Mr. Rush?
8143 [No response.]
8144 The {Clerk.} Ms. Eshoo?
8145 Ms. {Eshoo.} No.
8146 The {Clerk.} Ms. Eshoo, no.
8147 Mr. Engel?

8148 [No response.]

8149 The {Clerk.} Mr. Green?

8150 Mr. {Green.} No.

8151 The {Clerk.} Mr. Green, no.

8152 Ms. DeGette?

8153 Ms. {DeGette.} No.

8154 The {Clerk.} Ms. DeGette, no.

8155 Mrs. Capps?

8156 Mrs. {Capps.} No.

8157 The {Clerk.} Mrs. Capps, no.

8158 Mr. Doyle?

8159 [No response.]

8160 The {Clerk.} Ms. Schakowsky?

8161 Ms. {Schakowsky.} No.

8162 The {Clerk.} Ms. Schakowsky, no.

8163 Mr. Gonzalez?

8164 [No response.]

8165 The {Clerk.} Mr. Inslee?

8166 Mr. {Inslee.} No.

8167 The {Clerk.} Mr. Inslee, no.

8168 Ms. Baldwin?

8169 Ms. {Baldwin.} No.

8170 The {Clerk.} Ms. Baldwin, no.

8171 Mr. Ross?

- 8172 Mr. {Ross.} No.
- 8173 The {Clerk.} Mr. Ross, no.
- 8174 Mr. Weiner?
- 8175 Mr. {Weiner.} No.
- 8176 The {Clerk.} Mr. Weiner, no.
- 8177 Mr. Matheson?
- 8178 Mr. {Matheson.} No.
- 8179 The {Clerk.} Mr. Matheson, no.
- 8180 Mr. Butterfield?
- 8181 Mr. {Butterfield.} No.
- 8182 The {Clerk.} Mr. Butterfield, no.
- 8183 Mr. Barrow?
- 8184 Mr. {Barrow.} No.
- 8185 The {Clerk.} Mr. Barrow, no.
- 8186 Ms. Matsui?
- 8187 Ms. {Matsui.} No.
- 8188 The {Clerk.} Ms. Matsui, no.
- 8189 Ms. Christensen?
- 8190 Dr. {Christensen.} No.
- 8191 The {Clerk.} Ms. Christensen, no.
- 8192 Mr. Upton?
- 8193 The {Chairman.} Votes aye.
- 8194 The {Clerk.} Mr. Upton, aye.
- 8195 The {Chairman.} Are there any other members wishing to

8196 be cast a vote? Mr. Towns?

8197 Mr. {Towns.} No.

8198 The {Clerk.} Mr. Towns, no.

8199 The {Chairman.} Other members wishing to cast a vote?

8200 Mr. {Terry.} How am I recorded?

8201 The {Clerk.} Mr. Terry, the gentleman is recorded aye.

8202 The {Chairman.} How is Mrs. Blackburn?

8203 The {Clerk.} Mrs. Blackburn?

8204 Mrs. {Blackburn.} Aye.

8205 The {Clerk.} Mrs. Blackburn, aye.

8206 The {Chairman.} Are there other members wishing to cast

8207 a vote? Seeing none, the Clerk will report the tally.

8208 The {Clerk.} Mr. Chairman, on that there were 25 ayes,

8209 17 nays.

8210 The {Chairman.} Twenty-five ayes, 17 nays.

8211 Mr. {Waxman.} Mr. Chairman?

8212 The {Chairman.} Can I finish this?

8213 Mr. {Waxman.} Finish it up.

8214 The {Chairman.} The bill is passed, adopted.

8215 Mr. {Waxman.} I just wanted to serve notice that the

8216 minority wants its appropriate time on every bill that has

8217 been passed today--

8218 The {Chairman.} Without objection.

8219 Mr. {Waxman.} --other views.

8220 The {Chairman.} Without objection. So be it.

|

8221 H.R. 1343

8222 The {Chairman.} At this point the Chair would ask
8223 unanimous consent that the Committee call up H.R. 1343, a
8224 bill identical to the discussion draft reported by the
8225 subcommittee and treated as original text for the purpose of
8226 amendment at Full Committee without objection. The Chair
8227 asks the Clerk to report.

8228 The {Clerk.} H.R. 1343.

8229 [H.R. 1343 follows:]

8230 ***** INSERT 1 *****

|
8231 The {Chairman.} Without objection, the first reading of
8232 the bill is dispensed with, and the discussion draft will be
8233 open for amendment at any point.

8234 Mr. {Walden.} Mr. Chairman?

8235 The {Chairman.} So ordered. For what purpose does the
8236 gentleman from Oregon--

8237 Mr. {Walden.} Mr. Chairman, I have an amendment at the
8238 desk.

8239 The {Chairman.} The Clerk will report the title of the
8240 amendment.

8241 The {Clerk.} An amendment to H.R. 1343 offered by Mr.
8242 Walden.

8243 [The amendment follows:]

8244 ***** INSERT 21 *****

|
8245 The {Chairman.} The staff will disperse the amendment,
8246 and the gentleman from Oregon is recognized for 5 minutes in
8247 support of his amendment.

8248 Mr. {Walden.} Thank you, Mr. Chairman. I thank the
8249 Committee for bringing this legislation before us. At your
8250 Subcommittee on Communications and Technology's first
8251 hearing, the Commerce and Agriculture Inspectors General
8252 expressed some concerns that the \$7 million in broadband
8253 stimulus programs are high risk as they call it. They also
8254 said it would be helpful if Congress would fix some
8255 ambiguities between the broadband stimulus language and the
8256 Dodd-Frank legislation as well as improve oversight.

8257 The Administrators of these two agencies testified
8258 before the Subcommittee last week, and they agreed that the
8259 language of the Recovery Act is discretionary. We make it
8260 mandatory. We have worked with the Inspectors General, the
8261 NTIA, the RUS and the staff of the Ranking Member. We marked
8262 up this legislation in Subcommittee last week unanimously and
8263 worked together between Subcommittee and here to refine some
8264 of the concerns that had been brought to us. We agreed to
8265 make additional clarifications sought by the agencies for
8266 today's Full Committee consideration which we will consider
8267 in the amendment that I have offered here.

8268 Now, this is a modest housekeeping but helpful piece of
8269 legislation that will provide additional tools to ensure
8270 someone is looking after the taxpayer dollars. The American
8271 people deserve to know whether their \$7 billion is being
8272 spent appropriately. Now, understand, \$7 billion has been
8273 obligated, all \$7 billion. Only \$400 million has gone out
8274 the door so far. So we got a long way to go with this
8275 program. We want to make sure the money would be returned to
8276 the taxpayers and not held up at the agencies. They have
8277 that flexibility now under the existing law where they can
8278 choose whether or not to deobligate.

8279 In addition, removing ambiguities, the legislation
8280 includes notification requirements to keep the Congress,
8281 regardless who is in charge, informed of problem awards.
8282 These will improve our understanding of how the program is
8283 functioning.

8284 I want to thank Mr. Bass for leading on this issue. I
8285 want to thank my colleagues on the other side of the aisle
8286 for working with us on this issue, and I would yield to Mr.
8287 Waxman first.

8288 Mr. {Waxman.} Thank you for yielding. I support the
8289 manager's amendment before us today. At the subcommittee
8290 markup of the underlying discussion draft, members agreed to
8291 work together to incorporate suggested changes from NTIA and

8292 RUS to ensure that the legislation considered today fulfills
8293 the intended purpose and does not unintentionally hinder the
8294 ability of the agencies to oversee these programs.

8295 In summary, the changes incorporated in the amendment
8296 ensure that the agencies will not run into unidentified
8297 difficulties when they recover monies, allow flexibility to
8298 keep information confidential to avoid disruptive fraud
8299 investigations and permit the agencies to address frivolous
8300 or erroneous complaints fairly. This amendment reflects
8301 bipartisan collaboration and consultation with the
8302 Administration and is an improvement upon the earlier version
8303 of the bill. Although this amendment improves the bill
8304 significantly, there may be additional issues that should be
8305 addressed. We have agreed to continue to work together to
8306 fine tune this measure before it is considered by the house.
8307 I would like to thank Chairman Upton and Chairman Walden for
8308 their collaborative approach on this legislation and hope
8309 that this is a sign of things to come.

8310 Mr. {Walden.} I thank the gentleman for his comments.
8311 I would yield to the gentlelady, the Ranking Member of the
8312 Subcommittee, Ms. Eshoo.

8313 Ms. {Eshoo.} Thank you, Mr. Chairman. I associate
8314 myself with the comments that you have made and Mr. Waxman
8315 has made. We are glad to cooperate on this.

8316 I think it is an important restatement that is being
8317 made here, and that is that there be accountability for the
8318 \$7.2 billion for broadband. We still have a ways to go in
8319 broadband in our country. Those that are from rural
8320 districts know that especially well. However, as I said, it
8321 is a restatement of what Dodd-Frank did, and I am very
8322 pleased that we were able to work on what RUS and NTIA had
8323 pointed out about some of the ambiguities that might exist
8324 with what was being proposed so that they don't end up on the
8325 ropes if in fact there isn't any, you know, fraud that needs
8326 to be investigated by the OIG or the DoJ.

8327 So with that, as Mr. Waxman said, it is a very good
8328 sign. We hope it is a sign of things to come so that we can
8329 work together. This Energy and Commerce Committee has had a
8330 tradition of having done that, so we will look forward to it
8331 after you get rid of all these repeals. How is that? Okay.
8332 Thank you.

8333 Mr. {Walden.} Reclaim--

8334 Ms. {Eshoo.} Yield back.

8335 Mr. {Walden.} Reclaiming my time. I appreciate the
8336 gentlewoman's comments, and indeed, we have major work to do
8337 on the Subcommittee and the Full Committee, great jobs in
8338 America and improved technology and innovation. With 10
8339 seconds left, I would yield back the balance of my time.

8340 The {Chairman.} The gentleman yields back his time.
8341 Are there other members wishing to speak on the manager's
8342 amendment? If not, the vote is on the amendment. All those
8343 in favor say aye, those opposed say no. The ayes have it.
8344 The ayes have it. The amendment is adopted.

8345 Are there further amendments to the bill? If not, the
8346 vote will be on final passage. Those in favor say aye, those
8347 opposed say not. Without a doubt, the ayes have it. The
8348 ayes have it. And the bill is adopted. Without objection,
8349 the staff is authorized to make technical and conforming
8350 changes to the bill approved by the Committee today. Hearing
8351 no objections, so ordered.

8352 The Chair thanks all members and staff. We are now
8353 adjourned.

8354 [Whereupon, at 6:23 p.m., the Committee was adjourned.]