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House of Representatives

The House met at 10:30 a.m. and was called to order by the Speaker pro tempore (Ms. JACKSON-LEE of Texas).

DESIGNATION OF SPEAKER PRO TEMPORE

The SPEAKER pro tempore laid before the House the following communication from the Speaker:

WASHINGTON, DC,
January 27, 2009.

I hereby appoint the Honorable SHEILA JACKSON-LEE to act as Speaker pro tempore on this day.

NANCY PELOSI,
Speaker of the House of Representatives.

MORNING-HOUR DEBATE

The SPEAKER pro tempore. Pursuant to the order of the House of January 6, 2009, the Chair will now recognize Members from lists submitted by the majority and minority leaders for morning-hour debate.

The Chair will alternate recognition between the parties, with each party limited to 30 minutes and each Member, other than the majority and minority leaders and the minority whip, limited to 5 minutes.

TRIBUTE TO RAYMOND M. FITZGERALD

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

Mr. SHIMKUS. Madam Speaker, today I come to the well and before my colleagues to remember one of my employees who was with me for 5 years and a true Chicago South Sider, an individual who worked diligently here in the Washington, D.C. community for many, many years, Ray Fitzgerald.

Ray was my legislative director for 5 years. Before that, he worked for the State of Illinois in Gov. Jim Edgar's administration. He then moved to the Science Committee for 1 year, and then came to my office.

Ray, during his time here, met the love of his life, Kristin Wolgemuth, who also was a Congressional staffer and also from Chicago, and who had worked for Harris Fawell, a Congressman and Congresswoman JUDY BIGGERT from the Chicagoland area. They fell in love, got married, and then were able to enjoy D.C. and the community and work hard for this country. They have three children; Nora, 7, Maggie, 4, and Lucy, 2. Ray was a devout Roman Catholic, and Ray was able to live his faith, along with his wife, Kristin, and affect many lives positively.

Ray just last week lost his life in a terrible battle with cancer. Many of us from around the country attended his funeral yesterday in Chicago and the wake the night before. The wake was as large as you would expect when you have a loved one who has left you. Of course, the funeral was just as large, and I appreciated the funeral service focusing on the hope of salvation to those who believe, and remembering Ray's life.

But the thing that highlighted Ray's service here in Washington and the respect he garnered was his honesty, his transparency, the friendships that he developed and his work effort. Many people from the Washington, D.C. area went out for the wake and for the funeral yesterday, and we will pass the word out to the Washington, D.C. community about a memorial service that will be conducted here in Washington in the weeks to come. Kristin and the girls are coming out, along with Ray's mother and other family members and friends.

What was as important in this fight with cancer was the ministry that Kristin and Ray did as they struggled with what is God's will. Many times we pray for God's will to be done, hoping that it is the answer to our desires and aspirations and prayers. God's will in this case was not for Ray to stay here on Earth, but to take him up in His loving arms with Him in Heaven and thus be truly healed.

This battle that was raged joined numerous people from across the country as Kristin was faithful in providing us the highs and the lows of the battles; the times when they were able to take the girls out to parks and to zoos and the times the family was very hopeful, but also times when Ray was really physically just struggling. She continued to ask for prayer and support and focus on her husband, her family and that loving environment.

One of the last e-mails I sent to them was talking about how they were able to comply with God's will. I really hated when Ray left Washington, D.C. He was a trusted confidant and a good friend. But, in hindsight, I see how God was preparing for his departure to get him in and around his family. He has five sisters. His mother is still there. Kristin has an extended family in that area. They were there to lift Ray, Kristin and the girls up and provide the love and care that they needed in this battle, and they will be there for the duration of strengthening the family and helping Kristin raise these three young girls.

I would like to share one of the last e-mails that Kristin sent to us as a whole on the announcement of her husband's death.

She writes, ''Loved ones, oh to never have to write this e-mail. After meeting with all of Ray's doctors yesterday and today it is clear that they have done all they can do to fight his cancer.

''Despite the many rounds of chemo, the cancer is growing and getting stronger and Ray is much too weak to endure another round of chemo. Even if he weren't so sick, Ray's liver status renders chemo dangerous and ineffective.''

In this, she is talking about putting him into hospice, and Ray died shortly after that.

Now, think of a young wife and mother of three children, ages 7, 4 and 2, to be so strong in faith. She always would end her e-mails with the phrase ''not afraid and not alone,'' and this is in the 10 month battle with cancer. ''Not afraid and not alone.'' In the funeral yesterday, I thought I heard Kristin say many people attributed that to her. She attributed it to her husband.

TRIBUTE TO KATIE STAM, MISS AMERICA 2009, AND RYAN GUTHRIE, CHIEF OF STAFF

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

TRIBUTE TO KATIE STAM, MISS AMERICA 2009

Mr. HILL. Madam Speaker, I rise for two reasons this morning, on this snowy day in Washington, DC.

Number one is to congratulate Katie Stam, who is the new Miss America, who won her crown last Saturday in Las Vegas. Katie is from my hometown of Seymour, Indiana, and we could not be more proud of Katie and her accomplishments, more than ever before. This is a real tribute to her. She is a talented young lady. I know her personally. I had the opportunity to speak with her on Sunday to congratulate her on her accomplishments. She is a great singer and a beautiful woman.

She is also a friend of the family. She and my youngest daughter, Libby, know each other very well, and we all speak very highly of Katie. I know for certain that she is going to represent not only Seymour, not only Indiana, but the entire United States of America as America's not only beautiful person outside, but beautiful person inside as well.

We are immensely proud of Katie. I know her family very well. They are great people. It is just a proud moment for all of us to stand here in the well of the House today to congratulate Katie on all of her accomplishments that she has done.

TRIBUTE TO RYAN GUTHRIE, CHIEF OF STAFF

Mr. HILL. Madam Speaker, the second reason that I rise here this morning is to honor my Chief of Staff, Ryan Guthrie, who is moving on to bigger and better things.

Ryan Guthrie has been with me since day one, when I began the campaign for Congress back in 1998. He is a graduate of Indiana University. He is also from Seymour, Indiana, my hometown. He has been with me from the get-go.

Madam Speaker, in this business of politics you get to a point where you have to depend reliably on people that you trust, and I can't think of anybody that I trust more than Ryan Guthrie. He has been a stalwart companion of mine. He has been there with me from day one. He has been through the battles. He has been through the victories and through the defeats. We have laughed and cried together, and I am going to miss him very much, but I wish him well.

NEW LEGISLATIVE PROCESS A BREATH OF FRESH AIR

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

Mr. BLUMENAUER. Madam Speaker, we are hearing a lot here on Capitol Hill about Otto von Bismarck's old sausage metaphor, that one doesn't want to watch either sausage or legislation being made. Well, for too long, Madam Speaker, the legislative process in this House was a scene right out of Upton Sinclair's graphic novel, ''The Jungle.''

But currently with a new Congress and new Administration I would say that it has been a breath of fresh air watching this legislative process. It has been open. The ingredients have been great. The legislative leadership, the new President and his administrative team, have been involved, talking with people in both parties, in both chambers, and we are moving towards a package that I think people ought to embrace enthusiastically.

The economic stimulus is moving into stage II, almost the home stretch. We are putting down positions, principles and guidelines. Any timetable at this juncture is perhaps artificial in nature. The target figure of $825 billion or $800 billion or $850 billion is a little arbitrary and subject to amendment, to adjustment. Such parameters are useful, maybe necessary. They are not set in stone, and it is necessary that we do this right. What we can agree upon is to make the economic impact as soon as possible while we help rebuild and renew America to make it better.

I am concerned as the process moves forward, particularly as it relates to the infrastructure portion, that we make sure that the money gets to where it needs to go.

□ 1045

Primarily, I want to make sure that our metropolitan areas around the country are not shortchanged.

The last Surface Transportation Act was held up for 2 years because people were arguing about whether States got an allocation that was fair enough. But the greatest disparity for transportation funding in this country was between metropolitan areas, which seldom got their fair share: 78 cents on the dollar in Dallas, southern California shortchanged by over $1 billion.

One of the things we ought to do now, in this package while it's still in the formative stage, is to make sure that we use the existing STP allocation for all funds, not just part of the transportation funding. This formula would guarantee that metropolitan areas get their fair share and not concentrate money unduly in State departments of transportation.

The second suggestion I would make is that we not use a lot of onerous paperwork to make sure that people are complying with the use-it-or-lose-it provisions.

We have very powerful compliance tools. We could simply make modest reductions in future revenue streams for people that don't make their target—hold them accountable, get the spending, and be able to protect the Treasury.

Third, we ought to consider having local incentives for people that are actually going to reach in and put more of their own money into projects, being able to provide some modest incentive so that we reward and not penalize those who will get more money into the economy faster.

Last, we ought to assure that States put the money where it can be spent. For example, if the State of New York has areas that can't take advantage of their allocation in time, but there are areas that can, we encourage the shift. The City of New York has almost $2 billion worth of projects that could meet that 2010 guideline. We ought to put language into this bill that encourages States to reallocate to areas that can use it, not risk losing it.

We ought to make sure that we don't shortchange transit investments. I think we ought to go back to the marker laid down by Chairman OBERSTAR last December, of $12 billion; that ought to be a recommendation as a floor for transit. This would assure that we are able to make investments in these transportation activities that actually create more jobs than other types of transportation investments. Transit is very job intensive.

A perfect example is a project we have in Portland, Oregon, where we have had stuck in the Department of Transportation a ''small-start'' streetcar expansion project for months. It meets all the statutory criteria, but the Bush Department of Transportation and their FTA and OMB could not figure out how to allocate the money. They couldn't even issue ''small start'' administrative rules that complied with the statute.

This is an opportunity to be able to jump start something that would not only be millions of local dollars for the transit project, but it would incent millions more for related development along the alignment. And it's not just Portland, Oregon; it's Tucson, it's Seattle. We have a chance to jump start a new American industry for streetcars for the 80 communities around America who want to move in this direction, even manufacturing streetcars in America for the first time in two-thirds of a century.

I urge we move in a positive way. Support transit, support our metropolitan areas, get our economy moving while we revitalize our communities.

RECESS

The SPEAKER pro tempore. Pursuant to clause 12(a) of rule I, the Chair

declares the House in recess until noon today.

Accordingly (at 10 o'clock and 48 minutes a.m.), the House stood in recess until noon.

□ 1200

AFTER RECESS

The recess having expired, the House was called to order at noon.

PRAYER

The Chaplain, the Reverend Daniel P. Coughlin, offered the following prayer:

Almighty God and Lord of life, we seek Your guidance that we may live Your life in fullest measure.

Since the time of Sarah and Abraham, Your covenant with Your people has been the model of married life and social order. Renew us in faith and faithfulness.

May husbands and wives live in deeper understanding, honoring each other both in their words and their goodness. May the bonds of intimacy grow in American family life, that hearts will be converted to lasting values and explore the joy discovered in the love and faithfulness they uncover in themselves and in each other.

Enable government of this Nation to create an atmosphere where family life may flourish for generations to come. Lord, from You comes guidance now and forever.

Amen.

THE JOURNAL

The SPEAKER. The Chair has examined the Journal of the last day's proceedings and announces to the House her approval thereof.

Pursuant to clause 1, rule I, the Journal stands approved.

PLEDGE OF ALLEGIANCE

The SPEAKER. Will the gentleman from New Jersey (Mr. SIRES) come forward and lead the House in the Pledge of Allegiance.

Mr. SIRES led the Pledge of Allegiance as follows:

I pledge allegiance to the Flag of the United States of America, and to the Republic for which it stands, one nation under God, indivisible, with liberty and justice for all.

MESSAGE FROM THE SENATE

A message from the Senate by Ms. Curtis, one of its clerks, announced that the Senate has passed a bill of the following title in which the concurrence of the House is requested:

S. 328. An act to postpone the DTV transition date.

THE ECONOMY IS UNRAVELING

(Mr. KUCINICH asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. KUCINICH. Madam Speaker, 55,000 Americans lost their jobs yesterday. Nine thousand five hundred jobs were lost at the drug company Pfizer. They didn't have $4 billion to keep 9,500 employees, but they had $68 billion to buy another drug company, Wyeth, with the help of four banks, Goldman Sachs, JPMorgan Chase, Citigroup and Bank of America, which have collectively received $238 billion in bailout monies and loan guarantees.

Using bailout funds for mergers and acquisitions which result in the loss of jobs is nothing new. The Treasury Department gave PNC $5.2 billion in bailout funds, which PNC promptly used to take over National City Bank in Cleveland, my hometown, putting at least 7,800 jobs at risk.

Today, as Congress takes up an economic stimulus package, we are in a race to try to create jobs to stimulate the economy while corporations are getting bailout funds and cutting jobs. The economy is unraveling. We clearly cannot rely on the private sector to create jobs. When the private sector cuts jobs, and we are approaching unemployment levels of 10 percent in some States, then it's the duty of government to create jobs.

The stimulus package is a first step, but only a first step.

WE MUST INVEST IN PROJECTS TO BENEFIT OUR ECONOMY

(Mr. SIRES asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. SIRES. Mr. Speaker, if we want the recovery package to be successful, we must invest in projects to benefit our economy in the short term and in the long term. The American Recovery and Reinvestment Act does just that.

Investing in our infrastructure creates 40,000 new jobs in New Jersey and has long-term benefits that will modernize our crumbling infrastructure. The recovery plan also provides additional long-term investment in energy, health care and education. Specifically, this bill provides New Jersey with $3.4 billion over 2 years to modernize our schools, enhance our educational technology and increase aid to students.

Finally, this legislation provides immediate and direct tax relief for 95 percent of working families, and for job-creating small businesses. By helping the average American employer and employee with their taxes, we ensure they have income to grow their businesses and make investment in the future.

I urge support for the bill.

TET, THE LUNAR NEW YEAR

(Ms. LORETTA SANCHEZ of California asked and was given permission to address the House for 1 minute and to revise and extend her remarks.)

Ms. LORETTA SANCHEZ of California. Mr. Speaker, today marks the second day of Tet, or more commonly known as the Lunar New Year. This year is the Year of the Water Buffalo.

Tet is a reaffirmation of the Vietnamese cultural heritage and tradition and is the largest and the most celebrated holiday for the Vietnamese people. It is when friends and families come together to celebrate the past year and, of course, we look to the future year.

On January 30, the Union of the Vietnamese Student Associations of Southern California will hold its annual Tet Festival in the City of Garden Grove. I would like to recognize the UVSA and the Vietnamese community for their endless efforts in bringing students, young professionals and community organizations together for the annual Tet Festival.

The Vietnamese American community plays a vital economic and cultural role in the 47th District of California, and I am very proud of its efforts in fighting to achieve freedom and human rights for all Vietnamese people.

As the Representative of the 47th District, it is a great honor to represent one of the largest Vietnamese communities in the world, and I would like to congratulate the Vietnamese community for all their successes this past year and to wish them a very happy new year, Chuc Mung Nam Moi.

TURN AROUND THE MALDISTRIBUTION OF THIS NATION'S WEALTH AND INCOME

(Mr. MORAN of Virginia asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. MORAN of Virginia. Mr. Speaker, as we consider the stimulus bill today, it's important to reflect on how we got into this financial morass.

After all, over the last 8 years of the Bush administration, we saw the highest corporate profit and the deepest tax cuts in American history. So what's the problem? Well, 96 percent of the income growth over those 8 years went to the top 10 percent, only the wealthiest Americans.

They were the ones that benefited from the tax cuts. They benefited from the corporate deregulation. Forty-six percent of the profit went to financial services firms. So the problem is that only 4 percent of the income growth during the Bush years went to the 90 percent of middle-class Americans and those struggling to get into the middle class.

But what did they do to cope with this static income? Well, they did what the President told them to do. After 9/11 he said go shop in the mall, and that's what they did by borrowing. The increase in consumer spending was exactly equal to the amount of money borrowed from inflated home equity values.

That's what they did, and now we have the bust in real estate values and almost 40 percent of Americans are technically insolvent. That's why this bill starts to turn around that maldistribution of this Nation's wealth and income. That's why it should be supported today.

CONGRESS SHOULD ACT IN BIPARTISAN FASHION TO ADDRESS OUR NATION'S ECONOMIC RECESSION

(Ms. RICHARDSON asked and was given permission to address the House for 1 minute and to revise and extend her remarks.)

Ms. RICHARDSON. Mr. Speaker, over the last couple weeks House committees, including Transportation and Infrastructure, on which I serve, have worked hard to craft an economic recovery package that would address the deep recession problems that we have. Likewise, over the last couple of months, we've worked with President Obama, and we have listened to economists, over 10 of them, all who say action needs to happen now.

Today, President Obama will meet with my colleagues, congressional Republicans, in a bipartisan fashion to really explain why this package is the best way to move forward and to turn this economy around. Conservative economic policies have not worked. In fact, we haven't produced jobs, and there has not been a production of economic prosperity.

The American people demanded change in November. The Economic Recovery and Reinvestment Package strives to do just that, helping to bring American jobs and providing 90 percent of middle Americans an immediate tax cut.

Mr. Speaker, if congressional Republicans really listen to President Obama today, they will support the legislation, and they will join us for change.

ECONOMIC RECOVERY PACKAGE INVESTS IN THOSE HARDEST HIT BY ECONOMY

(Mr. COHEN asked and was given permission to address the House for 1 minute.)

Mr. COHEN. Mr. Speaker, as the economic recession worsens, millions of Americans are in financial trouble and looking for some immediate assistance, but help is on the way. Tomorrow this House will vote on the Economic Recovery and Reinvestment Act that will provide 3 to 4 million jobs here in America.

Those hit hardest by the economic crisis are the ones we need to help first, and we are doing that by extending unemployment benefits to people in America, millions who are still looking for jobs. It is difficult to find a job when thousands are being cut. Yesterday a record number of jobs were cut.

Economists say one of the best ways to stimulate the economy is to put the money in the hands of people who will spend it immediately, spend it on necessities, and that's people who are out of work. That's something we are going to do.

It's also critical to give those people health insurance, and we will provide the States with money so that they can continue to provide Medicaid to those people who need that assistance. There are nearly 7 million unemployed Americans who need health insurance through COBRA. That will also be extended.

Mr. Speaker, this economic recession has hurt millions. This Congress will respond and provide assistance.

PUERTO RICO AND TERRITORIES DESERVE TO BENEFIT FULLY FROM ONGOING EFFORTS TO REVITALIZE ECONOMY

(Mr. PIERLUISI asked and was given permission to address the House for 1 minute.)

Mr. PIERLUISI. Mr. Speaker, I rise in strong support of H.R. 1. As the Congressional Budget Office has just confirmed, the bill will have a very positive impact on our Nation's economy.

I am particularly grateful for the inclusion of Puerto Rico and the other U.S. territories in most of the bill's provisions. The territories are an integral part of the United States and thus deserve to benefit fully from our ongoing efforts to revitalize the economy.

As the final version of this bill is worked out, I will continue to seek more equitable treatment for the U.S. citizens of Puerto Rico in those few areas where I believe improvements should still be made.

For example, I will continue to make the case that Puerto Rico should receive an increase in Medicaid funding that better reflects the island's legitimate needs and does more to address the negative impact that the current spending cap is having on the Commonwealth's finances.

SUPPORT THE STIMULUS PACKAGE

(Mr. TEAGUE asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. TEAGUE. Mr. Speaker, I rise today with America's economy in deep trouble. Families from Hobbs to Silver City and across the country are struggling. They are wondering if they will be able to make ends meet.

We must act now to help those families. I know that we won't all agree with every little part of the economic recovery bill that we are considering. I have some concerns myself, but I intend to support the package, not because it's perfect, but because it will create jobs and get our economy going. After all, that's what the people sent us here to do. If this bill passes, 684,000 New Mexicans will get a tax break and over $400 million will go into infrastructure and investments to create jobs and support economic development.

I am also pleased that the bill includes language from two bills that I introduced as a stimulus package for southern New Mexico to create green jobs and give families with kids a tax break. I urge my colleagues to pass this stimulus legislation so we can put America back on track and back to work.

PROVIDING FOR CONSIDERATION OF S. 181, LILLY LEDBETTER FAIR PAY ACT OF 2009

Ms. PINGREE of Maine. Mr. Speaker, by direction of the Committee on Rules, I call up House Resolution 87 and ask for its immediate consideration.

The Clerk read the resolution, as follows:

H. RES. 87

Resolved, That upon the adoption of this resolution it shall be in order to consider in the House the bill (S. 181) to amend title VII of the Civil Rights Act of 1964 and the Age Discrimination in Employment Act of 1967, and to modify the operation of the Americans with Disabilities Act of 1990 and the Rehabilitation Act of 1973, to clarify that a discriminatory compensation decision or other practice that is unlawful under such Acts occurs each time compensation is paid pursuant to the discriminatory compensation decision or other practice, and for other purposes. All points of order against consideration of the bill are waived except those arising under clause 10 of rule XXI. The bill shall be considered as read. All points of order against the bill are waived. The previous question shall be considered as ordered on the bill to final passage without intervening motion except: (1) one hour of debate equally divided and controlled by the chair and ranking minority member of the Committee on Education and Labor; and (2) one motion to commit.

□ 1215

The SPEAKER pro tempore (Mr. HOLDEN). The gentlewoman from Maine is recognized for 1 hour.

Ms. PINGREE of Maine. For the purpose of debate only, I yield the customary 30 minutes to the gentleman from Florida (Mr. LINCOLN DIAZ-BALART). All time yielded during consideration of the rule is for debate only. I yield myself such time as I may consume. I also ask unanimous consent that all Members be given 5 legislative days in which to revise and extend their remarks on House Resolution 87.

The SPEAKER pro tempore. Is there objection to the request of the gentlewoman from Maine?

There was no objection.

Ms. PINGREE of Maine. Mr. Speaker, House Resolution 87 provides for consideration of S. 181, the Lilly Ledbetter Fair Pay Act of 2009. This measure is identical to the version of the bill that was passed by this House on January 9 of this year by a significant vote of 247–171. The bill is also virtually identical to the version adopted in the 110th Congress.

It is well past time to get this legislation to the President for his signature. Today, we plan to do just that. After this bill is passed by the House later today, it will go directly to the White House and on President Obama's desk.

First, I want to commend Chairman MILLER for his leadership and his tireless efforts that have brought us so far. As my colleague, Chairwoman DELAURO, said during her eloquent remarks when this body first took up the bill 2 weeks ago, ''We are here today because Lilly Ledbetter got short-changed—short-changed by her employer, the perpetrator of consistent pay discrimination lasting years, and short-changed again by the Supreme Court.'' And so now we are here today to fight for the final passage of this essential legislation.

As a mother of two daughters, a woman who has owned her own business myself much of my adult life, and as a newly elected Member of this body, I was proud to cast one of my first votes in favor of the Lilly Ledbetter Act, and I am proud that both Chambers have already made a strong commitment to protect workers against pay discrimination in the workplace.

This important legislation is long overdue, and I urge my colleagues to join me in supporting the underlying bill, S. 181, the Lilly Ledbetter Fair Pay Act of 2009.

I reserve the balance of my time.

Mr. LINCOLN DIAZ-BALART of Florida. Mr. Speaker, I yield myself such time as I may consume. I'd like to thank my friend the distinguished gentlewoman from Maine (Ms. PINGREE) for the time.

I wish to welcome my distinguished colleague to the Rules Committee. She is a very important addition to the Rules Committee, and all of us have had the privilege of welcoming her in the last days. She stated in her statement that she is a new Member. She's also a new member of our committee, and obviously we are very pleased that she is.

Mr. Speaker, I rise in opposition to this closed rule that, once again, clearly contradicts the majority's pledge to the American people to work with colleagues on both sides of the aisle.

Today, the majority proceeds to consider this legislation here on the floor of the House under a closed rule. That means, Mr. Speaker, that if this rule is passed and this legislation is brought to the floor under it, every Member of this House will be forbidden from offering any amendments to it. And what makes this act even more unfortunate is that this bill did not make its way through the committee process during this Congress, thereby abandoning the critical committee vetting and amendment process. In effect, what the majority is doing is sidelining the legislative process.

My colleagues on the other side of the aisle, Mr. Speaker, may say that they would refute that claim because this legislation was considered in the previous Congress and should be passed quickly. But I bring to my colleagues' attention that we have dozens of new Members who were not here in the last Congress and are now not given the opportunity to participate in the usual and proper legislative process. So, something that truly concerns me is that this closed rule may, in effect, foreshadow how the majority will continue to run this House.

Considering the fact that we are only in the fourth week of the 111th Congress, and that when we take into account this rule, we count this rule, the majority has already considered four pieces of legislation under closed rules, I am quite concerned that the future will bring closed rule after closed rule to this floor.

So, Mr. Speaker, the question is obvious. Will the majority continue its current path of blocking a bipartisan legislative process? Will they break their record of offering 64 bills, as they did under closed rules in the 110th Congress? Or will they change their behavior and open up this legislative process?

The majority promised that it would when it achieved the majority 2 years ago, but it has not done so. In fact, as I stated, in the last Congress, 64 bills—breaking all records of all prior Congresses—64 bills were brought to this floor under closed rules that do not permit any Members in this House to have their ideas considered in the form of amendments. So the facts do not lead to optimism.

I reserve the balance of my time.

Ms. PINGREE of Maine. I thank my colleague on the Rules Committee for his kind welcome to a new Member.

Mr. Speaker, I yield 2 minutes to a new Member, and my colleague on the Rules Committee, the gentleman from Colorado (Mr. POLIS).

Mr. POLIS of Colorado. I'd like to thank the gentlewoman from Maine for the time. First, on the rule, before I get into the merits of the issue, which is a very important issue we all care about, with regard to the rule on this item, we did discuss it and debate it as part of the initial rules for the House of Representatives which we put in place. So this was discussed both within caucus and debated before the House as a whole.

I heard many objections from my colleagues on the other side, perhaps including the gentleman from Florida, with regard to the rules package, around the recommit issue, around the terms limit issue. I did not hear at that point extensive disagreement about the rules for this particular item, which were included in that initial package.

I would like to thank Chairman MILLER for his leadership on this issue of equality and fairness in the workplace and Representative DELAURO for her continued work on this issue. This bill restores and clarifies important protections that are a long time coming. This bill corrects a wrong that has cost our working women more than just the dollars they have earned. Today's bill ensures that every worker, whether male or female, is given equal opportunity to fight against discrimination in the workplace.

When someone's pay is based not only their ability, not on their creativity, not on their personal drive, not on the value they create in the economy, but rather on their chromosomes, we cheat ourselves and we cheat our entire economy and all American families. Pay discrimination, whether based on gender or any nonperformance factor, means the best and the brightest within our society are being held back.

Discrimination is a cancer of economic inefficiency that eats away at American prosperity. When we fail to promote those who show leadership, we stifle the innovation and progress that make our country great. And while our country has made great strides, tremendous strides towards equality, we have a long way to go, and particularly women still continue to suffer for less pay for the same work than men across our Nation.

Pay discrimination furthers inequalities. And that is why I strongly support the Lilly Ledbetter Act. It gives women the legal hammer they need to continue to break the glass ceiling.

Mr. LINCOLN DIAZ-BALART of Florida. I yield myself such time as I may consume.

I would remind my distinguished friend that we did make known our protest with regard to the fact that this legislation was in the list of bills that the majority on the first day of this Congress made clear would be brought to the floor without the possibility of amendments.

But it's interesting. When the Senate considered this legislation, the Senate did authorize and have debate on amendments. And so the question really, I think, is begged. What is the harm in allowing Members of this House to bring forth their ideas and letting this House work its way via the majority, the majority decide, and that way vet the ideas, discuss, debate, and decide which ideas brought forth by colleagues are appropriate and should be adopted. There's no harm in that, Mr. Speaker. There's no harm.

But, unfortunately, the pattern is continuing. The record was broken in the last Congress with regard to the number of closed rules, with regard to the number of pieces of legislation that were brought to this floor under a structure that did not allow any amendments to be proposed and debated by Members of either party. And that trend continues.

So we saw it not only on the first day of this Congress, but we see it today. Already, four bills, in the few days that this Congress has met, the 111th Congress has met already, we have seen four bills brought forth under these structures known as closed rules that do not allow Members of either party

from proposing ideas to improve any of the pieces of legislation that have been brought to the floor. I think that's the most unfortunate.

I reserve the balance of my time.

Ms. PINGREE of Maine. Mr. Speaker, I yield 3 minutes to my colleague on the Rules Committee, the gentleman from Massachusetts (Mr. MCGOVERN).

Mr. MCGOVERN. I thank my colleague for yielding to me, and I welcome her to the Rules Committee. This is going to be an exciting year.

Mr. Speaker, I rise in support of the Lilly Ledbetter Fair Pay Act. This is a great day, this is an important day, because at long last we have a Congress and a President of the United States who not only believes in equal pay for equal work, but are willing to stand up and fight for equal pay for equal work.

Mr. Speaker, last year, we passed the Lilly Ledbetter Fair Pay Act. We sent it to the United States Senate, and the Republicans in the United States Senate led a filibuster to block progress on this bill. And if we could overcome that filibuster, we have got a President of the United States named George Bush who said he would veto the Lilly Ledbetter Fair Pay Act.

□ 1230

Well, times have changed. We passed the bill again here in the House by a large margin, the Senate has passed it, and we are now accepting the Senate version.

My colleague from Florida says, well, what harm is it to open all this up again? The harm is, if you add or change this bill that we are voting on today, it will go back to the United States Senate; it will delay this important piece of legislation.

Mr. Speaker, discrimination is wrong in any form, discrimination in the workplace. Paying a woman less than a man for equal work is wrong. It is something that is intolerable. And the important thing about this bill is it will move us closer to equality in the workforce. We still have a long way to go.

Mr. Speaker, on average, women earn just 78 cents for every dollar earned by a man. The Institute of Women's Policy Research has found that this wage disparity costs women anywhere from $400,000 to $2 million in lost wages over a lifetime. And equal pay, Mr. Speaker, is not simply a women's issue; it is a family issue.

People should be paid for the quality of their work. They should not be discriminated against because of their gender. This vote is about ending discrimination. It is not about process, it is not about anything else. It is about whether at long last the United States Congress and the President of the United States are going to stand up for equal pay for equal work, and I think that this is an important step in the right direction.

I want to congratulate GEORGE MILLER, the chairman of the Education and Labor Committee, as well as ROB ANDREWS, my colleague, for his incredible work on this. But we have waited long enough. George Bush and the Republicans have thrown enough roadblocks in our way. We have removed them. We are moving forward. We are moving toward equality. We are moving to end discrimination. And I am proud to stand on the floor and support the Lilly Ledbetter Fair Pay Act.

Mr. LINCOLN DIAZ-BALART of Florida. Mr. Speaker, I would point out that every piece of legislation brought to this floor is preceded by a debate on the terms of debate. In other words, the rule that we are now considering as a resolution sets the framework for how the underlying piece of legislation can be debated; and, if you will, it does set the process, the parameters for the process of the debate. It establishes the resolution, the rule that is debated and voted on before the underlying legislation can be considered, sets forth, determines if amendments are authorized; and, if so, what amendments are authorized. And so it is process that is debated by the rule, resolution commonly known as the rule, that is brought to the floor before legislation is considered. And that is what we are on right now. That is what we are discussing right now, the resolution, the rule to set the terms of debate.

What I am pointing out and will reiterate now is that it is most unfortunate and unnecessary, totally unnecessary, for the majority to bring forth legislation that will have the support of the majority on the floor when it is considered, the underlying legislation, to bring it forth with a rule that prohibits debate, that shuts out debate, that does not allow any amendments from any Member, whether they are Democrats or Republicans, on the underlying piece of legislation. That is what I am trying to point out, and I thought it was pretty clear.

Mr. Speaker, we reserve the balance of our time.

Ms. PINGREE of Maine. Mr. Speaker, I yield 3 minutes to the gentlewoman from Texas (Ms. JACKSON-LEE).

Ms. JACKSON-LEE of Texas. Let me thank the distinguished gentlelady from Maine (Ms. PINGREE) and welcome her. Thank you for your leadership as well. It is my pleasure to be able to thank Chairman MILLER and also my friend from New Jersey, Congressman ANDREWS, for his work. And let me thank Congresswoman ROSA DELAURO for her collective effort, and the Senate for moving forward.

Yesterday, Mr. Speaker, 70,000 Americans lost their jobs. I would suspect, as we work on the Economic Stimulus Package and TARP, that, unfortunately, we are going to see a constant march of those losing their jobs.

So why is it absolutely urgent and imperative that we move forward on the Lilly Ledbetter Fair Pay Act? Because this is a deterrent. When people are losing their jobs, 70,000 to 100,000 jobs a day, then there are normally one bread winner per family, man or woman. How shameful it would be if that bread winner happens to be a woman and she is subjected to the unfair, disparate treatment of not being able to be paid equally in the workplace for her work.

It is well known that women are still earning 78 percent for every dollar earned by a man, and the Institute of Women's Policy Research has found that this wage disparity costs women anywhere from $400,000 to $2 million in lost wages of a lifetime. Families of America cannot tolerate that now. The children of America cannot tolerate that now. When a woman rises to the occasion or she is already in the workplace, we must pay her fair wages, and the Lilly Ledbetter Fair Pay Act allows any discrimination to be petitioned in the court, unlike Lilly Ledbetter, who was stymied by statutory process because she did not know.

And so, Mr. Speaker, I rise to support the underlying rule and this bill, for as we move towards stimulating the economy and bringing jobs back to America, there is no way that this body, this Constitutional body, this country that believes in equality and justice for all can allow the constant discrimination in pay against women, for our children will suffer and our children's children will suffer. This bill is a necessity, because it is time now to eradicate the vestiges of discrimination on the basis of gender.

I ask my colleagues to support this rule, support this legislation, and to thank those who have been part of sponsoring this, and recognizing that in the 18th of congressional district where women go out to work every day, where they are providing the economic engine not only for our communities but for their families, must be treated fairly. 70,000 jobs lost yesterday. How many today? We must eradicate the unfair treatment of women in the workplace as relates to wages.

Mr. LINCOLN DIAZ-BALART of Florida. Mr. Speaker, we reserve the balance of our time.

Ms. PINGREE of Maine. Mr. Speaker, I yield 4 minutes to the gentleman from New Jersey, a member of the Education and Labor Committee that did such great work on this bill, Mr. ANDREWS.

(Mr. ANDREWS asked and was given permission to revise and extend his remarks.)

Mr. ANDREWS. I thank the gentlelady for yielding and, Mr. Speaker, I congratulate her for stewarding through in her first effort as a member of the Rules Committee this very historic piece of legislation. I think it is fitting that the gentlelady from Maine, who has excelled as a businessperson, as a State legislator, and now as a legislator here, has left her very considerable imprint on this process and I congratulate her.

The process has afforded under the rules of the House, both in committee and here on this floor, the opportunity for competing views to be heard about

this idea. I know, Mr. Speaker, we will hear frequently this afternoon that no one in the House supports discrimination on the basis of gender, and I believe that is true. The issue is not what we say, though, it is what we do. And we have a chance to take a step against discrimination on the basis of gender, but I am sure, Mr. Speaker, there will be those who say this is the wrong time and the wrong step. I respectfully disagree.

There are those who say this is the wrong time to take this step because there will not be any statute of limitations; that is to say, people can sue forever if they have been the victim of employment discrimination. That is not accurate. You have 180 days in most States and a few more days in other States to file a claim once an act of discrimination has occurred. If a plaintiff does not file his or her claim by that time, the claim expires. This has been the law in a majority of circuits for a very long time. The U.S. Supreme Court disrupted that law. We are restoring it.

We expect to hear that there will be a flood of litigation, that the courthouses will be filled with people filing discrimination claims once this bill becomes law. That is not the case. Again, this bill restores the law as was understood by a majority of the circuits until the Supreme Court gave its ill-founded decision in the Ledbetter case. There was no flood of litigation under the prior understanding of the statute, and I do not believe there will be a flood of litigation now.

We will hear that this should apply only to intentional discrimination against women or others on the basis of gender. You know, if you are hit by a truck, Mr. Speaker, it doesn't matter if the truck driver intended to hit you or simply did so carelessly; if you are injured, you are injured. And if a person can show discrimination on the basis of any of the suspect categories under title VII under the law, they should be compensated, whether or not they can prove the discrimination was intentional. If there is a pattern and practice of discrimination because an employee is a woman, it should be remedied, and limiting this to intentional discrimination makes no sense.

We expect to hear that employees will sit on their rights; that they will have an opportunity to sue and wait for a very long time to do so. There is simply no evidence that people did that under the prior law as understood by the circuits. And, frankly, it would be a very ill-founded plaintiff who would do such a thing since it would cost them money to do so, reminding you that the burden of proof would fall upon the plaintiff to come up with the evidence of discrimination that took place a long time ago. So she or he has no incentive to sit on their rights and have to bear that burden of proof.

Finally, we will hear that employees will sit on their rights because somehow it makes economic sense to do so. Mr. Speaker, it simply doesn't. The statute limits someone to go back 2 years backwards, for back pay, from the point at which discrimination took place. It would be a very irrational plaintiff who would wait a very long time to wait and go back those 2 years. The longer you wait, the more it costs you as a plaintiff.

So these arguments have been fully aired. I respectfully would argue they are all wrong. The time is right for us to stand up and not simply say we are against discrimination, but vote against discrimination, and pass this bill this afternoon.

Mr. LINCOLN DIAZ-BALART of Florida. Mr. Speaker, what we are saying is that there is no need to close off debate; that this legislation could very easily have been debated openly; that Members on both sides of the aisle could have been given the opportunity to bring forth amendments as they were able to in the Senate, and that this legislation would move forward. It is not only unfortunate but unnecessary for the majority to close off debate. And, as I stated previously, there is a pattern.

In the last Congress, despite having promised the most open and the most transparent, the most fair Congress in history, the reality was exactly the opposite: More pieces of legislation were brought to this floor under closed rules that did not allow any amendments during the last Congress, the first Congress where our friends on the other side of the aisle had the majority in many years. More pieces of legislation were brought to the floor with closed rules prohibiting all amendments than in history, in all of history before in the history of Republic. So that is unfortunate.

But we are seeing the pattern continue. It has continued in these weeks in the beginning of the 111th Congress, and already this is the fourth bill, the fourth piece of legislation brought to the floor under a structure that does not permit any amendments under closed rules. That is what we are saying, it is uncalled for, it is unfortunate. And we hope, I guess because hope springs eternal, that our friends on the other side of the aisle will open the process up and will allow Members from both sides of the aisle to introduce amendments and have them debated and have the majority work its will.

Mr. Speaker, I yield back the balance of my time.

□ 1245

Ms. PINGREE of Maine. Mr. Speaker, I appreciate the opportunity to lead this bill today as a newly elected Member and a new member of the Rules Committee, and I appreciate working alongside my new colleague on the Rules Committee. And I'm sure we will have a busy afternoon together.

We have heard several arguments and supportive thoughts from many of my distinguished colleagues from this side of the aisle. And I appreciate their thoughts and their very hard work that it has taken to bring this bill to the floor and the momentous occasion we will have today when we are able to take this vote. I have also heard several arguments from my esteemed colleague from Florida. And I just want to remind him that when this bill was debated during the last session of Congress in the Education and Labor Committee where there were ample opportunities to bring amendments, those people in opposition only brought two amendments. So this is not a bill where there is tremendous disagreement. And in fact, the fact that there were no speakers virtually in opposition to this bill shows us what an important piece of legislation we are dealing with today, and in fact only were the discussion around the process taken up today. And I feel that since we have already debated this bill in the House and the Senate when it was last here, we passed it by an overwhelming margin of 247–171. It was passed by a bipartisan vote in the Senate of 61–36.

I am confident that this bill will receive very strong support today and want to say that I'm proud to be a Member of this body when this is happening. I do want to remind my colleagues that this legislation simply restores prior law. It is so important. And by passing it, we are making great strides in protecting workers by reversing the Supreme Court's Ledbetter decision as we have been eloquently described to today. We owe it to all American workers to strengthen, not weaken, nondiscrimination charges based on gender, race and religion.

It has passed the House, and it has passed the Senate previously. Today we are here to send it on to President Obama for what will be his first signature of any bill.

I urge my colleagues to support workers everywhere and vote ''yes'' on the underlying bill. I urge a ''yes'' vote on the previous question and on the rule.

I yield back the balance of my time, and I move the previous question on the resolution.

The SPEAKER pro tempore. The question is on ordering the previous question.

The question was taken; and the Speaker pro tempore announced that the ayes appeared to have it.

Mr. LINCOLN DIAZ-BALART of Florida. Mr. Speaker, on that I demand the yeas and nays.

The yeas and nays were ordered.

The SPEAKER pro tempore. Pursuant to clause 8 of rule XX, further proceedings on this question will be postponed.

PROVIDING FOR CONSIDERATION OF H.R. 1, AMERICAN RECOVERY AND REINVESTMENT ACT OF 2009

Mr. McGOVERN. Madam Speaker, by direction of the Committee on Rules, I call up House Resolution 88 and ask for its immediate consideration.

The Clerk read the resolution, as follows:

H. RES. 88

Resolved, That at any time after the adoption of this resolution the Speaker may, pursuant to clause 2(b) of rule XVIII, declare the House resolved into the Committee of the Whole House on the state of the Union for consideration of the bill (H.R. 1) making supplemental appropriations for job preservation and creation, infrastructure investment, energy efficiency and science, assistance to the unemployed, and State and local fiscal stabilization, for the fiscal year ending September 30, 2009, and for other purposes. The first reading of the bill shall be dispensed with. All points of order against consideration of the bill are waived except those arising under clause 9 or 10 of rule XXI. General debate shall be confined to the bill and shall not exceed three and one half hours equally divided and controlled by the chair and ranking minority member of the Committee on Appropriations, who may yield control of blocks of that time. After general debate, the Committee of the Whole shall rise without motion. No further consideration of the bill shall be in order except pursuant to a subsequent order of the House.

The SPEAKER pro tempore (Mrs. TAUSCHER). The gentleman from Massachusetts is recognized for 1 hour.

Mr. MCGOVERN. Madam Speaker, for the purpose of debate only, I yield the customary 30 minutes to my friend from California (Mr. DREIER). All time yielded during consideration of the rule is for debate only. I yield myself such time as I may consume. I also ask unanimous consent that all Members be given 5 legislative days in which to revise and extend their remarks on House Resolution 88.

The SPEAKER pro tempore. Is there objection to the request of the gentleman from Massachusetts?

There was no objection.

Mr. MCGOVERN. Madam Speaker, House Resolution 88 provides for general debate on H.R. 1, the American Recovery and Reinvestment Act. I would like to think this rule is not controversial because it is only about general debate, but it will lead the way to an important debate on the underlying legislation, H.R. 1, the American Recovery and Reinvestment Act.

Madam Speaker, George W. Bush left this country with an economy much worse off than the one he inherited from the Clinton administration. Eight years after being handed record budget surpluses, President Bush passed on to President Obama an economy that has record budget deficits and is in worse shape since the Great Depression.

Unemployment is rising. Fifty-five thousand more jobs were lost yesterday alone. Wages are stagnating. And work hours are being cut back. People are having trouble making ends meet, including putting food on the table.

And that is where this recovery package steps in. The provisions that make up the American Recovery and Reinvestment Package range from investments in infrastructure and green technology to extending unemployment for workers who have exhausted their benefits. We provide aid to struggling State governments and tax cuts for low and middle-income families and small businesses. These are all good investments that we hope will help reinvigorate our economy. And I look forward to voting for them tomorrow.

Madam Speaker, some of the most important parts of this package, in my opinion, are the antihunger provisions that will not only stimulate the economy, but will also help combat hunger in this country. This recovery package includes $20 billion for the Food Stamp program, $200 million for elderly nutrition services, including Meals on Wheels and Congregate Meals, $726 million to increase the number of States that provide free healthy dinners to children in need, $150 million to purchase commodities for food banks to refill emptying shelves, and $100 million to improve State management information systems for the WIC program.

Madam Speaker, food stamp increases will reach about 14 million low-income households as soon as 25 days after enactment. About 90 percent of all food stamp households have income below the poverty line. In other words, these are benefits that are timely and they are targeted.

It is important to note that every dollar in food stamps that a low-income family receives enables that family to spend an additional dollar on food or other items. And don't just take my word for it. Leading conservative economists support inclusion of these benefits in the recovery package. Former Reagan economic adviser Martin Feldstein has said that a temporary food stamp increase would place resources in the pockets of people with a high propensity to spend quickly, rather than save, the limited income that they have.

Mark Zandi, a former economic adviser to the McCain campaign, says that a temporary increase in food stamp benefits gives the best ''bang for buck.'' Specifically, he estimates that such an increase would generate $1.73 in increased economic activity for each $1 in cost.

Madam Speaker, increasing food stamps is not charity. It is stimulus. It is not a handout or a give-away. But investments in antihunger programs do fulfill our moral commitment to make sure our fellow citizens have enough to eat. More than 36 million Americans went hungry in 2007, before the economy took this drastic spike downward. Yet the last stimulus plan signed into law didn't include increases for food stamps or any kind of antihunger programs.

The fact that hunger remains a problem in America should make every single Member in this Chamber feel ashamed. H.R. 1 gives us a chance to begin to solve this problem and to prevent many more American families from slipping into hunger.

Madam Speaker, as I said at the outset, the American Recovery and Reinvestment Act includes large investments in our infrastructure to help rebuild our roads and our bridges, to help with our water and sewer plants, to help State and local governments deal with the financial burdens and crises they are currently faced with. This is a bill that will help put people back to work and that will create millions of jobs that will hopefully stimulate this economy. The one thing I do know, Madam Speaker, is that doing nothing is not an option. That is what has been happening in the previous administration. They ignored this problem for far too long. And their response when the probably became a huge problem was grossly inadequate.

So, Madam Speaker, I urge my colleagues to support this rule and to support this package.

I reserve the balance of my time.

Mr. DREIER. Madam Speaker, I yield myself such time as I might consume.

(Mr. DREIER asked and was given permission to revise and extend his remarks.)

Mr. DREIER. Madam Speaker, I want to begin by expressing my appreciation to my friend from Worcester for yielding me the traditional 30 minutes and I yield myself, as I said, such time as I may consume.

Madam Speaker, we all know that the United States of America is facing one of the greatest challenges we have ever had. This is a very tough and painful time for Americans all across the economic spectrum. People have been losing their homes. We have seen the jobless rate surge. And we have challenging and difficult days ahead of us. Every one has acknowledged that. Conservative, liberal, moderate, wherever you stand on the political spectrum, we all know that we are dealing with extraordinarily difficult times.

I have to say at the outset as my friend went through the litany of challenges that President Barack Obama has now inherited, it is true, we are facing very tough times. But I think it is very important to note that I was privileged to come to this institution in 1981. And when Ronald Reagan became President of the United States, if you look at the numbers that existed in 1980 and 1981, the time of the transition from the Carter administration to the Reagan administration, the inflation rate was 13.5 percent, the unemployment rate was 7.1 percent and interest rates were well into double digits.

Now, no one knows what tomorrow is going to bring. And most people have said that tomorrow is going to be challenging and difficult. And I personally believe that it is. But I think that it is important to note that the challenge which President Obama has inherited and which we, as elected leaders in this country, have inherited is a tough one. But it may or may not be unprecedented.

We do know this. And I'm very pleased that President Obama is at this moment right here in the Capitol meeting with members of the Republican Conference. And I have just come

from that meeting to begin the debate on the issue of the so-called economic stimulus package. President Obama, in his presentation to us, provided a very nice, encouraging message with which I agree. He said that as we deal with this economic stimulus package, let's work as hard as we possibly can to put politics aside.

This is a message that President Obama has carried repeatedly throughout his campaign. And 1 week ago today, as he stood on the west front of the Capitol, he made it very clear that that was that exactly what he wanted to do, was to put politics aside.

□ 1300

Now I will say to my friend that pointing the finger of blame is an unfortunate thing, and I think it is really being political, and that is why I hope very much that we can follow the words of encouragement that President Obama has just given Republican Members, and that is to put politics aside and as we debate this stimulus package, focus on the merits. ''Focus on the merits'' are the exact words that the President of the United States just used within the last few minutes downstairs.

I believe it is absolutely imperative that we look at the merits. Everyone knows that we need to take action to stimulate our economy, to get people back to work, to help people buy and keep homes, to keep businesses investing, job creating, and to ensure that the very important societal needs that are out there are adequately addressed.

The problem that we have, Madam Speaker, is that as we look at this package that is before us, unfortunately there has not been the kind of bipartisan cooperation that President Obama has encouraged and has personally sought.

As we look at the legislation, the measure that we are going to be working on further today upstairs in the Rules Committee, it is an $825 billion package. It is an $825 billion package which, based on the report that was released yesterday from the professional, nonpartisan Congressional Budget Office, has levels of expending that go not just a year beyond where we are, not just 2 years beyond where we are, but to 10 years. And, Madam Speaker, I know very few Members have recognized this, one of our crack staff members found this out last night in looking at budget authority versus outlays, there is actually $2.3 billion, according to the professional, nonpartisan Congressional Budget Office, that in this stimulus packaged is expended beyond 10 years, beyond 2019.

Now again, following the words of encouragement that we as Republican Members have just received from President Obama downstairs focusing on the merits of the stimulus package versus politics is going to be a high priority for us. And that is why, again, this study which just came out from the professional, nonpartisan Congressional Budget Office, remember this is not a Republican publication. Yes, I am a Republican, proud to be a Republican, I am simply reporting to the House, Madam Speaker, what it is that was included in this Congressional Budget Office study which I commend to every single one of our colleagues. I encourage people to look at the professional, nonpartisan Congressional Budget Office study, and the reason I am focusing on it is I want to share, along with the information that I just provided, that $2.3 billion of this is actually expended beyond 2019, 10 years from now.

I would like to share a couple of paragraphs from this study. It is on page 4 and this is entitled H.R. 1, American Recovery and Reinvestment Act 2009 as introduced in the House of Representatives yesterday on January 26. It provides a summary. This is, again, from the CBO. It reads: ''CBO expects that Federal agencies, along with States and other recipients of the funding, would find it difficult to properly manage and oversee a rapid expansion of existing programs so as to expend the added funds as quickly as they expend the resources provided for their ongoing programs.''

This study goes on to say: ''Lags in spending stem in part from the need to draft plans, solicit bids, enter into contracts, and conduct regulatory or environmental reviews. Spending can be further delayed because some activities are by their nature seasonal. For example, major school repairs are generally scheduled during the summer to avoid disrupting classes, and construction and highway work are difficult to carry out during the winter months in many parts of the country.'' It is snowing outside right now. We know that to be the case.

And then, Madam Speaker, this report, not a partisan report from the professional, nonpartisan Congressional Budget Office goes on to say: ''Brand new programs pose additional challenges. Developing procedures and criteria, issuing the necessary regulations and reviewing plans and proposals would make distributing money quickly even more difficult—as can be seen, for example, in the lack of any disbursements to date under the loan programs established for automakers last summer to invest in producing energy-efficient vehicles. Throughout the Federal Government, spending for new programs has frequently been slower than expected and rarely been faster.''

Madam Speaker, again, these are not my words. There is nothing partisan about this. These words came from the study released yesterday from the nonpartisan Congressional Budget Office. I focus on this because I believe that President Obama was absolutely right 15 minutes ago when he said to Republican Members of this institution that we should focus on the merits and not on politics. We don't want to focus on politics because we know it is absolutely essential that we come together with a package that will truly stimulate our economy, get Americans working, create jobs and deal with this very serious economic challenge.

Now as we move ahead, Madam Speaker, what needs to be done is we need to have a package that will not do as the Congressional Budget Office, the professional, nonpartisan Congressional Budget Office has stated, create slow, wasteful, duplicative spending, and that is basically what they are saying here. They are talking about in their independent analysis how difficult it is going to be to get these dollars out there, and to not spend $2.3 billion of this 11 years from today, we should instead focus on fast acting, immediate action.

Now what is it that we can do to deal with the issue of immediacy that faces us? Well, on the opening day I was pleased to introduce legislation which is included in the alternative package that we are going to bring forward. That legislation is focused on addressing a particular problem that is out there in our economy, and that is the housing industry. Traditionally, the housing industry has played a very important role in reigniting our economy.

Yesterday the chairman of the Appropriations Committee, in his testimony before the Rules Committee, said there is no way the housing or the auto industry will be able to play a role in bringing us out of economic recession. And I challenged him on that because I don't believe that is in any way accurate in concluding it because we can take action.

On opening day I introduced legislation which calls for incentivizing Americans to purchase and have an interest in keeping their homes. What it consists of, and we will have this in our package, is a $7,500 exclusion to help people offset the downpayment they make on their home. Everyone has recognized that a big part of this problem in the housing industry has been the fact that people put absolutely nothing down and had subprime rates of interest. And those subprime rates of interest allowed people, unfortunately, to treat their homes like rental units. So they had no vested interest in it, and so they were actually encouraged to walk away.

If we can say to an American, and we all know that the savings rate has gone up because of these challenging economic times, that they put some dollars aside that actually utilizes that to increase the percentage of their downpayment on that home purchase will play a role in dealing with that inventory of housing that is out there.

We saw the reports of the layoffs at Home Depot and a wide range of other companies yesterday. We know if we are able to encourage people to have a vested interest in their home and purchase their home, that will go a long way towards encouraging responsibility and seeing that they have a vested interest in that home. That is just one example.

We also believe when it comes to tax relief that we should provide tax relief to Americans who pay taxes. That is why in our package we are going to call for an across-the-board cut for every single American, reducing from 10 percent to 5 percent on the first level of income that is taxed.

Action like this, I believe, Madam Speaker, will provide an immediacy which is what the American people want. They want an immediate response. And yes, some spending is necessary. We recognize that infrastructure spending is necessary. But as we look at the litany of items that have been included in this package that in no way stimulate our economy, I believe that we should in fact focus on responsibility, private sector job creation, and economic growth. That, I believe, will mitigate the pain which so many of our fellow Americans are suffering at this moment.

Madam Speaker, because of the direction in which we are headed, I am going to encourage my colleagues to oppose this rule. I recognize it is only a general debate rule, but I am very troubled with the legislation that we have seen, some of the actions that have been taken in the committees of jurisdiction. With that, I am going to urge opposition to this rule.

I reserve the balance of my time.

Mr. MCGOVERN. Madam Speaker, I yield myself such time as I may consume.

I am all for bipartisanship, but I find it curious that the gentleman is preaching bipartisanship when this morning, and I read from Politico, there is a story that says this morning House minority leader JOHN BOEHNER went for the jugular, urging his members to oppose the economic centerpiece of Obama's first term just hours before the President paid the Republicans the compliment of coming to the Capitol for a private meeting, even before he did the same for House Democrats.

I will yield to the gentleman in just a second.

It seems to me if we want to be bipartisan, then everybody should reserve judgment until all the facts are on the table. I would like to think that the House minority leader would have reserved his judgment on the overall package until he and the Republican Members of this House had an opportunity to hear the new President out. That did not happen.

Mr. DREIER. Will the gentleman yield?

Mr. MCGOVERN. I yield to the gentleman from California.

Mr. DREIER. I thank my friend for yielding, and let me say that I stand here, having just left the meeting with the President to come up to voice my strong opposition to the $825 billion package that was unveiled without consultation with the Republican leadership. The partisanship has, unfortunately, been demonstrated through actions of my friend on the other side of the aisle. So we are seeking opposition to it.

Mr. MCGOVERN. Reclaiming my time, the fact of the matter is the economic downturn is no longer subject to debate. In the last 4 months, the country has lost 2 million jobs and is expected to lose another 3 to 5 million in the next year. This recovery package represents a crucial first step forward in a concerted effort to not only save but create millions of more jobs in this country. This is a defining moment for every single person in this Chamber. We need to act. We need to move forward with something big and bold, and not the same old, same old.

And bipartisanship, Madam Speaker, doesn't mean that Democrats should capitulate to every request that the Republicans make. Bipartisanship doesn't mean that we should embrace policies that have failed in the past, embracing the same old, same old.

Chairman OBEY was before the House Rules Committee last night and talked about the Republican amendments that he accepted during debate on this package in the Appropriations Committee. This is not everything I would like, Madam Speaker. Quite frankly, I think the package needs to be bigger. But this represents, I think, the best judgment of our new President, working with his advisers, and I think this package is a crucial first step forward in trying to bring this economy back from where it is today. This is a crucial step in trying to create millions of more jobs to put people back to work to try to stimulate this economy to get things moving again.

Mr. DREIER. Will the gentleman yield?

Mr. MCGOVERN. I yield to the gentleman.

Mr. DREIER. I thank my friend for yielding, and I assume my friend has seen this Congressional Budget Office study, and I want to add, as we talk about this Congressional Budget Office study, that it is important to note that while our friend, the chairman of the Appropriations Committee talked about his acceptance of amendments, it is fascinating that the Energy and Commerce Committee had a rigorous debate on a number of amendments. They accepted four Republican amendments by voice vote that dealt with things like COBRA qualification, health information technology, the rights of pharmacists, and they dropped those four amendments from the bill. So what kind of bipartisanship is that, I ask my friend.

Mr. MCGOVERN. Reclaiming my time, I would say to my friend that the Congressional Budget Office study report is disputed by many, many on the House Appropriations Committee and many on the Senate Appropriations Committee. In fact, Mark Zandi who is a conservative economist and former adviser to JOHN MCCAIN, your Presidential candidate in the last go-around, projected that this stimulus package would create 4 million jobs by the end of 2010 and it will provide a vital boost to this lagging economy.

The bottom line is, I think it is obvious that the kind of investments that are in this package, infrastructure, green jobs, investments in education, investments in Food Stamps and investments in medical technology, investments in making sure that we have more nurses and more primary care doctors, all of those things create more jobs and will stimulate the economy.

We can debate reports all we want, but those of us who have been here for awhile know that when you invest in things like infrastructure, you create jobs back home. That is what we are doing here. There are expedited provisions here to make sure that the money gets out quickly.

Madam Speaker, I would like to yield at this point 3 minutes to the gentleman from Georgia (Mr. SCOTT).

□ 1315

Mr. SCOTT of Georgia. Thank you very much, Mr. MCGOVERN.

I think it is very important for us to get our hands around exactly what the situation is now. Our house is on fire. There are two things we need to do. We got to get the water, and we got to get the water quickly and put this fire out. Our economy is crumbling right before our eyes. We are losing 6,300 homes to foreclosure every day. We are losing almost that many jobs every day. Each day there is a new headline, 5,000 jobs here, 6,000 jobs here. Ladies and gentlemen, we can't wait.

Now, let us talk about this economic recovery and investment package, because that is what it is, and let's be fair and accurate with the American people as we talk. We have a new administration that is saddled with the responsibility of leading and applying the executive decisions. This administration, the Obama administration, has come to Congress, and with them, together, we have put together this package, a package that has a great many things in it because our economy has a great many things in it.

Now, if you want to stimulate the economy, there are only three basic ways to do it: You can cut taxes, which is in here; you can do huge government spending, which is in here; and you can also use the Fed to cut the interest rates, which we have already done and they are frozen at zero. So we are left with these two things. And this package is equally balanced in terms of the impact that is needed. We need to get stimulus in as quickly as we can.

Madam Speaker, if I may just share with you a little letter I received from one of my constituents in a high school in Clayton County in Forest Park. Let me just read this.

It says, ''Dear Congressman Scott. I am a high school student that attends Forest Park High School here in Clayton County, Georgia. This school is in bad shape and I hope you can help us get money for the school. The school needs new tile for restrooms and new

windows. The hallways need new lockers so that the lockers that don't open can be replaced. Classrooms need new desks so that some of the desks that have graffiti and old gum stuck to them can be replaced. We need more space in the lunchroom. Congressman Scott, the lines are so long in the lunchroom that when some students just get their food, it is time for them to go back to the classroom.''

Well, in this package we have $43 million into this Clayton County school system. In another county in my district, $50 million. And I am sure every Member of this House can get a letter saying the same thing.

The SPEAKER pro tempore. The time of the gentleman has expired.

Mr. McGOVERN. I yield 1 additional minute to the gentleman.

Mr. SCOTT of Georgia. Madam Speaker, our country is riveted with those moments that try men's souls. We are at such a moment in our history. And when the history books are written on this moment, let it be said that both Republicans and Democrats came together and responded at this moment with the confidence that the American people are looking to us with a way out of this dilemma that we are in. That is why they elected us, to lead, to lead with confidence and with boldness, and to rise to the occasion of this moment that tries men's souls as those moments in our past history from the foundation of this country to now have.

Let us move with quick dispatch and get this measure off, passed and over to President Obama, so he can execute this plan immediately.

Mr. DREIER. Madam Speaker, I yield myself such time as I may consume just to say to my good friend from Clayton County, Georgia, who does a spectacular job, that we all want to ensure that schools and the other very pressing needs out there are addressed. Getting our economy growing is critical for that and I know my friend concurs with the importance for us to do that, and that is why I point to this independent, professional, nonpartisan Congressional Budget Office study which has indicated that there is going to be a tremendous lag time in getting those resources to those schools to which my friend has referred.

Madam Speaker, I would like to yield 2 minutes to my good friend from Moore, Oklahoma (Mr. COLE).

Mr. COLE. Madam Speaker, I thank my good friend and distinguished ranking member of the Rules Committee from California for yielding.

I rise in opposition to this rule and to the underlying legislation. Let me say at the outset, I respect the Rules Committee and the very important function that it carries out as a former member, but it is preeminently, as it should be, the Speaker's committee. In this case I believe the Speaker has presented us with legislation in a format that is unlikely to receive significant minority support and participation, and, frankly, that is unfortunate, Madam Speaker, because I think it is avoidable.

There is much in the current situation that, frankly, the two parties in this body agree on. We agree that we are in a serious recession. We agree that dramatic Federal response is required to deal with job loss and the mounting economic challenges we face. We agree that tax cuts are an important part of that solution. We have some disagreement over which ones and how much, but clearly it is an area we can find common ground on.

We agree that infrastructure is important to moving us forward, although I regret there is very little of this bill, frankly, that deals with infrastructure. Less than 10 percent in total actually goes to infrastructure spending. I think that is something we could find common ground on and enlarge. We disagree, quite obviously, over a whole range of other spending issues which constitute over half the bill.

In our opinion, the spending is simply too much. There are too many new programs that have not been authorized and gone through the appropriate committee process. There is unsustainable spending in this program, things like Pell Grants and IDEA money that is good, but frankly will ramp up and then immediately crash down. Or we will set ourselves up for a future tax increase, which I don't think anybody, certainly on my side of the aisle, is anxious to do. So there are areas of agreement and disagreement.

Madam Speaker, it is not too late to find common ground. We could defeat this rule and ask the Rules Committee to send us back three items that we could consider sequentially and separately. We could root out the bad programs. We could find common ground. We could find common ground on tax cuts. We can find common ground on infrastructure.

The SPEAKER pro tempore. The time of the gentleman has expired.

Mr. DREIER. I am happy to yield to my good friend, the former Rules Committee member and a great appropriator, an additional minute.

Mr. COLE. Madam Speaker, I thank the gentleman.

We could then have our disagreements over the spending portion of the bill. We could vote on each of these items separately. They could later be merged and sent on as a separate bill. In that process we would find significant bipartisan participation and agreement. But, unfortunately, the rule under which we are likely to bring the legislation to the floor is going to make that impossible and give us the old partisan debates that the country would like to see us move past.

So I would ask my colleagues to reject this rule and ask my capable friends on the Rules Committee in both parties to go back and to give us the type of process and the type of bill that will yield a bipartisan outcome, a bipartisan victory. That is what the country wants, that is what America needs, that is what the President has asked us to do. That is what we are capable of doing if we will address this matter in the appropriate manner.

So I urge the rejection of this rule and the beginning of a bipartisan process where we can find so much common ground.

Mr. McGOVERN. Madam Speaker, I yield myself such time as I may consume.

Madam Speaker, I have great respect for the previous speaker, who I had the pleasure of serving with on the Rules Committee for many years, but what we seem to be hearing over and over from the other side is they care about job loss, but. They care about the survival of small businesses, but. They care about the fact that hunger is a growing problem in America, but. They care about the infrastructure, but.

Well, ''but'' nothing. The time has come, because things are so bad, and we don't have to argue about how we got here, but the reality is I think there is a consensus that we are in a serious economic meltdown right now and that in fact we need to do something. We need to do something big and bold. We need to try to jump-start this economy.

This may not be all that needs to be done, quite frankly, but the fact is, if you care about infrastructure, you need to support a bill that spends and invests in infrastructure. If you care about job losses in this country, then you have got to do something other than just talk about it, and invest in programs that will help create more jobs. If you care about the fact that hunger is a growing problem in the United States of America, which is shameful, then you need to do something that will not only help feed hungry people, but stimulate the economy. And this bill does that, and more.

So there are lots of things in this bill that I think will stimulate this economy. We could all find something that we don't like. But the fact of the matter is, if everybody had the opportunity to write this bill, there would be 435 different bills. This bill I think represents the best judgment of the new President of the United States, working with the Democratic leadership and working with Members in this House, and I think it deserves support.

Madam Speaker, I yield 2 minutes to the gentleman from Texas (Mr. DOGGETT).

Mr. DOGGETT. Well, how we got in this situation is that ideology triumphed over reason. For the last eight years, and a little longer, we have been told that there are few problems in America that can't be solved other than by more tax breaks and a permissive attitude toward corporate law enforcement. Now we have the results, the Bush recession, and if we don't pass this legislation it will soon become the Bush depression.

Now, the real question we need to be asking is, ''how do we get the biggest

bang for the buck?'' We want to be concerned about every single one of these taxpayer dollars, that they do the most possible to ensure an economic recovery. And one of the people that we have turned to is a principal economic adviser to Senator JOHN MCCAIN and his presidential campaign.

He, like other economists, has analyzed the provisions of this bill, and he has told us that we will add to our gross domestic product $1.72 for every 1 dollar that we spend in this bill on food stamps to help hungry people in this country. He also told us that on some of the corporate loss carryback provisions, we will get only 19 cents added per dollar spent, and that with a permanent corporate tax cut, as some have advocated, we will get only 30 cents for every dollar we invest.

I think we need to focus our attention where it does the most good in order to ensure an economic recovery for families across our country.

Mr. DREIER. Will the gentleman yield?

Mr. DOGGETT. On your time, later.

Mr. DREIER. I will yield time to you if you will agree to yield for a question here.

Mr. DOGGETT. Let me give an example of what this bill does with regard to one provision in this bill that I was involved in writing that deals with the illegal action of the Secretary of the Treasury under President Bush, Mr. Paulson, to just suspend the law that President Ronald Reagan signed so that corporations wouldn't go out and dodge their taxes by taking over some other corporation's tax losses. Secretary Paulson suspended that law without any legal basis for banks in this country, and some have estimated that could result in a drain on the Treasury of $140 billion. This bill closes that loophole.

Mr. DREIER. Will the gentleman yield?

The SPEAKER pro tempore. The time of the gentleman has expired.

Mr. MCGOVERN. I yield the gentleman 1 additional minute.

Mr. DREIER. Will the gentleman yield?

Mr. DOGGETT. On your time.

Mr. DREIER. I will be happy to yield the gentleman 1 additional minute, if he will yield.

Mr. DOGGETT. May I have regular order and may I be assured that I have my full minute to discuss what I want to discuss?

The SPEAKER pro tempore. The gentleman from Texas will suspend.

The gentleman from California, the gentleman from Texas has been recognized.

Mr. DREIER. I just yielded him an additional minute.

Mr. DOGGETT. That is great. I have got an additional minute yielded here and a minute there. Which, Madam Speaker, may I take first?

The SPEAKER pro tempore. The gentleman has 2 minutes.

Mr. DOGGETT. All right, I yield for 30 seconds to the gentleman from California.

Mr. DREIER. I thank my friend for yielding.

I simply wanted to engage in a little debate here, if I might, and that is the reason I yielded time to my friend, so that we could ask the question as to whether or not the gentleman has looked at the Congressional Budget Office study, the professional, nonpartisan Congressional Budget Office Study.

Mr. DOGGETT. Not only looked at it, but I heard testimony all this morning in the Budget Committee.

Mr. DREIER. If I could complete my thought, my question is, have you in fact looked at the professional, nonpartisan CBO study that came out last night talking about the slowness with which we will have to contend at getting these resources? And I agree with my friend on the need to try and get it in, and I thank my friend for yielding.

Mr. DOGGETT. I have not only looked at the report, but I have spent most of the morning listening to the testimony of Dr. Elmendorf, who wrote that report, and indeed it is from that very report that the kind of language that I was referring to earlier, some of the proposals that you are advocating, are the ones that are the least effective for getting our recovery going, and that is why I think we have a blended proposal here. But some of the changes you want are not efficient. They are a weak way of getting recovery, and we should be focused on the biggest bang for the buck.

Now, let me focus on the minute that the gentleman from Massachusetts was kind enough to yield to me, because there is one provision in this bill that I think is very important. It is $13.5 billion in additional assistance to many working families, many middle-class families, concerning higher education.

□ 1330

This was not in the bill as originally proposed by President Obama and his advisers, but he said, as he is saying to Republicans, I'm sure, right now, ''If you've got a better idea, I'm open to it.'' And in this case, the better idea was an idea he advanced in the campaign that we need to do more, particularly at a time of economic downturn, to get more of our young people and perhaps not so young people back into community colleges, into higher education institutions across this country.

What this tax credit will do, in addition to the important increase in Pell grants in this bill, is to provide a refundable credit to many working families of up to $1,000, up to $2,500 to other families that will for the first time cover textbooks.

The SPEAKER pro tempore. The time of the gentleman has expired.

Mr. MCGOVERN. Madam Speaker, I yield the gentleman another 30 seconds.

Mr. DOGGETT. This credit will for the first time cover textbooks, will supplement Pell grants, will provide a real opportunity not only for individuals to retool their skills but in the process retool our whole economy with a better trained workforce.

I think this is a very effective way to address economic recovery. I'm pleased it has been incorporated in this bill. There is not a family that has a stake in higher education, trying to get someone into a higher education institution, or who has someone there now that is not likely to gain, middle-class families, working families, from this bill.

Mr. DREIER. Madam Speaker, I yield myself such time as I may consume.

I will say that I truly do believe that we are making an attempt to follow the directive that was provided to us within the last hour by President Obama in his address to the Republican Conference when he talked about the need to focus on merits rather than politics here.

We are, in fact, offering an alternative. We are, in fact, saying that we believe that encouraging private sector growth and, yes, putting into place spending that will help to develop our infrastructure is important. So we acknowledge that.

The fact is if you look at what Ronald Reagan inherited in 1981, as I was saying in my opening remarks, an inflation rate of 13½ percent, interest rates that were beyond 15 percent, an unemployment rate that was in excess of 7 percent, what was it that was done the last time that we faced a challenge that, quite frankly, according to the numbers as of right now was even greater than it is today? What was the response, in a bipartisan way, of Democrats and Republicans alike? And I remember very vividly as we did this in May of 1981 and August of 1981. What happened, Madam Speaker, we put into place a package that restrained the rate of growth of Federal Government, cutting by 17 percent the rate of growth of Federal spending. That was done in May of 1981, known as the Gramm-Latta budget package. Then in August of 1981, the bipartisan Conable-Hance economic growth package brought about a broad across-the-board marginal rate reduction which tripled the flow of revenues to the Federal Government as it unleashed tremendous economic growth.

So, Madam Speaker, this notion that we are saying we are for small business but, we are for all these other things but, as my friend from Worcester has said just a few minutes ago, is preposterous. We have a very, very strong and positive track record on what needs to be done to get this economy growing. We have the ability to do that. And I believe that President Obama is sincere when he says we need to talk about the merits and not the politics.

Again, looking at 1981, when a number of my colleagues on the other side of the aisle joined in a bipartisan way to do this, that is the prescription for the challenges that we face today. It worked then, and I believe very strongly that it can work now. Encouraging

individual initiative and responsibility, stepping forward with ways in which we can help these industries that have been suffering greatly is something that can be done. And when this study that was done by the Congressional Budget Office made it very clear that in this package that has been brought before us, without consultation with the Republican leadership, without consultation with the Republican leadership, we are, in fact, expending dollars which will be slow and wasteful; and, Madam Speaker, we're expending dollars more than 10 years from now in this package.

So I will agree with my friends on the other side of the aisle we are never going to come to a perfect agreement, but I believe we should use what has, in fact, worked in the past in generating real economic growth.

With that, Madam Speaker, I reserve the balance of my time.

Mr. MCGOVERN. Madam Speaker, I appreciate the gentleman's history lesson about Ronald Reagan and about what happened in 1981. I wasn't here in 1981. I was a senior in college, but I appreciate the gentleman's giving me that history lesson.

But when he talks about the strong track record of the Republicans, I beg to differ. I think the American people differ. That's what the outcome of this election was about. People do not want more of the same. They're tired of the Republican track record. They want to go in a very different direction.

Madam Speaker, at this time I would like to yield 2 minutes to the distinguished gentleman from New York (Mr. ENGEL).

Mr. ENGEL. I thank my friend from Massachusetts for yielding to me.

Madam Speaker, I stand in strong support of the economic recovery legislation before us today.

My own State, New York, has been hard hit by the recession. The collapse of the markets on Wall Street have left gaping revenue holes that have contributed to our $15.4 billion State budget deficit.

In this economic crisis, high unemployment and rising costs have put a huge strain on many American families. This legislation contains a series of programs to provide relief, including helping workers train and find jobs, extending unemployment benefits, and increasing food stamp benefits.

I'm so proud that we will protect health care coverage for millions of Americans during this recession by providing an estimated $87 billion in additional Federal matching funds. This will help States like New York maintain our Medicaid programs in the face of massive State budget shortfalls over the next 2 years. I have long fought hard for increased F-MAP funds and am grateful that the stimulus will provide some much-needed relief to our States as they struggle to maintain access to needed services. And as we marked up the bill last week in the Energy and Commerce Committee, I was very, very proud that we had the monies in this bill.

We will also reduce our dependence on foreign oil by making investments aimed at dramatically increasing renewable energy production and renovating public buildings to make them more energy efficient. In this bill we will invest wisely in U.S. development of advanced vehicle batteries and battery systems through loans and grants so that America can lead the world in transforming the way automobiles are powered. We will also have tax credits for private homeowners for new furnaces, energy-efficient windows and doors, and insulation.

So this is a great bill, and, Madam Speaker, I urge all my colleagues to support this bill.

Mr. DREIER. Madam Speaker, I yield myself such time as I may consume.

I am going to try again, Madam Speaker. I know that my friend who was a senior in college when I began my service here in the institution, I appreciate his reminding me of how much older I am than he, although I have to tell him I was not too much older than he when he was a senior in college and I was proud to begin my service here.

The fact is, okay, I've talked about Ronald Reagan. And I know my friend is from Worcester, and he's very proud of that, and what I would like to do is talk about John F. Kennedy, the President of the United States from his State.

In 1961 we all know John F. Kennedy became President. He did a lot of great things. He's been a model for Democrats and Republicans alike in so many areas. There were challenging economic times in the early 1960s, and John F. Kennedy did exactly what Ronald Reagan did in 1981, and my friend describes this as the ''same old, same old.''

Well, I believe that it's imperative for us to recognize the best way to get our economy growing. Not only Ronald Reagan but John F. Kennedy recognized it and put into place policies that unleashed the kind of economic growth to which we all aspire today. We know that it's been done many times throughout world history and it can happen.

So if my friend wants to criticize the gentleman from his State, President Kennedy, just as he criticizes Ronald Reagan for the same old, same old, Madam Speaker, I welcome his doing that.

Madam Speaker, I reserve the balance of my time.

Mr. MCGOVERN. Madam Speaker, at this time I would like to yield 2 minutes to the gentlewoman from Texas (Ms. JACKSON-LEE).

(Ms. JACKSON-LEE of Texas asked and was given permission to revise and extend her remarks.)

Ms. JACKSON-LEE of Texas. Madam Speaker, they never said our task and our job would be easy. I imagine when the Founding Fathers were trying to create this great Union, it was not easy then as well. But we have a responsibility and a duty. We have taken an oath of office. We have a responsibility to the American people.

Our President has offered a solution. That is why we are here. And I rise to support the rule and the underlying bill because I am looking for an economic engine that will actually roll across America's railways, that will go into the hamlets and villages and communities where people are depressed and oppressed. And, frankly, there are items that I think answer the question whether or not we are concerned about creating jobs.

The increase of the earned income tax credit is one that we have seen work and can work. I have worked with John Hope Bryant, who chairs an organization dealing with financial literacy. We saw the impact of the earned income tax credit for Hurricane Katrina families, for working families, and that has been increased. For those who are seeking homes, we don't want to kill off the homeowners market, and we see now that the $7,500 tax credit that had to be repaid in 15 years will now be waived and forgiven. We can get homeowners or home purchasers into homes, which Americans would like to do.

We will be seeing $20 billion for school modernization, $14 billion for K–12, and $6 billion for higher education institutions. We will also be seeing moneys going for educational technology grants. But my school districts are already lining up to be able to create that economic engine to keep teachers at work and to train the next generation of workers.

There are green jobs.

The SPEAKER pro tempore. The time of the gentlewoman has expired.

Mr. MCGOVERN. I yield the gentlewoman an additional 1 minute.

Ms. JACKSON-LEE of Texas. I thank the distinguished gentleman.

There is more infusion of Medicaid dollars so that those who are uninsured will have the resources necessary to be able to, in essence, provide for their family but keep looking for work.

This is a calling of crisis. And so with the green jobs, the infrastructure, I do support this rule, but I would certainly like to see the mark of the transportation and infrastructure go from $9 billion to $12 billion. I would like to see the language of ''use it or lose it'' be restored. I want to make sure that the metro system of Houston can fall under the transit funding. And we're going to be working with the chairman of the Transportation Committee and our congressional delegation because these will create jobs across America. I want to see rail travel restored. I want to make sure the infrastructure of America is rebuilt. I want the bridges in the 18th Congressional District enrolled rebuilt by the hands and labor of the American people. That's what this stimulus is about.

There is no doubt that if we stand on this floor of the House or the other

body and ignore the cry of Americans, we too can hold our heads in shame.

Support this rule and support this legislation.

Mr. DREIER. Madam Speaker, I yield myself the balance of my time.

Madam Speaker, I think that it's become very clear in this debate that we all recognize the fact that there is a great deal of suffering going on here in the United States of America. Our constituents are hurting. We are dealing with a very, very challenging economic downturn, and we all want to come together to try to find a way to jump-start our economy.

President Obama has, just a few minutes ago, completed an address to the Republican Conference, Republican Members of this institution, and he went over to meet with our colleagues on the other side of the Capitol. And the words that really struck me that he offered to us were that as we deal with this economic stimulus package, Madam Speaker, it's important for us to focus on merits and not politics. Merits and not politics. And I completely concur with that. I completely concur with that. And, again, it was 1 week ago today that we were all privileged to be on the west front of the Capitol as we were able to witness history and we heard a similar message put forward by President Obama.

□ 1345

That's why, as we move ahead on this issue, we are going to expend our time and our effort focusing on the merits and what needs to be done to get our economy growing.

We know that there is going to be some very important government spending stimulus, and we support things like infrastructure spending, because we know that goods movement, as the economy starts to grow, is imperative, and it needs to be addressed. And so, yes, we support the kind of infrastructure spending that we have talked about.

But, Madam Speaker, as we look at the analysis that has been done on this $825 billion package, it doesn't do what is essential. I believe that we need to make sure that every dollar expended gets into, on track, just as quickly as we possibly can. We all want to try and move that. President Obama has already talked about shovel-ready projects. We understand the imperativeness of this.

Unfortunately, the study that has been provided by the professional, nonpartisan Congressional Budget Office has made it very clear that it is virtually impossible for us to achieve that goal with this package that has been put before us. In fact, Madam Speaker, in looking at the spending, it's not just beyond a year or 2 years, and the President in his remarks downstairs talked about the fact that he wanted us to get—maybe not within this year, but within the next 2 years—this spending out.

Yet, Madam Speaker, based on this professional, nonpartisan Congressional Budget Office study again, not a Republican statement, $2.3 billion of this package won't be expended until 2019. That's more than 10 years today, and that's what the CBO study has said, and I would commend that to all of our colleagues.

What is it that needs to be done? We need to recognize that bold, strong, decisive, across-the-board marginal rate cuts, doing everything we can to encourage individual initiative and responsibility, is the kind of legislative action that we here can take to get our economy growing and, as we discussed, as the President has said, the merits of this, unfortunately, we don't do that in this package.

That is the reason, Madam Speaker, that we will be coming forward with an alternative, an alternative, a very positive alternative that brings about marginal rate reduction for 100 percent, 100 percent of American taxpayers, so that they can save and invest. And we, of course, want to encourage consumption. We, of course, want to encourage the steps that are necessary to get our economy growing.

I would say again, the idea of incentivizing people to get off the couch and into showrooms of automobile dealerships, the idea of having people take responsibility and being incentivized to make a greater down payment on a home so that they will have a vested interest in it and not this very, very, very failed zero down payment and subprime rates of interest, these are the kinds of creative, bold, policies that we can put into place. That's what we want to do as we deal with the suffering that is out there.

I am convinced, Madam Speaker, based on the last half century and looking at the policies of John F. Kennedy and Ronald Reagan, that if we were to do that, we would do exactly what happened following the implementation of those policies by both John F. Kennedy and Ronald Reagan in the 1960s and the 1980s. We will boost the economy, increase the flow of Federal revenues to the Treasury and be able to address the challenges that are before us.

So, Madam Speaker, I urge my colleagues to vote against this rule, because the underlying legislation itself is very, very badly flawed, and it's not what the American people need.

With that, I yield back the balance of my time.

Mr. MCGOVERN. Madam Speaker, let me begin by thanking Chairmen OBEY, RANGEL, WAXMAN, OBERSTAR, MILLER, SPRATT and GORDON for their incredible work on this package, and I want to thank their staffs.

I also want to thank ROSA DELAURO for championing the antihunger provisions in this package, which I think are so important, not only in terms of our moral obligation to help people in this country who don't have enough to eat, but it also helps stimulate the economy.

I also am grateful to Majority Leader STENY HOYER and to Speaker NANCY PELOSI for their leadership in trying to put a good and solid reinvestment recovery package together.

Madam Speaker, we are facing extremely tough times. This economy is in the worst shape since the Great Depression. Millions and millions of people have lost their jobs and millions more will lose their jobs unless this Congress, working with this President, takes decisive action.

We are not talking about statistics, we are talking about people. We are talking about families, and they are hurting. There is not a single one of us in this chamber who, when we go home, do not encounter people who have lost their jobs or who are on the verge of losing their jobs.

People are struggling, people are fearful. Small businesses are struggling. They are asking for our help. Cities and towns and States are facing the worst financial crisis in decades, and they are looking for help.

The underlying bill before us provides a first step in helping remedy this terrible situation. John F. Kennedy liked to say that a rising tide lifts all boats. Well, that is what we are trying to do with this package.

We are trying to stimulate the economy. We are trying to make sure that everybody, not just the few who are rich, but everybody, those who are in the middle class and those who are poor, gets the help that they deserve.

My colleague talked about a substitute that the Republicans will offer. Well, that's great, and they will have an opportunity to debate and make their substitute and let the votes fall where they may. But the fact of the matter is that I personally believe that their approach, which I referred to as the same old same old, will not prevail. I hope it doesn't prevail. That's what this election was about. People do not want more of the same. They want a different direction.

Quite frankly, this stimulus package that we debated today should have been what President Bush asked for a year ago. We are late in coming to rescue so many families across this country.

I know it's fashionable on the other side to talk about tax cuts, tax cuts, tax cuts. The bill that President Obama and the Democratic leadership are putting together, 95 percent of American taxpayers get a break.

But I should tell my colleagues that for every dollar of direct spending, the economy gets $1.50 in stimulus. Every dollar of tax cut produces 75 cents in economic stimulus. So I do think, while we can make the argument that tax cuts are important, investment in our infrastructure, investment in our schools, investment in our economy, is incredibly important.

People have said, well, there is no way we can get all this money out. I should point out in this bill there are strict accountability measures to ensure that highways and transit funds get out of the door quickly to create

jobs. It requires States to obligate 50 percent of the highway and transit funding within 180 days, or the Transportation Department can reclaim some of the States' highway and transportation funding in the bill. So there are incentives to get this money out quickly to help stimulate this economy.

Finally, Madam Speaker, let me say that this really is a defining moment. People are looking to their government for help. They are looking for us to take big, bold steps. They are looking at us the same way that people looked at Franklin Roosevelt during the Great Depression to come and try to put together a package to help get people back to work.

Well, that's what we're trying to do here. Madam Speaker, I will say this, I am proud to be on the floor today debating this rule which will pave the way for a debate on this Economic Recovery and Reinvestment Act, because it shows that this government, once again, has a conscience.

Madam Speaker, I yield back the balance of my time, and I move the previous question on the resolution.

The SPEAKER pro tempore. The question is on ordering the previous question.

The question was taken; and the Speaker pro tempore announced that the ayes appeared to have it.

Mr. DREIER. Madam Speaker, on that I demand the yeas and nays.

The yeas and nays were ordered.

The SPEAKER pro tempore. Pursuant to clause 8 of rule XX, further proceedings on this question will be postponed.

PROVIDING FOR AN ADJOURNMENT OF THE HOUSE

Mr. MCGOVERN. Madam Speaker, I send to the desk a privileged concurrent resolution and ask for its immediate consideration.

The Clerk read the resolution, as follows:

H. CON. RES. 26

That when the House adjourns on the legislative day of Wednesday, January 28, 2009, on a motion offered pursuant to this concurrent resolution by its Majority Leader or his designee, it stand adjourned until 2 p.m. on Monday, February 2, 2009, or until the time of any reassembly pursuant to section 2 of this concurrent resolution, whichever occurs first; and that when the House adjourns on the legislative day of Wednesday, February 4, 2009, on a motion offered pursuant to this concurrent resolution by its Majority Leader or his designee, it stand adjourned until 2 p.m. on Monday, February 9, 2009, or until the time of any reassembly pursuant to section 2 of this concurrent resolution, whichever occurs first.

SEC. 2. The Speaker or her designee, after consultation with the Minority Leader, shall notify the Members of the House to reassemble at such place and time as she may designate if, in her opinion, the public interest shall warrant it.

The concurrent resolution was agreed to.

A motion to reconsider was laid on the table.

ANNOUNCEMENT BY THE SPEAKER PRO TEMPORE

The SPEAKER pro tempore. Pursuant to clause 8 of rule XX, proceedings will resume on questions previously postponed.

Votes will be taken in the following order: ordering the previous question on House Resolution 87; adopting House Resolution 87; ordering the previous question on House Resolution 88; and adopting House Resolution 88.

The first electronic vote will be conducted as a 15-minute vote. Remaining electronic votes will be conducted as 5-minute votes.

PROVIDING FOR CONSIDERATION OF S. 181, LILLY LEDBETTER FAIR PAY ACT OF 2009

The SPEAKER pro tempore. The unfinished business is the vote on ordering the previous question on House Resolution 87, on which the yeas and nays were ordered.

The Clerk read the title of the resolution.

The SPEAKER pro tempore. The question is on ordering the previous question.

The vote was taken by electronic device, and there were—yeas 252, nays 175, not voting 5, as follows:

[Roll No. 32]

YEAS—252

Abercrombie
Ackerman
Adler (NJ)
Altmire
Andrews
Arcuri
Baca
Baird
Baldwin
Barrow
Bean
Becerra
Berkley
Berman
Berry
Bishop (GA)
Bishop (NY)
Blumenauer
Boccieri
Boren
Boswell
Boucher
Boyd
Brady (PA)
Braley (IA)
Bright
Brown, Corrine
Butterfield
Capps
Capuano
Cardoza
Carnahan
Carney
Carson (IN)
Castor (FL)
Chandler
Childers
Clarke
Clay
Cleaver
Clyburn
Cohen
Connolly (VA)
Conyers
Cooper
Costa
Costello
Courtney
Crowley
Cuellar
Cummings
Dahlkemper
Davis (AL)
Davis (CA)
Davis (IL)
Davis (TN)
DeFazio
DeGette
Delahunt
DeLauro
Dicks
Dingell
Doggett
Donnelly (IN)
Doyle
Driehaus
Edwards (MD)
Edwards (TX)
Ellison
Ellsworth
Engel
Eshoo
Etheridge
Farr
Fattah
Filner
Foster
Frank (MA)
Fudge
Giffords
Gonzalez
Gordon (TN)
Grayson
Green, Al
Green, Gene
Griffith
Grijalva
Gutierrez
Hall (NY)
Halvorson
Hare
Harman
Hastings (FL)
Heinrich
Herseth Sandlin
Higgins
Hill
Himes
Hinchey
Hinojosa
Hirono
Hodes
Holden
Holt
Honda
Hoyer
Inslee
Israel
Jackson (IL)
Jackson-Lee (TX)
Johnson (GA)
Johnson, E. B.
Kagen
Kanjorski
Kaptur
Kennedy
Kildee
Kilpatrick (MI)
Kilroy
Kind
Kirkpatrick (AZ)
Kissell
Klein (FL)
Kosmas
Kratovil
Kucinich
Langevin
Larsen (WA)
Larson (CT)
Lee (CA)
Levin
Lewis (GA)
Lipinski
Loebsack
Lofgren, Zoe
Lowey
Luján
Lynch
Maffei
Maloney
Markey (CO)
Markey (MA)
Marshall
Massa
Matheson
Matsui
McCarthy (NY)
McDermott
McGovern
McIntyre
McMahon
McNerney
Meek (FL)
Meeks (NY)
Melancon
Michaud
Miller (NC)
Miller, George
Minnick
Mitchell
Mollohan
Moore (KS)
Moore (WI)
Moran (VA)
Murphy (CT)
Murphy, Patrick
Murtha
Nadler (NY)
Napolitano
Neal (MA)
Nye
Oberstar
Obey
Olver
Ortiz
Pallone
Pascrell
Pastor (AZ)
Payne
Perlmutter
Perriello
Peters
Peterson
Pingree (ME)
Polis (CO)
Pomeroy
Price (NC)
Rahall
Rangel
Reyes
Richardson
Rodriguez
Ross
Rothman (NJ)
Roybal-Allard
Ruppersberger
Rush
Ryan (OH)
Salazar
Sánchez, Linda T.
Sanchez, Loretta
Sarbanes
Schakowsky
Schauer
Schiff
Schrader
Schwartz
Scott (GA)
Scott (VA)
Serrano
Sestak
Shea-Porter
Sherman
Shuler
Sires
Skelton
Slaughter
Smith (WA)
Snyder
Space
Speier
Spratt
Stark
Stupak
Sutton
Tanner
Tauscher
Taylor
Teague
Thompson (CA)
Thompson (MS)
Tierney
Titus
Tonko
Towns
Tsongas
Van Hollen
Velázquez
Visclosky
Walz
Wasserman Schultz
Waters
Watson
Watt
Waxman
Weiner
Welch
Wexler
Wilson (OH)
Woolsey
Wu
Yarmuth

NAYS—175

Aderholt
Akin
Alexander
Austria
Bachmann
Bachus
Barrett (SC)
Bartlett
Barton (TX)
Biggert
Bilbray
Bilirakis
Bishop (UT)
Blackburn
Blunt
Boehner
Bonner
Bono Mack
Boozman
Boustany
Brady (TX)
Broun (GA)
Brown (SC)
Buchanan
Burgess
Burton (IN)
Buyer
Calvert
Camp
Campbell
Cantor
Cao
Capito
Carter
Cassidy
Castle
Chaffetz
Coble
Coffman (CO)
Cole
Conaway
Crenshaw
Culberson
Davis (KY)
Deal (GA)
Dent
Diaz-Balart, L.
Diaz-Balart, M.
Dreier
Duncan
Ehlers
Emerson
Fallin
Flake
Fleming
Forbes
Fortenberry
Foxx
Franks (AZ)
Frelinghuysen
Gallegly
Garrett (NJ)
Gerlach
Gingrey (GA)
Gohmert
Goodlatte
Granger
Graves
Guthrie
Hall (TX)
Harper
Hastings (WA)
Heller
Hensarling
Herger
Hoekstra
Hunter
Inglis
Issa
Jenkins
Johnson (IL)
Johnson, Sam
Jones
Jordan (OH)
King (IA)
King (NY)
Kingston
Kirk
Kline (MN)
Lamborn
Lance
Latham
LaTourette
Latta
Lee (NY)
Lewis (CA)
Linder
LoBiondo
Lucas
Luetkemeyer
Lummis
Lungren, Daniel E.
Mack
Manzullo
Marchant
McCarthy (CA)
McCaul
McClintock
McCotter
McHenry
McHugh
McKeon
McMorris Rodgers
Mica
Miller (FL)
Miller (MI)
Miller, Gary
Moran (KS)
Murphy, Tim
Myrick
Neugebauer
Nunes
Olson
Paul
Paulsen
Pence
Petri
Pitts
Platts
Poe (TX)
Posey
Price (GA)
Putnam
Radanovich
Rehberg
Reichert
Roe (TN)
Rogers (AL)
Rogers (KY)
Rogers (MI)
Rohrabacher
Rooney
Ros-Lehtinen
Roskam
Royce
Ryan (WI)
Scalise
Schmidt
Schock
Sensenbrenner
Sessions
Shadegg
Shimkus
Shuster
Simpson
Smith (NE)
Smith (NJ)
Smith (TX)
Souder
Stearns
Sullivan
Terry
Thompson (PA)
Thornberry
Tiahrt
Turner
Upton
Walden
Wamp
Westmoreland
Whitfield
Wilson (SC)
Wittman
Wolf
Young (FL)

NOT VOTING—5

Brown-Waite, Ginny
McCollum
Solis (CA)
Tiberi
Young (AK)

□ 1421

Ms. JENKINS, Mrs. MILLER of Michigan and Messrs. REHBERG and GOODLATTE changed their vote from ''yea'' to ''nay.''

Mr. NYE changed his vote from ''nay'' to ''yea.''

So the previous question was ordered.

The result of the vote was announced as above recorded.

The SPEAKER pro tempore. The question is on the resolution.

The question was taken; and the Speaker pro tempore announced that the ayes appeared to have it.

Mr. DREIER. Madam Speaker, on that I demand the yeas and nays.

The yeas and nays were ordered.

The SPEAKER pro tempore. This is a 5-minute vote.

The vote was taken by electronic device, and there were—yeas 252, nays 174, not voting 6, as follows:

[Roll No. 33]

YEAS—252

Abercrombie
Ackerman
Adler (NJ)
Altmire
Andrews
Arcuri
Baca
Baird
Baldwin
Barrow
Bean
Becerra
Berkley
Berman
Berry
Bishop (GA)
Bishop (NY)
Blumenauer
Boccieri
Boren
Boswell
Boucher
Boyd
Brady (PA)
Braley (IA)
Bright
Brown, Corrine
Butterfield
Capps
Capuano
Cardoza
Carnahan
Carney
Carson (IN)
Castor (FL)
Chandler
Childers
Clarke
Clay
Cleaver
Clyburn
Cohen
Connolly (VA)
Conyers
Cooper
Costa
Costello
Courtney
Crowley
Cuellar
Cummings
Dahlkemper
Davis (AL)
Davis (CA)
Davis (IL)
Davis (TN)
DeFazio
DeGette
Delahunt
DeLauro
Dicks
Dingell
Doggett
Donnelly (IN)
Doyle
Driehaus
Edwards (MD)
Edwards (TX)
Ellison
Ellsworth
Engel
Eshoo
Etheridge
Farr
Fattah
Filner
Foster
Frank (MA)
Fudge
Giffords
Gonzalez
Gordon (TN)
Grayson
Green, Al
Green, Gene
Griffith
Grijalva
Gutierrez
Hall (NY)
Halvorson
Hare
Harman
Hastings (FL)
Heinrich
Herseth Sandlin
Higgins
Hill
Himes
Hinchey
Hinojosa
Hirono
Hodes
Holden
Holt
Honda
Hoyer
Inslee
Israel
Jackson (IL)
Jackson-Lee (TX)
Johnson (GA)
Johnson, E. B.
Kagen
Kanjorski
Kaptur
Kennedy
Kildee
Kilpatrick (MI)
Kilroy
Kind
Kirkpatrick (AZ)
Kissell
Klein (FL)
Kosmas
Kratovil
Kucinich
Langevin
Larsen (WA)
Larson (CT)
Lee (CA)
Levin
Lewis (GA)
Lipinski
Loebsack
Lofgren, Zoe
Lowey
Luján
Lynch
Maffei
Maloney
Markey (CO)
Markey (MA)
Marshall
Massa
Matheson
Matsui
McCarthy (NY)
McCollum
McDermott
McGovern
McIntyre
McMahon
McNerney
Meek (FL)
Meeks (NY)
Melancon
Michaud
Miller (NC)
Miller, George
Minnick
Mitchell
Mollohan
Moore (KS)
Moore (WI)
Moran (VA)
Murphy (CT)
Murphy, Patrick
Murtha
Nadler (NY)
Napolitano
Neal (MA)
Nye
Oberstar
Obey
Olver
Ortiz
Pallone
Pascrell
Pastor (AZ)
Payne
Perlmutter
Perriello
Peters
Peterson
Pingree (ME)
Polis (CO)
Pomeroy
Price (NC)
Rahall
Rangel
Reyes
Richardson
Rodriguez
Ross
Rothman (NJ)
Roybal-Allard
Rush
Ryan (OH)
Salazar
Sánchez, Linda T.
Sanchez, Loretta
Sarbanes
Schakowsky
Schauer
Schiff
Schrader
Schwartz
Scott (GA)
Scott (VA)
Serrano
Sestak
Shea-Porter
Sherman
Shuler
Sires
Skelton
Slaughter
Smith (WA)
Snyder
Space
Speier
Spratt
Stark
Stupak
Sutton
Tanner
Tauscher
Taylor
Teague
Thompson (CA)
Thompson (MS)
Tierney
Titus
Tonko
Towns
Tsongas
Van Hollen
Velázquez
Visclosky
Walz
Wasserman Schultz
Waters
Watson
Watt
Waxman
Weiner
Welch
Wexler
Wilson (OH)
Woolsey
Wu
Yarmuth

NAYS—174

Aderholt
Akin
Alexander
Austria
Bachmann
Bachus
Barrett (SC)
Bartlett
Barton (TX)
Biggert
Bilbray
Bilirakis
Bishop (UT)
Blackburn
Blunt
Boehner
Bonner
Bono Mack
Boozman
Boustany
Brady (TX)
Broun (GA)
Brown (SC)
Buchanan
Burgess
Burton (IN)
Buyer
Calvert
Camp
Campbell
Cantor
Cao
Capito
Carter
Cassidy
Castle
Chaffetz
Coble
Coffman (CO)
Cole
Conaway
Crenshaw
Culberson
Davis (KY)
Deal (GA)
Dent
Diaz-Balart, L.
Diaz-Balart, M.
Dreier
Duncan
Ehlers
Emerson
Fallin
Flake
Fleming
Forbes
Fortenberry
Foxx
Franks (AZ)
Frelinghuysen
Gallegly
Garrett (NJ)
Gerlach
Gingrey (GA)
Gohmert
Goodlatte
Granger
Graves
Guthrie
Hall (TX)
Harper
Hastings (WA)
Heller
Hensarling
Herger
Hoekstra
Hunter
Inglis
Issa
Jenkins
Johnson (IL)
Johnson, Sam
Jones
Jordan (OH)
King (IA)
King (NY)
Kingston
Kirk
Kline (MN)
Lamborn
Lance
Latham
LaTourette
Latta
Lee (NY)
Lewis (CA)
Linder
LoBiondo
Lucas
Luetkemeyer
Lummis
Lungren, Daniel E.
Mack
Manzullo
McCarthy (CA)
McCaul
McClintock
McCotter
McHenry
McHugh
McKeon
McMorris Rodgers
Mica
Miller (FL)
Miller (MI)
Miller, Gary
Moran (KS)
Murphy, Tim
Myrick
Neugebauer
Nunes
Olson
Paul
Paulsen
Pence
Petri
Pitts
Platts
Poe (TX)
Posey
Price (GA)
Putnam
Radanovich
Rehberg
Reichert
Roe (TN)
Rogers (AL)
Rogers (KY)
Rogers (MI)
Rohrabacher
Rooney
Ros-Lehtinen
Roskam
Royce
Ryan (WI)
Scalise
Schmidt
Schock
Sensenbrenner
Sessions
Shadegg
Shimkus
Shuster
Simpson
Smith (NE)
Smith (NJ)
Smith (TX)
Souder
Stearns
Sullivan
Terry
Thompson (PA)
Thornberry
Tiahrt
Turner
Upton
Walden
Wamp
Westmoreland
Whitfield
Wilson (SC)
Wittman
Wolf
Young (FL)

NOT VOTING—6

Brown-Waite, Ginny
Marchant
Ruppersberger
Solis (CA)
Tiberi
Young (AK)

ANNOUNCEMENT BY THE SPEAKER PRO TEMPORE

The SPEAKER pro tempore (during the vote). Less than 2 minutes remain on this vote.

□ 1430

So the resolution was agreed to.

The result of the vote was announced as above recorded.

A motion to reconsider was laid on the table.

HONORING JACK KELLIHER ON 30 YEARS OF SERVICE TO THE HOUSE

(Mr. PASCRELL asked and was given permission to address the House for 1 minute.)

Mr. PASCRELL. I want to recognize and pay tribute to a person, Madam Speaker, who has dedicated 30 years of service to his government, John Francis Kelliher, Jr., or Jack, as he is known, Deputy Sergeant at Arms for police services and congressional relations in House offices. How many of you know the true extent of his contribution to our work and the activity that takes place in and around this Chamber?

Please allow me to introduce a person who, to most of us, needs no introduction. Newer Members may not be as aware of this very special person that we honor today, a true gentleman the rest of us have come to respect and admire.

Jack began his career on the Hill as a member of the Capitol Police force soon after arriving from his native Boston. During his 8½ years on the force, Jack took part in thwarting two incidents which easily could have escalated into very serious breaches of House security.

After leaving the police force, Jack spent the next 12½ years in Chamber security, a unit under the direction of the House Sergeant at Arms charged with securing access to the House Chamber and the area immediately surrounding it. Most of us have come to know him in that capacity. More recently, Jack has held the titles of Assistant Sergeant at Arms and ''Keeper of the Mace,'' a position of trust he has maintained with honor and with his customary dignity and dependability.

His decision to leave us is received with mixed emotions. He is leaving on his own terms. Wouldn't we all want that to happen as well? Jack and his lovely wife, Nancy, have decided to make St. Augustine, Florida, their new home. It is a decision I'm certain their two children, John and Tara, support wholeheartedly. Free vacations in Florida for life.

It's always tough to say goodbye, Jack. We know we will miss you, but he has decided to leave, and we all wish him well. His parents, John and Elizabeth, would be so proud of him today, as we are for his embodiment of all that is good in the service of his country. Thank you, personally, Jack. And may God bless you and your family as you embark on this new adventure.

Now get out of this cold and run to the sun.

Madam Speaker, I yield to my good friend, the Honorable ZACH WAMP from Tennessee.

Mr. WAMP. I thank the gentleman.

Madam Speaker, it is indeed a privilege to rise on behalf of all Republicans in the House to honor Jack Kelliher. Jack, if you would please, while I'm speaking, I would ask for you to stand so that everyone in the House can see you.

I just want to say, Madam Speaker, briefly, when we honor you today, Jack, we honor all of the extraordinary support staff and professionals that serve the United States House of Representatives because you represent the finest of them through your 30 years of service. Most of us don't know, he is not just Jack Kelliher, he could be our Jack Bauer. He pulled, at one point as a Capitol police officer, a bomber from the gallery. He has a distinguished history of valor and patriotic service at the highest level. And he is the Keeper of the Mace and Assistant Sergeant at Arms.

Sitting next to him is Joyce Hamlett, who will take his place full time. She is my best friend here in the House. We love Joyce.

We are grateful for Jack. As was said, I have had more laughs in the last 15 years with Jack out on the balcony than just about anybody in the House. He is a good-natured man and a man of extraordinary commitment to our country. We will sorely miss him. In St. Augustine a number of years ago they bought a little place not on the beach but just off the beach. And it is where he goes to get away from us. And we won't follow you there, Jack. We want you and Nancy to enjoy those days and come back to see us. But know every minute how grateful every man and woman in the U.S. House of Representatives is for your service to our country, Jack. Thank you and we honor you.

ANNOUNCEMENT BY THE SPEAKER PRO TEMPORE

The SPEAKER pro tempore. Without objection, 5-minute voting will continue.

There was no objection.

PROVIDING FOR CONSIDERATION OF H.R. 1, AMERICAN RECOVERY AND REINVESTMENT ACT OF 2009

The SPEAKER pro tempore. The unfinished business is the vote on ordering the previous question on House Resolution 88, on which the yeas and nays were ordered.

The Clerk read the title of the resolution.

The SPEAKER pro tempore. The question is on ordering the previous question.

This will be a 5-minute vote.

The vote was taken by electronic device, and there were—yeas 244, nays 183, not voting 5, as follows:

[Roll No. 34]

YEAS—244

Abercrombie
Ackerman
Adler (NJ)
Altmire
Andrews
Arcuri
Baca
Baird
Baldwin
Barrow
Bean
Becerra
Berkley
Berman
Bishop (GA)
Bishop (NY)
Blumenauer
Boccieri
Boren
Boucher
Brady (PA)
Braley (IA)
Bright
Brown, Corrine
Butterfield
Capps
Capuano
Cardoza
Carnahan
Carney
Carson (IN)
Castor (FL)
Chandler
Childers
Clarke
Clay
Cleaver
Clyburn
Cohen
Connolly (VA)
Conyers
Cooper
Costa
Costello
Courtney
Crowley
Cuellar
Cummings
Dahlkemper
Davis (AL)
Davis (CA)
Davis (IL)
Davis (TN)
DeFazio
DeGette
Delahunt
DeLauro
Dicks
Dingell
Doggett
Donnelly (IN)
Doyle
Driehaus
Edwards (MD)
Edwards (TX)
Ellison
Ellsworth
Engel
Eshoo
Etheridge
Farr
Fattah
Filner
Foster
Frank (MA)
Fudge
Giffords
Gonzalez
Gordon (TN)
Grayson
Green, Al
Green, Gene
Griffith
Grijalva
Gutierrez
Hall (NY)
Halvorson
Hare
Harman
Hastings (FL)
Heinrich
Herseth Sandlin
Higgins
Himes
Hinchey
Hinojosa
Hirono
Hodes
Holden
Holt
Honda
Hoyer
Inslee
Israel
Jackson (IL)
Jackson-Lee (TX)
Johnson (GA)
Johnson, E. B.
Kagen
Kanjorski
Kaptur
Kennedy
Kildee
Kilpatrick (MI)
Kilroy
Kind
Kirkpatrick (AZ)
Kissell
Klein (FL)
Kosmas
Kratovil
Kucinich
Langevin
Larsen (WA)
Larson (CT)
Lee (CA)
Levin
Lewis (GA)
Lipinski
Loebsack
Lofgren, Zoe
Lowey
Luján
Lynch
Maffei
Maloney
Markey (CO)
Markey (MA)
Marshall
Massa
Matheson
Matsui
McCarthy (NY)
McCollum
McDermott
McGovern
McIntyre
McMahon
McNerney
Meek (FL)
Meeks (NY)
Michaud
Miller (NC)
Miller, George
Mitchell
Mollohan
Moore (KS)
Moore (WI)
Moran (VA)
Murphy (CT)
Murphy, Patrick
Murtha
Nadler (NY)
Napolitano
Neal (MA)
Nye
Oberstar
Obey
Olver
Ortiz
Pallone
Pascrell
Pastor (AZ)
Payne
Perlmutter
Perriello
Peters
Pingree (ME)
Polis (CO)
Pomeroy
Price (NC)
Rahall
Rangel
Reyes
Richardson
Rodriguez
Ross
Rothman (NJ)
Roybal-Allard
Ruppersberger
Rush
Ryan (OH)
Salazar
Sánchez, Linda T.
Sanchez, Loretta
Sarbanes
Schakowsky
Schauer
Schiff
Schrader
Schwartz
Scott (GA)
Scott (VA)
Serrano
Sestak
Shea-Porter
Sherman
Sires
Skelton
Slaughter
Smith (WA)
Snyder
Space
Speier
Spratt
Stark
Stupak
Sutton
Tanner
Tauscher
Teague
Thompson (CA)
Thompson (MS)
Tierney
Titus
Tonko
Towns
Tsongas
Van Hollen
Velázquez
Visclosky
Walz
Wasserman Schultz
Waters
Watson
Watt
Waxman
Weiner
Welch
Wexler
Wilson (OH)
Woolsey
Wu
Yarmuth

NAYS—183

Aderholt
Akin
Alexander
Austria
Bachmann
Bachus
Barrett (SC)
Bartlett
Barton (TX)
Berry
Biggert
Bilbray
Bilirakis
Bishop (UT)
Blackburn
Blunt
Boehner
Bonner
Bono Mack
Boozman
Boswell
Boustany
Boyd
Brady (TX)
Broun (GA)
Brown (SC)
Buchanan
Burgess
Burton (IN)
Buyer
Calvert
Camp
Campbell
Cantor
Cao
Capito
Carter
Cassidy
Castle
Chaffetz
Coble
Coffman (CO)
Cole
Conaway
Crenshaw
Culberson
Davis (KY)
Deal (GA)
Dent
Diaz-Balart, L.
Diaz-Balart, M.
Dreier
Duncan
Ehlers
Emerson
Fallin
Flake
Fleming
Forbes
Fortenberry
Foxx
Franks (AZ)
Frelinghuysen
Gallegly
Garrett (NJ)
Gerlach
Gingrey (GA)
Gohmert
Goodlatte
Granger
Graves
Guthrie
Hall (TX)
Harper
Hastings (WA)
Heller
Hensarling
Herger
Hill
Hoekstra
Hunter
Inglis
Issa
Jenkins
Johnson (IL)
Johnson, Sam
Jones
Jordan (OH)
King (IA)
King (NY)
Kingston
Kirk
Kline (MN)
Lamborn
Lance
Latham
LaTourette
Latta
Lee (NY)
Lewis (CA)
Linder
LoBiondo
Lucas
Luetkemeyer
Lummis
Lungren, Daniel E.
Mack
Manzullo
Marchant
McCarthy (CA)
McCaul
McClintock
McCotter
McHenry
McHugh
McKeon
McMorris Rodgers
Mica
Miller (FL)
Miller (MI)
Miller, Gary
Minnick
Moran (KS)
Murphy, Tim
Myrick
Neugebauer
Nunes
Olson
Paul
Paulsen
Pence
Peterson
Petri
Pitts
Platts
Poe (TX)
Posey
Price (GA)
Putnam
Radanovich
Rehberg
Reichert
Roe (TN)
Rogers (AL)
Rogers (KY)
Rogers (MI)
Rohrabacher
Rooney
Ros-Lehtinen
Roskam
Royce
Ryan (WI)
Scalise
Schmidt
Schock
Sensenbrenner
Sessions
Shadegg
Shimkus
Shuler
Shuster
Simpson
Smith (NE)
Smith (NJ)
Smith (TX)
Souder
Stearns
Sullivan
Taylor
Terry
Thompson (PA)
Thornberry
Tiahrt
Turner
Upton
Walden
Wamp
Westmoreland
Whitfield
Wilson (SC)
Wittman
Wolf
Young (FL)

NOT VOTING—5

Brown-Waite, Ginny
Melancon
Solis (CA)
Tiberi
Young (AK)

ANNOUNCEMENT BY THE SPEAKER PRO TEMPORE

The SPEAKER pro tempore (during the vote). There are 2 minutes remaining on this vote.

□ 1446

Mr. SHULER changed his vote from "yea" to "nay."

So the previous question was ordered.

The result of the vote was announced as above recorded.

The SPEAKER pro tempore. The question is on the resolution.

The question was taken; and the Speaker pro tempore announced that the ayes appeared to have it.

Mr. DREIER. Madam Speaker, on that I demand the yeas and nays.

The yeas and nays were ordered.

The SPEAKER pro tempore. This will be a 5-minute vote.

The vote was taken by electronic device, and there were—yeas 235, nays 191, not voting 6, as follows:

[Roll No. 35]

YEAS—235

Abercrombie
Ackerman
Adler (NJ)
Altmire
Andrews
Arcuri
Baca
Baird
Baldwin
Barrow
Bean
Becerra
Berkley
Berman
Bishop (GA)
Bishop (NY)
Blumenauer
Boccieri
Boren
Boucher
Brady (PA)
Braley (IA)
Brown, Corrine
Butterfield
Capps
Capuano
Cardoza
Carnahan
Carson (IN)
Castor (FL)
Chandler
Childers
Clarke
Clay
Cleaver
Clyburn
Cohen
Connolly (VA)
Conyers
Costa
Costello
Courtney
Crowley
Cuellar
Cummings
Dahlkemper
Davis (AL)
Davis (CA)
Davis (IL)
Davis (TN)
DeFazio
DeGette
Delahunt
DeLauro
Dicks
Dingell
Doggett
Doyle
Driehaus
Edwards (MD)
Edwards (TX)
Ellison
Ellsworth
Engel
Eshoo
Etheridge
Farr
Fattah
Filner
Foster
Frank (MA)
Fudge

Gonzalez
Gordon (TN)
Grayson
Green, Al
Green, Gene
Griffith
Grijalva
Gutierrez
Hall (NY)
Halvorson
Hare
Harman
Hastings (FL)
Heinrich
Herseth Sandlin
Higgins
Himes
Hinchey
Hinojosa
Hirono
Hodes
Holden
Holt
Honda
Hoyer
Inslee
Israel
Jackson (IL)
Jackson-Lee (TX)
Johnson (GA)
Johnson, E. B.
Kagen
Kaptur
Kennedy
Kildee
Kilpatrick (MI)
Kilroy
Kind
Kirkpatrick (AZ)
Kissell
Klein (FL)
Kosmas
Kucinich
Langevin
Larsen (WA)
Larson (CT)
Lee (CA)
Levin
Lewis (GA)
Lipinski
Loebsack
Lofgren, Zoe
Lowey
Luján
Lynch
Maffei
Maloney
Markey (CO)
Markey (MA)
Marshall
Matheson
Matsui
McCarthy (NY)
McCollum
McDermott
McGovern
McIntyre
McMahon
McNerney
Meek (FL)
Meeks (NY)
Melancon
Miller (NC)
Miller, George
Mitchell
Mollohan
Moore (KS)
Moore (WI)
Murphy (CT)
Murphy, Patrick
Murtha
Nadler (NY)
Napolitano
Neal (MA)
Nye
Oberstar
Obey
Olver
Ortiz
Pallone
Pascrell
Pastor (AZ)
Payne
Perlmutter
Perriello
Peters
Peterson
Pingree (ME)
Polis (CO)
Pomeroy
Price (NC)
Rahall
Rangel
Reyes
Richardson
Rodriguez
Ross
Rothman (NJ)
Roybal-Allard
Ruppersberger
Rush
Ryan (OH)
Salazar
Sánchez, Linda T.
Sanchez, Loretta
Sarbanes
Schakowsky
Schauer
Schiff
Schrader
Schwartz
Scott (GA)
Scott (VA)
Serrano
Sestak
Shea-Porter
Sherman
Sires
Skelton
Slaughter
Smith (WA)
Snyder
Space
Speier
Spratt
Stark
Stupak
Sutton
Tanner
Tauscher
Teague
Thompson (CA)
Thompson (MS)
Tierney
Titus
Tonko
Towns
Tsongas
Van Hollen
Velázquez
Visclosky
Walz
Wasserman Schultz
Waters
Watson
Watt
Weiner
Welch
Wexler
Wilson (OH)
Woolsey
Wu
Yarmuth

NAYS—191

Aderholt
Akin
Alexander
Austria
Bachmann
Bachus
Barrett (SC)
Bartlett
Barton (TX)
Berry
Biggert
Bilbray
Bilirakis
Bishop (UT)
Blackburn
Blunt
Boehner
Bonner
Bono Mack
Boozman
Boswell
Boustany
Boyd
Brady (TX)
Bright
Broun (GA)
Brown (SC)
Buchanan
Burgess
Burton (IN)
Buyer
Calvert
Camp
Campbell
Cantor
Cao
Capito
Carney
Carter
Cassidy
Castle
Chaffetz
Coble
Coffman (CO)
Cole
Conaway
Cooper
Crenshaw
Culberson
Davis (KY)
Deal (GA)
Dent
Diaz-Balart, L.
Diaz-Balart, M.
Donnelly (IN)
Dreier
Duncan
Ehlers
Emerson
Fallin
Flake
Fleming
Forbes
Fortenberry
Foxx
Franks (AZ)
Frelinghuysen
Gallegly
Garrett (NJ)
Gerlach
Giffords
Gingrey (GA)
Gohmert
Goodlatte
Granger
Graves
Guthrie
Hall (TX)
Harper
Hastings (WA)
Heller
Hensarling
Herger
Hill
Hoekstra
Hunter
Inglis
Issa
Jenkins
Johnson (IL)
Johnson, Sam
Jones
Jordan (OH)
Kanjorski
King (IA)
King (NY)
Kingston
Kirk
Kline (MN)
Kratovil
Lamborn
Lance
Latham
LaTourette
Latta
Lee (NY)
Lewis (CA)
Linder
LoBiondo
Lucas
Luetkemeyer
Lummis
Lungren, Daniel E.
Mack
Manzullo
Marchant
McCarthy (CA)
McCaul
McClintock
McCotter
McHenry
McHugh
McKeon
McMorris Rodgers
Mica
Michaud
Miller (FL)
Miller (MI)
Miller, Gary
Minnick
Moran (KS)
Moran (VA)
Murphy, Tim
Myrick
Neugebauer
Nunes
Olson
Paul
Paulsen
Pence
Petri
Pitts
Platts
Poe (TX)
Posey
Price (GA)
Putnam
Radanovich
Rehberg
Reichert
Roe (TN)
Rogers (AL)
Rogers (KY)
Rogers (MI)
Rohrabacher
Rooney
Ros-Lehtinen
Roskam
Royce
Ryan (WI)
Scalise
Schmidt
Schock
Sensenbrenner
Sessions
Shadegg
Shimkus
Shuler
Shuster
Simpson
Smith (NE)
Smith (NJ)
Smith (TX)
Souder
Stearns
Sullivan
Taylor
Terry
Thompson (PA)
Thornberry
Tiahrt
Turner
Upton
Walden
Wamp
Westmoreland
Whitfield
Wilson (SC)
Wittman
Wolf
Young (FL)

NOT VOTING—6

Brown-Waite, Ginny
Massa
Solis (CA)
Tiberi
Waxman
Young (AK)

ANNOUNCEMENT BY THE SPEAKER PRO TEMPORE

The SPEAKER pro tempore (during the vote). Two minutes are remaining on this vote.

□ 1458

Mr. ROSS changed his vote from ''nay'' to ''yea.''

So the resolution was agreed to.

The result of the vote was announced as above recorded.

A motion to reconsider was laid on the table.

MEMBERS OF THE HOUSE TO BE AVAILABLE TO SERVE ON INVESTIGATIVE SUBCOMMITTEES OF THE COMMITTEE ON STANDARDS OF OFFICIAL CONDUCT

The SPEAKER pro tempore. Pursuant to clause 5(a)(4)(a) of rule X, and the order of the House of January 6, 2009, the Chair announces the Speaker named the following Members of the House to be available to serve on investigative subcommittees of the Committee on Standards of Official Conduct for the 111th Congress:

Mr. GENE GREEN, Texas
Mr. SCOTT, Virginia

□ 1500

COMMUNICATION FROM THE REPUBLICAN LEADER

The SPEAKER pro tempore laid before the House the following communication from the Honorable JOHN A. BOEHNER, Republican leader:

CONGRESS OF THE UNITED STATES,
HOUSE OF REPRESENTATIVES,
Washington, DC, January 27, 2009.

Hon. NANCY PELOSI,
Speaker, U.S. Capitol,
Washington, DC.

DEAR SPEAKER PELOSI: Pursuant to clause 5(a)(4)(A) of rule X of the Rules of the House of Representatives, I designate the following Member to be available for service on the investigative subcommittee of the Committee on Standards of Official Conduct during the 111th Congress: The Honorable Doc Hastings of Washington.

Sincerely,

JOHN A. BOEHNER,
Republican Leader.

LILLY LEDBETTER FAIR PAY ACT OF 2009

Mr. GEORGE MILLER of California. Mr. Speaker, pursuant to H. Res. 87, I call up the Senate bill (S. 181) to amend title VII of the Civil Rights Act of 1964 and the Age Discrimination in Employment Act of 1967, and to modify the operation of the Americans with Disabilities Act of 1990 and the Rehabilitation Act of 1973, to clarify that a discriminatory compensation decision or other practice that is unlawful under such Acts occurs each time compensation is paid pursuant to the discriminatory compensation decision or other practice, and for other purposes, and ask for its immediate consideration in the House.

The Clerk read the title of the Senate bill.

The text of the Senate bill is as follows:

S. 181

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

SECTION 1. SHORT TITLE.

This Act may be cited as the ''Lilly Ledbetter Fair Pay Act of 2009''.

SEC. 2. FINDINGS.

Congress finds the following:

(1) The Supreme Court in Ledbetter v. Goodyear Tire & Rubber Co., 550 U.S. 618 (2007), significantly impairs statutory protections against discrimination in compensation that Congress established and that have been bedrock principles of American law for decades. The Ledbetter decision undermines those statutory protections by unduly restricting the time period in which victims of discrimination can challenge and recover for discriminatory compensation decisions or other practices, contrary to the intent of Congress.

(2) The limitation imposed by the Court on the filing of discriminatory compensation claims ignores the reality of wage discrimination and is at odds with the robust application of the civil rights laws that Congress intended.

(3) With regard to any charge of discrimination under any law, nothing in this Act is intended to preclude or limit an aggrieved person's right to introduce evidence of an unlawful employment practice that has occurred outside the time for filing a charge of discrimination.

(4) Nothing in this Act is intended to change current law treatment of when pension distributions are considered paid.

SEC. 3. DISCRIMINATION IN COMPENSATION BECAUSE OF RACE, COLOR, RELIGION, SEX, OR NATIONAL ORIGIN.

Section 706(e) of the Civil Rights Act of 1964 (42 U.S.C. 2000e–5(e)) is amended by adding at the end the following:

''(3)(A) For purposes of this section, an unlawful employment practice occurs, with respect to discrimination in compensation in violation of this title, when a discriminatory compensation decision or other practice is adopted, when an individual becomes subject to a discriminatory compensation decision or other practice, or when an individual is affected by application of a discriminatory compensation decision or other practice, including each time wages, benefits, or other compensation is paid, resulting in whole or in part from such a decision or other practice.

''(B) In addition to any relief authorized by section 1977A of the Revised Statutes (42

U.S.C. 1981a), liability may accrue and an aggrieved person may obtain relief as provided in subsection (g)(1), including recovery of back pay for up to two years preceding the filing of the charge, where the unlawful employment practices that have occurred during the charge filing period are similar or related to unlawful employment practices with regard to discrimination in compensation that occurred outside the time for filing a charge.''.

SEC. 4. DISCRIMINATION IN COMPENSATION BECAUSE OF AGE.

Section 7(d) of the Age Discrimination in Employment Act of 1967 (29 U.S.C. 626(d)) is amended—

(1) in the first sentence—

(A) by redesignating paragraphs (1) and (2) as subparagraphs (A) and (B), respectively; and

(B) by striking ''(d)'' and inserting ''(d)(1)'';

(2) in the third sentence, by striking ''Upon'' and inserting the following:

''(2) Upon''; and

(3) by adding at the end the following:

''(3) For purposes of this section, an unlawful practice occurs, with respect to discrimination in compensation in violation of this Act, when a discriminatory compensation decision or other practice is adopted, when a person becomes subject to a discriminatory compensation decision or other practice, or when a person is affected by application of a discriminatory compensation decision or other practice, including each time wages, benefits, or other compensation is paid, resulting in whole or in part from such a decision or other practice.''.

SEC. 5. APPLICATION TO OTHER LAWS.

(a) AMERICANS WITH DISABILITIES ACT OF 1990.—The amendments made by section 3 shall apply to claims of discrimination in compensation brought under title I and section 503 of the Americans with Disabilities Act of 1990 (42 U.S.C. 12111 et seq., 12203), pursuant to section 107(a) of such Act (42 U.S.C. 12117(a)), which adopts the powers, remedies, and procedures set forth in section 706 of the Civil Rights Act of 1964 (42 U.S.C. 2000e–5).

(b) REHABILITATION ACT OF 1973.—The amendments made by section 3 shall apply to claims of discrimination in compensation brought under sections 501 and 504 of the Rehabilitation Act of 1973 (29 U.S.C. 791, 794), pursuant to—

(1) sections 501(g) and 504(d) of such Act (29 U.S.C. 791(g), 794(d)), respectively, which adopt the standards applied under title I of the Americans with Disabilities Act of 1990 for determining whether a violation has occurred in a complaint alleging employment discrimination; and

(2) paragraphs (1) and (2) of section 505(a) of such Act (29 U.S.C. 794a(a)) (as amended by subsection (c)).

(c) CONFORMING AMENDMENTS.—

(1) REHABILITATION ACT OF 1973.—Section 505(a) of the Rehabilitation Act of 1973 (29 U.S.C. 794a(a)) is amended—

(A) in paragraph (1), by inserting after ''(42 U.S.C. 2000e–5 (f) through (k))'' the following: ''(and the application of section 706(e)(3) (42 U.S.C. 2000e–5(e)(3)) to claims of discrimination in compensation)''; and

(B) in paragraph (2), by inserting after ''1964'' the following: ''(42 U.S.C. 2000d et seq.) (and in subsection (e)(3) of section 706 of such Act (42 U.S.C. 2000e–5), applied to claims of discrimination in compensation)''.

(2) CIVIL RIGHTS ACT OF 1964.—Section 717 of the Civil Rights Act of 1964 (42 U.S.C. 2000e–16) is amended by adding at the end the following:

''(f) Section 706(e)(3) shall apply to complaints of discrimination in compensation under this section.''.

(3) AGE DISCRIMINATION IN EMPLOYMENT ACT OF 1967.—Section 15(f) of the Age Discrimination in Employment Act of 1967 (29 U.S.C. 633a(f)) is amended by striking ''of section'' and inserting ''of sections 7(d)(3) and''.

SEC. 6. EFFECTIVE DATE.

This Act, and the amendments made by this Act, take effect as if enacted on May 28, 2007 and apply to all claims of discrimination in compensation under title VII of the Civil Rights Act of 1964 (42 U.S.C. 2000e et seq.), the Age Discrimination in Employment Act of 1967 (29 U.S.C. 621 et seq.), title I and section 503 of the Americans with Disabilities Act of 1990, and sections 501 and 504 of the Rehabilitation Act of 1973, that are pending on or after that date.

The SPEAKER pro tempore (Mr. HOLDEN). Pursuant to House Resolution 87, the gentleman from California (Mr. GEORGE MILLER) and the gentleman from California (Mr. MCKEON) each will control 30 minutes.

The Chair recognizes the gentleman from California (Mr. GEORGE MILLER).

GENERAL LEAVE

Mr. GEORGE MILLER of California. Mr. Speaker, I ask unanimous consent that all Members may have 5 legislative days in which to revise and extend their remarks and insert extraneous material on S. 181.

The SPEAKER pro tempore. Is there objection to the request of the gentleman from California?

There was no objection.

Mr. GEORGE MILLER of California. Mr. Speaker, I yield myself 5 minutes.

Mr. Speaker, today the House of Representatives meets to give final approval to the Lilly Ledbetter Fair Pay Act and send it to President Obama for his signature. What a difference a new Congress and a President make.

Nondiscrimination in the workplace must be a sacred American principle. Workers should be paid based upon their merits, not an employer's prejudices. Yet, more than 40 years after the passage of the Civil Rights Act of 1964, the Supreme Court dramatically turned back the clock on this bedrock principle. Instead of abiding by decades of long-standing law, a narrow majority of the Supreme Court decided to commit legal jujitsu to satisfy a narrow ideological agenda. The Supreme Court simply told bad employers that to escape responsibility for pay discrimination all they need to do is keep it hidden for the first 180 days.

The Ledbetter ruling has already dramatically impacted how Americans can remedy discrimination. It has been cited in hundreds of cases over the past 19 months since the ruling. Not only have pay discrimination cases been adversely impacted, but even fair housing protections and title IX complaints. The Supreme Court sent these lower courts backwards down the wrong path, and today the Congress will correct that course by passing this bill.

The Lilly Ledbetter Fair Pay Act would simply reset the law as businesses, most courts, employers and employees and the EEOC had understood it before the Court's 2007 ruling. Under S. 181, every paycheck or other compensation resulting, in whole or part, from an earlier discriminatory pay decision or other practice would constitute a violation of title VII. In other words, if an employer keeps issuing discriminatory paychecks, that employer will keep restarting the clock for filing charges. That's only fair. As long as workers file their charges, as Lilly Ledbetter herself did, within 180 days of a discriminatory paycheck, the charges will be considered timely. The legislation also clarifies that an employee is entitled to up to 2 years backpay as provided in title VII already.

Finally, S. 181 ensures that these simple reforms extend to the Age Discrimination in Employment Act, the Americans with Disabilities Act and the Rehabilitation Act to provide these same protections for victims of age and disability discrimination.

Correcting pay discrimination poses significant challenges to workers, made all the harder with the Supreme Court's Ledbetter decision. This is best illustrated by Lilly Ledbetter's own words from an Education and Labor Committee hearing in 2007: ''What happened to me is not only an insult to my dignity, but it had real consequences for my ability to care for my family. Every paycheck I received, I got less than what I was entitled to under the law.

''The Supreme Court said that this didn't count as illegal discrimination, but it sure feels like discrimination when you are on the receiving end of that smaller paycheck and trying to support your family with less money than the men are getting for doing the same job. And according to the Court, if you don't figure things out right away, the company can treat you like a second-class citizen for the rest of your career. This isn't right.''

I agree with Lilly Ledbetter: what happened to her wasn't right.

Unfortunately, it's too late for Lilly Ledbetter to receive justice. But today, thanks to Lilly's incredible courage and perseverance, and thanks to millions of Americans making their voices heard, Congress will reject this ruling for the millions of Americans suddenly now subject to legal discrimination.

The Ledbetter v. Goodyear Supreme Court ruling was a painful step backwards for civil rights in this country. Today, the House will correct this injustice and send President Obama his first bill to sign into law. All victims of discrimination are entitled to justice, and I urge my colleagues to support the Lilly Ledbetter Fair Pay Act.

Mr. Speaker, I reserve the balance of my time.

Mr. MCKEON. Mr. Speaker, I yield myself such time as I may consume.

Mr. Speaker, the bill before us was the first substantive piece of legislation considered by the 111th Congress. In a matter of days, it could be one of the first substantive measures signed into law by the 44th President of the United States. And despite all the promises of openness and bipartisanship, at the end of the day it will have been considered not once, not twice,

but three separate times in the House without the opportunity to debate a single Republican amendment. It didn't have to be this way.

This legislation is supposed to be about protecting workers—and especially women—from discrimination in the workplace. Like my colleagues on both sides of the aisle, I am strongly opposed to discrimination of any type, be it gender discrimination, racial discrimination, or any other type of discrimination inside or outside the workplace. Rooting out such discrimination is a bipartisan goal, and I cannot think of a single reason why it is not being given a bipartisan debate.

The arguments on both sides of this bill are clear, and they have been debated on this floor before. For my part, I believe that enriching trial lawyers is simply the wrong way to ensure a fairer, more just workplace; and clearly that's what this bill will do. By eliminating the statute of limitations, the bill invites more and costlier lawsuits. We're talking about economic stimulus this week, so it's only fitting that we begin with an economic stimulus package for trial lawyers.

But for me, Mr. Speaker, the controversy we face today is not just the underlying legislation, although it certainly is controversial. No, the controversy today is the stunning lack of openness being shown by a majority that seems intent on wielding the heavy hand of power.

Less than 24 hours ago, the Rules Committee held an emergency meeting in order to bring this bill to the floor today. As I understand it, the job of the Rules Committee is to consider potential amendments and decide which of those will receive a vote by the full House. After 2 years of watching Republican amendments routinely discarded without a vote, I wasn't surprised that the majority brought this bill to the floor under a closed rule. What surprised me was that they didn't even bother to keep up the illusion that they might make one of our proposals in order. In fact, the Rules Committee did not even set a deadline for amendments on this bill, so certain were they that not a single proposal would be worthy of consideration.

For the record, I offered two amendments that were refused by the majority, two amendments that I believe were consistent with the majority's stated goals of preventing wage discrimination and overturning the Ledbetter decision. At the same time, I believe those amendments would have helped to avert at least some of the unintended consequences this legislation is sure to spawn. I did not ask the majority to guarantee that my amendments would pass; I simply asked for a debate among the Members of good will who can argue the merits and vote as they see fit. I was denied.

Mr. Speaker, workplace discrimination is a serious issue and it deserves a serious debate. What a disappointment this is.

Mr. Speaker, I reserve the balance of my time.

Mr. GEORGE MILLER of California. Mr. Speaker, I yield 2 minutes to the gentleman from New Jersey (Mr. ANDREWS).

(Mr. ANDREWS asked and was given permission to revise and extend his remarks.)

Mr. ANDREWS. Mr. Speaker, I would like to thank my friend for yielding.

Lilly Ledbetter went to work in a factory in Alabama. She was one of the best at her job as a supervisor. She routinely won awards for being best at what she did. Late in her career, when she retired, she found out that she was systemically paid about 30 percent less than the men next to whom she worked. She filed suit in Federal court. The company said she wasn't underpaid because she was a woman, she was underpaid for other reasons. A jury of her peers heard her case and the employer's case, and she won unanimously.

The case went up through the United States Supreme Court. The United States Supreme Court, in the case that now bears her name, unfortunately, said that because she didn't file suit when she didn't know that she had been discriminated against, she couldn't recover. So because the employer was successful at hiding the discrimination for a period of time, she couldn't recover.

Lilly Ledbetter could be any one of our mothers, daughters, sisters, wives, or neighbors. What was done to her is an affront not only to her, but to the law. Women should not confront this law as a trap to deny them their rights. The law should not be a vessel of injustice. And we should not wait to pass this bill, put it on President Obama's desk, and make it the law of the land today.

Mr. MCKEON. Mr. Speaker, I'm happy to yield at this time to the gentleman from Minnesota, the ranking member of the subcommittee that has jurisdiction, such time as he may consume, Mr. KLINE.

Mr. KLINE of Minnesota. I thank the gentleman for yielding.

Mr. Speaker, I rise today to oppose, yet again, seriously flawed legislation. As you know, we passed this bill just 2 weeks ago, and it is before us once again.

Unfortunately, the flaws and the potential damage to our civil rights and our economy remain. The enthusiastic supporters of the Ledbetter Act continue to beat the drum, claiming we are simply voting on a straightforward bill to reverse a Supreme Court decision involving discrimination in the workplace. Despite the passage of time and continued requests by my colleagues and I in the minority party, however, they are no closer to telling the whole story.

Mr. Speaker, the bill before us would reverse a court decision for the benefit of Lilly Ledbetter, but perhaps more significantly, it would dismantle the long-standing statute of limitations established by the 1964 Civil Rights Act. And this is the reason that the Supreme Court ruled the way they did. They held that the statute of limitations is an important part of our society, of our government, of our way of doing business in this country, and we need to preserve that statute of limitations.

While I can understand the pain that Ms. Ledbetter felt, can you imagine as an employer trying to keep track of decisions going back 20 years and more and trying to defend those in a court? It is not practical, it's not fair.

This bill would set into motion unintended consequences that its supporters simply are not willing to acknowledge, including radically increasing the opportunity for frivolous and abusive litigation. This is, indeed, another boon for trial lawyers.

Further, this bill would also permit individuals to seek damages against employers for whom they never worked by allowing family members and others who were never directly subjected to discrimination to become plaintiffs even after the worker in question is deceased.

Just this weekend our new President said our economic troubles are worsening. We should heed his caution and recognize that in such a climate we cannot afford to enable endless litigation and potentially staggering record-keeping requirements on employers. We are trying to get employers to create more jobs to hire more people.

We must also be wary of the devastating effect this bill could have on pensions by exposing employers to decades-old discrimination claims that they have little—or I would argue no—ability to defend. This legislation could risk the retirement security of many hardworking Americans.

Mr. Speaker, it's very clear that this legislation amounts to a significant change in our civil rights laws. And despite a delay, we have had no more debate or deliberation, leaving unanswered many relevant questions that deserve to be addressed through the normal legislative process.

My concerns and unanswered questions can only lead me to say that the Ledbetter bill makes for bad policy created through a poor legislative process.

I urge my colleagues again to vote ''no.''

Mr. GEORGE MILLER of California. I yield myself 15 seconds just to say, according to the analysis done by the Congressional Budget Office, there is no new cost associated with this legislation because it creates no new cause of action, and no anticipated increase in litigation in spite of the remarks of the gentleman from the other side of the aisle. And that's what the independent analysis shows of this legislation.

I would like now to yield 2 minutes to the gentlewoman from California (Ms. WOOLSEY), the subcommittee Chair of the committee of jurisdiction.

□ 1515

Ms. WOOLSEY. Mr. Speaker, I don't know about the rest of you, but I've come to think of Lilly Ledbetter as my girlfriend. I mean she has been so important to all of us and to women and to the issue on this landmark day that we have today for women and American workers and their families because this bill does tell the whole story. And at the end of this debate, we will be one step closer to overturning an unjust Supreme Court decision, a decision that offered a restricted and decidedly unrealistic reading of when a discriminatory action regarding compensation actually occurs.

Good for the Senate for joining us in passing the Lilly Ledbetter Fair Pay Act and with an overwhelming bipartisan vote at that, giving us the go-ahead to do exactly the right thing.

Sadly, Lilly Ledbetter will not be affected by our actions, but we know that she has paved the way for others who will benefit from her bravery and will have recourse when they are paid less than their male counterparts.

The President understands that equality and fairness are crucial in a free society. He understands that more than 40 years after the passage of the Equal Pay Act, women are still paid an average of just 78 cents for every dollar a man earns.

I urge my colleagues to pass this bill, and I look forward to President Obama's signing it into action, into law, the Lilly Ledbetter Fair Pay Act.

Mr. MCKEON. Mr. Speaker, I am happy to yield at this time to the gentleman from California, a new member of the committee, Mr. MCCLINTOCK, such time as he may consume.

Mr. MCCLINTOCK. I thank the gentleman for yielding.

Mr. Speaker, much has been said about the chilling effect this legislation will have on our economy because of the endless lawsuits it makes possible, including for grievances that may stretch back 30 years or more, and I certainly share those concerns.

But I want to express a deeper concern with this legislation. I believe it hurts the cause of equality and opportunity in the workplace by making it more difficult for the people who need jobs and who most want those jobs to actually get them.

Any person's labor is worth exactly what that person's willing to receive and what another is willing to pay. The decisions that are made by both the employee and the employer are unique to those people and to those circumstances. Someone passionately wanting to break into a field, for example, or to stay in a region or to shorten a commute or an infinite variety of other considerations may be willing to accept less in order to gain those non-economic advantages than someone who is equally qualified but indifferent to those advantages. Imposing rigid one-size-fits-all requirements into the relationship between an employee and an employer reduces the employee's freedom to negotiate for the best set of overall conditions for his or her own unique circumstances. And lest we forget, when all else fails, there is a fail-safe and absolute protection: It's the word ''no.'' No, the pay is not acceptable; no, the conditions are not satisfactory; no, I can get a better job elsewhere.

Mr. Speaker, freedom works, and it's time that we put it back to work.

Mr. GEORGE MILLER of California. Mr. Speaker, I yield 2 minutes to the gentleman from Illinois (Mr. HARE), a member of the committee.

Mr. HARE. Mr. Speaker, I am happy to rise once again in strong support of the Lilly Ledbetter Fair Pay Act, and I commend the Senate for passing the legislation so quickly and commend the leadership of this House, Chairman MILLER, for bringing it to the floor for its final vote.

It's remarkable that the potential first piece of legislation signed into law by President Obama this year is one that will help victims of pay discrimination.

Last year I had the privilege of hearing Mrs. Ledbetter testify before the Education and Labor Committee. After 19 years, 19 years as a Goodyear employee, Mrs. Ledbetter discovered she was paid significantly less than every single one of her male counterparts. She took her case all the way to the Supreme Court where it was thrown out on a technicality. She filed her paperwork too late. Unfortunately, Mrs. Ledbetter had no idea this was even happening to her. I suppose the Supreme Court decided that Mrs. Ledbetter was a mind reader.

This Fair Pay Act would correct this wrong by clarifying that every paycheck resulting from a discriminatory pay decision constitutes a violation of the Civil Rights Act and employees have 180 days after each discriminatory paycheck to file a suit.

Again, I am pleased Congress is acting swiftly to correct a disastrous Supreme Court ruling that allows bad employers to discriminate against their employees as long as they hide it for 180 days. I urge all of my colleagues to vote for S. 181 so we can promptly send it to the President's desk.

Thank you, Lilly Ledbetter.

Mr. MCKEON. Mr. Speaker, I have no further requests for time, and I reserve the balance of my time.

Mr. GEORGE MILLER of California. Mr. Speaker, I yield 3 minutes to the gentlewoman from Connecticut (Ms. DELAURO), a champion of fair pay and equal pay for women.

Ms. DELAURO. Mr. Speaker, I rise in support of the Lilly Ledbetter Fair Pay Act. I congratulate Chairman MILLER, the driving force behind this effort, who, with great tenacity and great leadership, has given this issue the priority that it deserves.

Together, with his colleagues on the Education and Labor Committee and our dedicated partners in the Senate, Chairman MILLER has brought gender-based pay discrimination front and center in this Congress, and as a result, we finally have the opportunity to send powerful legislation to the President's desk today.

We are here because Lilly Ledbetter got shortchanged, shortchanged by her employer, the perpetrator of consistent pay discrimination lasting years; and shortchanged again by the Supreme Court.

A jury found that, yes, Lilly Ledbetter had been discriminated against by her employer. They awarded her $3.8 million in back pay and damages. But then under Title VII, this award was reduced to $360,000, and ultimately zero when the Supreme Court ruled 5–4 against her in 2007, drastically limiting women's access to seek justice for pay discrimination based on gender, requiring workers to file a pay discrimination claim within a 6-month period only, regardless of how long the pay inequity goes on. When women still earn only about 78 percent of what men earn, this ruling has essentially rolled back efforts to ensure equal pay and left women with little remedy.

As Justice Ginsburg suggested in her dissent, Congress has an obligation to correct the court's decision. That is why we must pass the Lilly Ledbetter Fair Pay Act, clearly stating that Title VII statute of limitations runs from the date a discriminatory wage is actually paid, not simply some earliest possible date which has come and gone long ago. Instead, you would be able to challenge discriminatory paychecks as long as you continue to receive them.

But we cannot stop there. I strongly urge the Senate to build on this vital foundation. Take up the Paycheck Fairness Act, which this House passed in tandem with the Lilly Ledbetter Fair Pay Act, to face gender discrimination head on and eliminate the systemic discrimination faced by women.

Mr. Speaker, that process starts in earnest. With the Lilly Ledbetter Fair Pay Act, we can begin to ensure pay equity. We can help families gain the resources they need to give their children a better future, the great promise of our American Dream. Let us make good on that promise, pass this bill. Let us make sure that women who face the discrimination that Lilly Ledbetter faced have the right and the tools to fight against it.

Mr. MCKEON. Mr. Speaker, I continue to reserve the balance of my time.

Mr. GEORGE MILLER of California. Mr. Speaker, I yield 2 minutes to the gentlewoman from New York (Mrs. MALONEY).

Mrs. MALONEY. Mr. Speaker, first of all, I congratulate the Democratic leadership on moving this bill forward, George, Rosa, Lynn, so many who worked so hard on it.

The Lilly Ledbetter Fair Pay Act stands for equal pay for equal work. This bill overrules the outrageous Supreme Court decision which rejected Ms. Ledbetter's pay discrimination

case because she had not sued quickly enough to end an injustice. An injustice is an injustice, and it should not have a time limit on correcting it.

Forty years after the passage of the Equal Pay Act and title VI, statistics show that women continue to be paid less than their male colleagues. When I entered the workforce, women were paid 59 cents to every dollar a man earned. Today it's up to 78 cents. A disparity which costs women anywhere from $400,000 to $2 million in lost wages over a lifetime. This is terribly unfair.

In the midst of the dire economic reports of these last weeks and months, today this Congress can take a step towards helping women and families who are struggling by passing the Lilly Ledbetter Fair Pay Act. There are too many Lilly Ledbetters in our country, and when you discriminate against a woman, you discriminate against her family, her husband, her children. Passing the Fair Pay Act sends a strong message of fairness and equity to women and families everywhere.

This may be the first bill that gets to President Obama's desk. It shows a change and a shift of priorities between a Democratic Congress and the one we replaced. I congratulate all my colleagues and the Democratic leadership for moving it forward.

Mr. GEORGE MILLER of California. Mr. Speaker, I yield 2 minutes to the gentlewoman from the District of Columbia, Congresswoman ELEANOR HOLMES NORTON.

Ms. NORTON. Kudos to Mr. MILLER, who would not give up on this bill, for his early hearings and this early consideration now, and to the Speaker and to our leadership for this early floor time just when women need us most when the economy is indeed punishing them enough.

I hold here a settlement agreement that is perhaps the best evidence of why we need this bill. The first case brought under the so-called Congressional Accountability Act, that was the act of about 10 or 15 years ago that said that the Congress had to abide by the same rules and rights as workers have in the private sector. This suit was brought by 300 current and former female custodians. All of them were African American women. They accused the House of Representatives and the Senate of paying them $1 less than men who had comparable jobs. After a long period of depositions and discovery, where a class was approved, the Congress paid $2.5 million to these women.

Like Lilly Ledbetter, most of them had worked for many years as female custodians in the House and the Senate. Like Lilly Ledbetter, they had no idea they were being paid less than the men who did the same jobs, collecting our trash, if you will, in our offices. The way they found out and the only way they found out is that they were represented by a great union, the American Federation of Government Employees, who represented them in court and got the settlement. I remember going over to the Ford building and helping to hand out the checks. Many of the women, like Lilly Ledbetter, were near retirement. And this settlement agreement shows that those women, unlike Lilly Ledbetter, indeed received funds from the United States Congress under the Equal Pay Act. That is how the act was enforced when I chaired the Equal Employment Opportunity Commission. That is how it was enforced before I chaired the Equal Employment Opportunity Commission. And that is how we return it today.

I would like to include this settlement agreement in the RECORD.

UNITED STATES DISTRICT COURT FOR THE DISTRICT OF COLUMBIA

PATRICIA HARRIS, et al., Plaintiffs, v. OFFICE OF THE ARCHITECT OF THE CAPITOL, Defendant.

C.A. No. 97–1658 (EGS), Filed July 25, 2001, Nancy Mayer Whittington, Clerk, U.S. District Court.

SETTLEMENT AGREEMENT

This Settlement Agreement is entered into this 20th day of July 2001, between plaintiffs Patricia Harris, *et al.* as class representatives, (hereinafter collectively referred to as ''plaintiffs''), on the one hand, and defendant the Office of the Architect of the Capitol (hereinafter referred to as the ''Architect''), on the other hand, for the purpose of finally resolving all aspects of this class action. In the interest of avoiding the expense, delay, and inconvenience of further litigation of the issues raised in this action, and in consideration of the mutual promises, covenants, and obligations in this Agreement, and for good and valuable consideration, the receipt and adequacy of which are acknowledged, plaintiffs and defendant, through their undersigned counsel, hereby stipulate and agree as follows, subject to the approval of the Court.

I. DEFINITIONS AND GENERAL PROVISIONS

A. ''Agreement'' and ''Settlement Agreement''—These terms refer to this Settlement Agreement and all attachments thereto.

B. ''Effective date of this Agreement''—This term refers to the date of Final Court Approval of this Agreement.

C. ''Final Court Approval''—This term refers to the latest of the following dates, after the conduct of a Fairness Hearing and approval of this Agreement by the Court: the date on which any and all appeals from any objections to the Agreement have been dismissed, a final appellate decision upholding approval has been rendered, or the time for taking an appeal has expired without an appeal having been taken. If there are no objections to the Agreement, this term refers to that date, following the conduct of the Fairness Hearing, on which the Court grants final approval of the Agreement.

D. ''Preliminary Court approval''—This term refers to that date, following submission of this Agreement to the Court by the parties but prior to the conduct of a Fairness Hearing, on which the Court grants initial approval of the Agreement.

E. The ''parties' execution of this Settlement Agreement''—This term refers to the date on which all parties have signed the Agreement.

F. ''Plaintiffs'', ''plaintiff class'' or ''class members''—These terms refer to the class of plaintiffs certified by the District Court on February 29, 2000:

''All women custodial workers employed by the Architect of the Capitol on or after January 23, 1996, the effective date of the Congressional Accountability Act, including those who terminated their employment or retired after that date and who were hired after that date, with respect to the causes of action alleged herein as violative of Section 201(a) and (b) of the Congressional Accountability Act, 2 U.S.C. §1311(a) & (b), which incorporate the rights and remedies of Title VII of the Civil Rights Act of 1964, 42 U.S.C. §2000e–2 and other sections cited therein, and make them applicable to the defendant and the legislative branch generally.''

G. ''Plaintiffs' counsel'' and ''counsel for plaintiffs''—These terms refer to plaintiffs' class counsel, Beins, Axelrod & Kraft, P.C. ''Counsel for the parties'' refers to counsel for the plaintiff class and counsel for the defendant.

H. ''Active Class Members'' are the class members who are currently employed with the Architect as of the date of the parties' execution of this Settlement Agreement who elect not to retire.

I. ''Inactive Class Members'' are those class members who, as of the date of the parties' execution of this Agreement, have been terminated or retired, died, resigned or been promoted out of the class. The retired class members who are part of the Inactive Class Members are those class members who retired before April 9, 2001.

J. ''Retirement Eligible Class Members'' are those class members who had not retired as of April 9, 2001, but who 1) are retirement eligible (by qualifying age and years of service), and 2) elect to retire pursuant to the terms of Section II (B) of this Agreement.

K. The term ''night custodial workers'' refers to female employees who work during the night shift.

L. The term ''day custodial workers'' refers to female employees who work during the day shift.

M. The Office of Personnel Management will be hereinafter referred to as ''OPM.''

N. The Congressional Accountability Act will be hereinafter referred to as the ''CAA.''

II. MONETARY RELIEF

A. Active Class Members and Inactive Class Members

1. Pursuant to Section 415 of the CAA, a lump sum payment from the Department of Treasury will be made to plaintiffs' counsel (to be calculated as set forth in paragraph two below) to distribute to the Active Class Members and the Inactive Class Members at plaintiffs' counsel's discretion, except that those Inactive Class members who were terminated for cause will not receive a payment for any time period beyond the date they were terminated.

2. The lump sum payment for distribution by plaintiffs' counsel to the Active Class Members and Inactive Class Members will be based on the sum of two calculations: 1) the number of Active Class Members multiplied by $7,000 and 2) the number of Inactive Class Members multiplied by $4,000. The lump sum payment for distribution to the Active Class Members will be reduced by $7,000 for each Active Class Member who is retirement eligible and elects to retire. Any money paid under this subparagraph that has not been distributed to class members two years after Final Court Approval of the settlement will be remitted back to the Office of Compliance to be returned to the Department of Treasury.

B. Retirement Eligible Class Members

1. Pursuant to Section 415 of the CAA, an individual lump payment from the Department of Treasury will be made in the amount of $20,000 to each of the Retirement Eligible Class Members.

2. Only those class members who: a) are eligible to retire as of April 9, 2001 or become eligible to retire during the period of April 9, 2001 through September 30, 2001, and b) who

actually retire during the period of April 9, 2001, through September 30, 2001, may retire during this period and receive the individual lump sum payment described in paragraph B.1 above. All class members who are eligible to retire during this period will have 60 days after receiving the class notice (as described more fully below) to designate whether they will retire. A class member's decision under this paragraph is irrevocable unless the Court disapproves this Agreement.

3. In order to be eligible for the individual lump sum payment described in paragraph B.1 above, each class member who chooses to retire before Final Court Approval of the Settlement and actually begins her retirement before Final Court Approval must agree in writing, and will acknowledge in writing, as follows:

''If the Court does not finally approve the Settlement Agreement, I will not receive the $20,000 individual lump sum payment or have any further recourse against the Architect, except to continue as a plaintiff in *Harris v. Office of the Architect of the Capitol,* Civil Action No. 97–16587

C. Payment Terms

1. Pursuant to Section 415 of the CAA, payments under Sections II and III of this Settlement Agreement shall be made from the Department of Treasury. Payments shall be made to class members whom the parties have identified and who have exhausted the counseling and mediation procedures of the CAA. Class members identified after the execution of this Agreement will be required to exhaust the counseling and mediation procedures of the CAA in order to be eligible for the relief described in Sections II and III of this Settlement Agreement.

2. Plaintiffs' counsel and the Retirement Eligible Class Members shall receive the payments as set forth in sections A and B above within sixty (60) days after Final Court Approval of the Settlement.

3. Nothing in this Agreement shall increase or decrease the amount oftaxes owed by the plaintiffs under the tax code and other applicable provisions of law.

D. Attorneys' Fees and Costs

1. Pursuant to Section 415 of the CAA, a payment of $290,000 from the Department of Treasury shall be made to plaintiffs' counsel, which represent plaintiffs' counsels' costs and fees at the applicable *Laffey* rates as of August 31, 2000. This payment will be made within a reasonable time period. Defendant agrees to assist in expediting this payment by taking whatever steps are reasonably possible in accordance with established procedures of the United States Attorney's Office. In addition, pursuant to Section 415 of the CAA a one-time lump sum payment from the Department of Treasury shall be made to plaintiffs' counsel for reasonable fees and costs after August 31, 2000 at the applicable *Laffey* rates, based on monthly invoices to be submitted to and approved by Defendant's counsel. Plaintiffs' counsel will submit an invoice for each month in which services are performed after August 31, 2000 following the parties' execution of this Agreement

2. Pursuant to Section 415 of the CAA, a payment from the Department of Treasury in the amount of $5,235.00 to plaintiffs' counsel for plaintiffs' expert fees.

3. Defendant shall pay the mediator in this matter, Linda Singer, the sum of $9,484.22, which is the amount owed for her services as of November 15, 2000. Defendant agrees to pay Ms. Singer's additional fees if the parties require her services after November 15, 2000, not to exceed $16,000. To the extent plaintiffs have paid any mediation fees to Ms. Singer, defendant will reimburse plaintiffs for those fees in lieu of Ms. Singer.

III. NON-MONETARY RELIEF

A. Prospectve Promotions With Pay for Active Class Members

Within sixty days after Final Court Approval of this Agreement, all Active Class Members will receive a promotion. The promotion will be retroactive to the date of Final Court Approval ofthe Settlement. All Active Class Members who are night custodial workers will be upgraded from a WG–2 to a WG–3 and will be paid at the WG–3 level at their current step. All Active Class Members who are day custodial workers will be upgraded from a WG–2 or WG–3 to a WG–4 and will be paid at the WG–4 level at their current step. No Retirement Eligible Class Member will receive the promotion referred to in this paragraph A. All Active Class Members who are night custodial workers will retain their night differential.

B. Retroactive Promotions

Within six months of the date of Final Court Approval, the Architect will retroactively promote all class members as of January 23, 1996, the effective date of the CAA. All night custodial workers will be retroactively promoted to a WG–3 at the step they would have held if they had been a WG–3 on January 23, 1996. All day custodial workers will be retroactively promoted to a WG–4 at the step they would have held if they had been a WG–4 on January 23, 1996. No class member will receive back pay as a result of this retroactive promotion. To effectuate this provision of the Agreement, pursuant to Section 415 of the CAA, a payment from the Department of Treasury shall be made in an amount sufficient to make all appropriate payments to the Office of Personnel Management for the retirement fund under Chapter 83 or 84 of Title 5 U.S. Code, which includes payments for each class member and the AOC and appropriate deductions for any additional coverage for the Federal Employee Group Life Insurance Program (''FEGLI'').

The National Finance Center (''NFC'') will calculate the additional amount of employee retirement withholding and employer contribution due for each pay period of the retroactive promotion for each class member. This additional amount will be based on the difference in the base pay of the class members' old and new grade levels, multiplied by the applicable statutory percentages for the employee deduction and the agency contribution to the retirement fund. The NFC will also calculate for each class member, if applicable, the amount of any additional deductions for the MU. Additionally, pursuant to Section 415 of the CAA, a payment shall be made from the Department of Treasury in an amount sufficient to pay an invoice submitted to the AOC by the NFC for the cost of performing the referenced calculations under this section, including overtime charges and indirect costs.

C. Notice of Vacant Positions

Beginning sixty days after Final Court Approval of this Agreement, the Architect will send all vacancy announcements for Wage Grade and GS positions for which plaintiffs may be eligible (including but not limited to Wage Grade and GS 3, 4, 5 and 6 positions) to the plaintiffs' counsel on a monthly basis for one year.

IV. PROCEDURES FOR CLASS NOTICE

A. Notice to Potential class Members

Within 60 days after Preliminary Court Approval of this Agreement, the Architect shall send a Notice to potential class members at their last known address. Attachment A hereto is a proposed ''Notice of Proposed Settlement and of Hearing on Proposed Settlement'' (''Fairness Notice''), which the parties hereby request that the Court approve in connection with scheduling the Fairness Hearing, as set forth in paragraph VI below. This notice to class members shall also include this Agreement. The Architect shall pay for the cost of this mailing.

B. Published Notice

In order to advise all potential class members of their rights under this Agreement, including class members who have retired, who have relocated, or whose current location is unknown, the Architect shall arrange for the publication, at the Architect's expense, of a one-time Notice in the general news sections of the District of Columbia Metro and Prince George's County editions of *The Washington Post*, and in *Roll Call*. The text of the published notice will be submitted to plaintiffs' counsel for their review and approval in advance of publications.

V. PROCEDURES FOR FAIRNESS HEARING

A. Hearing No Later Than 60 Days After Preliminary Approval

The parties request that the Court schedule a Fairness Hearing to be held no later than 60 days after the Court preliminarily approves the settlement.

B. Objections to Settlement Agreement

Any person who wishes to object to the terms of this Agreement, must submit, not less than 15 days prior to the Fairness Hearing, a written statement to the Court, with copies to counsel for the parties. The statement shall contain the individual's name, address and telephone number, along with a statement of her objection(s) to the Agreement and the reason(s) for the objection(s).

C. Parties to Use Best Efforts to Obtain Prompt Judicial Approval

The parties and their counsel shall jointly use their best efforts to obtain prompt judicial approval of this Agreement. The parties have bargained in good faith for the terms of this Agreement. No section or subsection of this Settlement may be modified or stricken without consent of the parties, and in no event after Final Court Approval. If the Court does not approve of this Settlement as written, the Agreement shall be voidable in its entirety at the option of either party.

VI. OTHER MATTERS

A. The plaintiffs relinquish all rights to reopen this action or to seek further or relief than is provided in this Agreement.

B. The parties to this action have entered into this Agreement to resolve all issues in controversy in this action. In recognition of this fact, neither the terms of this Agreement nor their substance may be offered, taken, construed, or introduced as evidence of liability or as an admission or statement of wrongdoing by the defendant, or used for any other reason either in this action or in any subsequent proceeding of any nature.

C. This Agreement shall not constitute an admission of liability or fault on the part of the Office of the Architect, its agents, servants, or employees, and is entered into by all parties for the sole purpose of compromising disputed claims and avoiding the expenses and risks of further litigation.

D. This Agreement comprises the full and exclusive agreement of the parties with respect to the matters discussed herein. No representations or inducements to compromise this action or the administrative proceedings that gave rise to it have been made, other than those recited in this Agreement. No statements other than those recited in this Agreement are binding upon the parties with respect to the disposition of this action or the administrative proceedings that gave rise to it.

E. The terms of this Agreement shall constitute full and complete satisfaction of all

claims of class members against the defendant that arise out of events occurring up to Final Court Approval of this Agreement which fall within the scope of the allegations in the fourth amended complaint in this action, and of all rights of the class members to relief within the scope of this action. Upon Final Court Approval of this Agreement, the class as a whole and each class member individually shall be bound by the doctrines of *res judicata* and collateral estoppel with respect to all such claims.

F. This Agreement shall be enforceable in the U.S. District Court for the District of Columbia.

G. This action will be dismissed with prejudice upon Final Court Approval.

Counsel for Plaintiffs: Barbara Kraft and Sarah J. Starrett.

Counsel for Defendant: Kenneth L. Wainstein, U.S. Attorney; Mark E. Nagle, Assistant U.S. Attorney; Stacy M. Ludwig, Assistant U.S. Attorney.

This Agreement has been approved by the Office of Compliance pursuant to 2 U.S.C. §1414.

WILLIAM W. THOMPSON, II,
Executive Director, Office of Compliance.

Approved and So Ordered on this 20th day of July, 2001,

HONORABLE EMMET G. SULLIVAN,
United States District Judge.

IT IS FURTHER ORDERED THAT A FAIRNESS HEARING IS SCHEDULED FOR September 28, 2001, at 11 a.m. in Courtroom #1.

Mr. MCKEON. Mr. Speaker, I reserve the balance of my time.

Mr. GEORGE MILLER of California. Mr. Speaker, I yield 1 minute to the gentleman from Pennsylvania (Mr. FATTAH).

Mr. FATTAH. Mr. Speaker, I rise in support of this act. I join with so many of my colleagues who find it extraordinarily important that we right the wrong of the Supreme Court decision and allow access to the courts for those who have been discriminated against in terms of pay equity.

And Lilly Ledbetter and the act that is before us today, I want to thank Chairman GEORGE MILLER for his leadership and his hard work on this and his committee for their relentless pursuit of correcting this. It's one of the very first acts of this new Congress, and I just want to rise in support of it and hope that it gains an extraordinary vote in the House today because it will send a message to not only my mother, my wife, my daughters, but to women throughout our country and to others that the United States Congress stands squarely on the right side of history on this critically important question.

Mr. MCKEON. I continue to reserve my time.

Mr. GEORGE MILLER of California. Mr. Speaker, I yield 1 minute to the gentleman from Maryland, the majority leader.

□ 1530

Mr. HOYER. I thank the chairman, I thank the ranking member, I thank the United States Senate for passing this bill.

I am proud that this is the very first bill that we passed in this House in the 111th Congress. Lilly Ledbetter is a woman of courage, leadership, and my daughters owe her a debt of gratitude.

In passing that bill, we recognized that sexism and discrimination can still cheat women out of equal pay and equal worth, a theft of livelihood and dignity that is especially damaging as families across our country struggle to pay their bills, as if somehow a single mom raising children could do it more cheaply than a single dad raising those same children.

That didn't make any sense then or now. Within my lifetime, sexism in the workplace could be blatant and unashamed, but today it does some of its worst work in secret.

We can take a stand against it by voting for final passage today. It was secret sexism that cheated Lilly Ledbetter out of the thousands of dollars for years. And we repeat her story, not because it is unique and shocking, but because it's typical, typical of the experience of so many American women, indeed, women all over the world.

Ms. Ledbetter was a supervisor at a tire plant. For years she was paid less than her male coworkers, but she was paid a differential in secret. Her employer didn't tell her I am going to pay you less than I pay your male counterparts who do exactly the same work. For years, she was left in the dark, and by the time she finally saw the proof, the Supreme Court said it was too late. Ironic.

I will tell you on assault there may be in some States no statute of limitations and others there may be a statute of limitations. Essentially, what happens here, if they keep hitting you, and they keep hitting you month after month after month, it's not the last hit that counted, it's the first hit that counted. And you couldn't sue for that, what we would call, we lawyers, tortious conduct, others would call criminal conduct.

But there was no responsibility that Lilly Ledbetter could get from the employer for wrongdoing, for breaking the law. There was no dispute that the law was broken. It was simply that it was broken in secret. And so Lilly Ledbetter had to suffer in public.

The Supreme Court ruled that even though Ms. Ledbetter had suffered clear discrimination, the law had been broken. She had missed the time in which to raise the issue. How perverse, in a nation of laws, of justice, of equity, that we would say they broke the law in secret, and you didn't know it, and you couldn't find it out and, therefore, we will not redress your recognized grievance.

Ladies and gentlemen of the House, this is the right thing to do. It's the right thing to do, not just for Lilly Ledbetter, not just for women, it's the right thing to do because our country believes in fairness, in equity, that we are a nation of laws and treat people equally under those laws. That is why it's so appropriate for us to pass this bill today and send it to the President, who will sign it proudly. All of us who vote for it and see its enactment will be proud as well.

I thank the gentleman for his leadership.

Mr. MCKEON. Mr. Speaker, I yield myself the balance of my time.

Our Nation is facing serious challenges. The economic picture remains bleak, with seemingly more jobs lost every day. American families are struggling to pay bills and send their families to college. I don't object to the fact that we are considering this bill again, despite widespread concern about its consequences. What bothers me about it is that we are not truly debating it. Had this bill truly been ''a narrow fix,'' as the supporters would have the American people believe, this rush to approval may not have been such a problem.

However, this is a major, fundamental change to civil rights law affecting no less than four separate statutes. The last change to civil rights law of this magnitude, the 1991 civil rights law, took 2 years of negotiation, debate and partisan accord to accomplish.

Instead, what we have before us is a partisan product that is fundamentally flawed. It guts the statute of limitations contained in current law and, in doing so, would allow an employee to bring a claim against an employer decades after the alleged initial act of discrimination occurred. Trial lawyers, you can be sure, are salivating at this very prospect.

You know, I think about a person that maybe did one of these acts 30 years ago, has since sold the company, the company has since sold again, the original employer that made the discrimination case in the first place has since passed away and now a trial lawyer can bring all of these people to court. The person who passed away maybe would still have that liability. It boggles my mind to think of the unintended consequences that will come from this bill.

Mr. Speaker, this is a bad bill, and it's the result of an equally bad process. It breaks the vows of bipartisanship that the majority has made time and time again. In the last election and in the previous election they talked about bipartisanship. They talked about regular order, they talked about transparency, about working together. You know, we could work out our honest differences but do it in the light of the day before the American people and, once again, we are denied that opportunity. I think the American people deserve better.

I urge my colleagues to join me in opposing this bill, and I yield back the balance of my time.

Mr. GEORGE MILLER of California. I yield myself such time as I may consume.

Mr. Speaker, Members of the House, the Lilly Ledbetter Fair Pay Act goes to basic and fundamental American values, both in our daily lives and in our workplace, and that is that people ought to be rewarded with equal pay for equal work. It's fundamental, it's

basic to our economy, it's basic to our society. It's basic to our sense of fairness, to our sense of justice, and to our sense of equality.

But in far too many workplaces that's not what is done. Women, in many instances, time and time again, for doing the same job that men are doing in the same manner that men are doing it, are paid less, not because they are not doing the job equally as well as the men, but because somebody decided that they were going to pay them less simply because they were women.

That runs counter to the values of this Nation. It runs counter to the values of our society. It runs counter to the best interests of women. It's rather fascinating that they are suggesting that because of tough economic times some businesses may only be able to survive if they can engage in discrimination. If they can carry out a business plan based upon discrimination, they may be able to survive, so women should underwrite that discriminatory policy and accept less.

Well, let me tell you what it's like when you are trying to support a family, either as a dual wage earner or by yourself, and you are accepting less every week, every day, every hour for the work that you are doing the same as the people alongside of you, but you are getting less because you are a woman. Try that in these tough economic times. Try running your household in these tough economic times where the Republicans would have you believe we should enforce the policy of discrimination, that somehow women should underwrite these difficult times by accepting, being a victim of discrimination.

I don't think so. I don't think the people in this Congress believe that. I don't believe the people in this country believe that, and that's why we're going to pass this legislation.

It's fundamental to the values of this country. Now, they are trying to run up the scare tactics that this gets rid of the statute of limitation, same statute of limitations, 180 days, that somehow if you had waited a long time you would collect more recovery than otherwise. No, you get 2 years of backpay, that's the maximum, and that's it. But they want to suggest otherwise, no, that's what the law says.

And because of that, because we reset the law to what it was, as it was interpreted by courts all over this country and by employers and employees, the CBO in its independent analysis said this does not increase costs because it does not create a new cause of action and they don't expect a lot of litigation as a result of this because we go back to the law as it was.

So let's move along here and get rid of this outrageous discriminatory practice that was sanctified by the Supreme Court in some kind of ideological rampage against women and the treatment and the fairness of them in the workplace.

We have an opportunity to do that now. We will pass this bill today, we will send it to the White House where our new President, Barack Obama, has said he will sign this legislation. And with that signature on this bill, we can change the law in this country to once again make sure that women are provided equal pay for equal work that they do in the American workplace, and I urge my colleagues to support this legislation.

Mr. DAVIS of Illinois. Mr. Speaker, I rise today to voice my strong support for this very important bill. I thank Speaker PELOSI for championing this effort to improve the lives of American women and their families.

The Lilly Ledbetter Fair Pay Act is a bill of enormous importance for women's rights and civil rights in general. For decades, companies big and small have paid women less for the same work as their male counterparts. Today, we correct a major fault in both law and market, and we move toward true equality for all men and women in America.

This bill is important in so many ways. Perhaps most obviously, the bill confirms America's commitment to women's rights. Kofi Annan, the former Secretary-General of the United Nations, was right on the mark when he said, "when women thrive, all of society benefits, and succeeding generations are given a better start in life." Today we help underpaid women thrive, we help restore a sense of dignity and pride, we help women—mothers and mentors, daughters and sisters—improve the lives of others as we lawfully improve theirs.

With the passage of this bill, we tell working American women that their work is valued, that it is just as good as a man's, and that they deserve fair and equal pay. The extra 20 or 30 cents per dollar that so many women do not receive means less food on the table or less money to save for her family's future. Over a lifetime, unequal pay cheats dedicated, hard working women of $400,000 to $2 million. Imagine what these women could have done with this money. And to reflect back on the words of Mr. Annan, passing the Lilly Ledbetter Fair Pay Act into law will benefit both current and future generations.

This bill is valuable not only because of its significant place in the women's rights movement, but also because it demonstrates the Congress' and President Obama's commitment to positive change, change that betters the lives of all Americans regardless of gender or race. Our passage of this bill confirms that equality is a priority for this new Congress. The first bill signed into law during the 111th Congress will be the Lilly Ledbetter Fair Pay Act, ensuring all Americans that—even in these difficult times—their Government is committed to the ultimate American promise of equality for all.

Ms. JACKSON-LEE of Texas. Mr. Speaker, I would also like to thank Congressman GEORGE MILLER for his leadership in bringing this legislation forth and for working together to see that gender equity is not just something we talk about, but something that is achieved.

Sadly, women in the United States still earn only 78 cents on the dollar compared to men more than 45 years after the passage of the Equal Pay Act in 1963.

Lilly Ledbetter helped shine new light on this issue when the Supreme Court denied her the $223,776 in additional wages she would have earned had she been a man in its 2007 decision, Ledbetter v. Goodyear Tire & Rubber Co. The Supreme Court was restricted by laws that saw women as less than equal. The Lilly Ledbetter Fair Pay Act would correct this decision and ensure that future victims of pay discrimination can bring a lawsuit after any act of discriminatory pay.

Women have made enormous advances toward economic equality, but gaps in income between men and women persist and only multiply over time, as the following numbers from Jessica Arons' Center for American Progress Action Fund report, "Lifetime Losses: The Career Wage Gap" show. Passing this bill along with H.R. 12, the Paycheck Fairness Act, would be an important first step in addressing this problem.

Although we encourage our daughters to stay in school and obtain their degrees, women with higher education are losing more income due to the career wage gap. In fact, $434,000 is the median amount that a full-time female worker loses in wages over a 40-year period as a direct result of the gender pay gap, also known as the "career wage gap."

The wage gap widens as women get older and carries into retirement because women workers earn less than men at every stage of life, and this continues into retirement. Just some of the statistics that demonstrate that inequity exists are:

78 cents: The amount that the average, full-time working woman makes for every $1 a man makes over a year.

$713,000: The career wage gap for women with a bachelor's degree or higher.

$452,000: The career wage gap for women with some college education.

$392,000: The career wage gap for women with a high school education.

$270,000: The career wage gap for women with less than a high school education.

17 percent: The additional amount that single mothers would take home in income if they were paid fairly. This would lead to a 50 percent reduction in poverty for these women, from 25.3 percent to 12.6 percent.

13.4 percent: The additional amount that single women would receive in income if they were paid fairly. This would lead to an 84 percent reduction in poverty for these women, from 6.3 percent to 1 percent.

6 percent: The additional amount that married women would earn if they were paid fairly. This would lead to a 62 percent reduction in poverty for these women, from 2.1 percent to 0.8 percent.

$8,000: The gap between the average retirement income that men and women receive annually. Two-thirds of this disparity can be attributed to the pay gap and occupational segregation.

Higher wages for women would bring greater prosperity to families. A report from the AFL–CIO and the Institute for Women's Policy Research found that if women were paid fairly, family incomes would rise and poverty levels would fall.

This legislation is intended to combat the wage gap that still exists today between men and women in the workplace. It is an important step in addressing the persistent wage gap between women and men.

Early last year the House passed H.R. 2831, legislation reversing last year's Supreme Court decision in Ledbetter v. Goodyear Tire and Rubber Co., in which the court ruled, 5–4, that workers filing suit for pay discrimination

must do so within 180 days of the actual decision to discriminate against them.

Which is why we need to pass not only the Lilly Ledbetter Fair Pay Act but the Paycheck Protection Act as well to stop discriminatory pay practices by employers against our mothers, wives, daughters, and granddaughters that do the same job as their male counterparts.

As a Member of the Women's Caucus I have been fighting to close the wage gap for American women since before I arrived here as a Representative in 1995, and I believe that equal pay for equal work is a simple matter of justice. Wage disparities are not simply a result of women's education levels or life choices.

In fact, the pay gap between college educated men and women appears the first job after college—even when women are working full-time in the same fields with the same major as men—and continues to widen during the first 10 years in the workforce. Further, this persistent wage gap not only impacts the economic security of women and their families today, it also directly affects women's retirement security tomorrow.

I urge my colleagues, both men and women to support equality in rights and pay for all Americans by supporting H.R. 181, The Lilly Ledbetter Fair Pay Act.

Mr. GENE GREEN of Texas. Mr. Speaker, I rise today as an original cosponsor of the Ledbetter Fair Pay Act, to express my strong support for the bill. I am pleased we are taking up this bill as passed by the senate so we can finally send it to the President's desk after previously passing it twice in this chamber.

The Ledbetter Fair Pay Act corrects and clarifies a serious misinterpretation by the Supreme Court in its 2007 ruling in the case of Ledbetter v. Goodyear. In that 5–4 decision, the majority ruled that Lilly Ledbetter, the lone female supervisor at a tire plant in Gadsden, AL, did not file her lawsuit against Goodyear Tire and Rubber Co. in the timely manner specified by Title VII of the Civil Rights Act of 1964.

The court determined a victim of pay discrimination must file a charge within 180 days of the employer's decision to pay someone less for an unlawfully discriminatory reason such as race, age, sex, or religion.

The Ledbetter Fair Pay Act clarifies that each paycheck resulting from a discriminatory pay decision constitutes a new violation of the employment nondiscrimination law, as long as the charge is filed within 180 days of the employee receiving the paycheck.

The Ledbetter Fair Pay Act restores workers' ability to pursue claims of pay discrimination on not only sex, but race, religion, age, or for any other reason. Congress must pass this legislation to help ensure all workers are treated fairly in the workplace and the standard of equal pay for equal work is upheld. I urge my colleagues to join me in supporting this bill to end pay discrimination.

Mr. NADLER of New York. Mr. Speaker, I rise in support of the Lilly Ledbetter Fair Pay Act of 2009.

The Ledbetter Fair Pay Act of 2009 is necessary to overturn the Supreme Court's 2007 decision in Ledbetter v. Goodyear. In that decision, this Supreme Court once again went out of its way to read our anti-discrimination laws as narrowly as possible, and refused to interpret the law as intended by Congress. In doing so, the Court said something astonishing: the only discriminatory act was the initial decision to pay Lilly Ledbetter less than her male coworkers. Once the employer had successfully concealed that fact from her for 180 days, she was out of luck, and Goodyear could go on paying her less—just because she is a woman—forever. The 180-day deadline to sue had passed. The decision to discriminate was illegal, but paying her less than her male colleagues from that moment forward was not.

This is astonishing because it rewards employers who successfully conceal pay discrimination and makes it virtually impossible for employees to challenge such discrimination. It is also astonishing because—17 years ago when it passed the Civil Rights Act of 1991—Congress rejected the reasoning that the Supreme Court relied upon in its Ledbetter decision. Through the Civil Rights Act of 1991, Congress rejected the Supreme Court's conclusion that a statute of limitations begins to run when an employer adopts a discriminatory seniority system and does not restart when the discriminatory effects of that system are felt. Congress made clear that it was rejecting this reasoning in the context of discriminatory seniority systems, which was the question presented by the Lorance case, and in all other contexts as well.

Until its Ledbetter decision, the Supreme Court seemed to have gotten Congress's message. In Ledbetter, however, the Supreme Court relied upon the faulty reasoning in Lorance and ruled, once again, that a statute of limitations runs only from the time that a discriminatory decision is made. Now we're called upon to do it over again. Hopefully, the Supreme Court will hear us once and for all and interpret statute of limitation periods as we intend. Thus, while Ledbetter addresses discrimination in employment, our passage of this bill expresses broad disapproval of the Court's reasoning in any context where it might be applied. Within the specific context of pay discrimination, our use of the phrase "discriminatory compensation decision or other practice" should be read broadly, and to include any practice—including, for example, seniority or pension practices—that impact overall compensation.

I urge adoption of The Ledbetter Fair Pay Act of 2009.

Mr. HASTINGS of Florida. Mr. Speaker, I rise today in strong support of S. 181, the Lilly Ledbetter Fair Pay Act of 2009. As an original cosponsor of H.R. 11, the House passed version of this bill, I would like to express my appreciation for the efforts of Chairman GEORGE MILLER for his instrumental efforts in ensuring passage of this vital legislation. The Lilly Ledbetter Fair Pay Act will strengthen protections against discrimination and safeguard the civil liberties of our Nation's employees.

Through the passage of this legislation, we correct the injustice that occurred following the unlawful discrimination against Ms. Lilly Ledbetter. After nearly 2 decades of service to the Goodyear Tire and Rubber facility in Alabama, Ms. Ledbetter discovered that she was the lowest-paid supervisor at the plant, despite having more experience than several of her male colleagues.

When Ms. Ledbetter sued her employer, a jury found that she had been the victim of unlawful discrimination. The Supreme Court agreed, but nonetheless upheld Goodyear's appeal on the ground that Ms. Ledbetter was barred from challenging the discriminatory payments. The Supreme Court's reason was that the time limit for bringing her claim had passed as the initial discriminatory decision had occurred 20 years earlier. In dismissing Ms. Ledbetter's claim, the Supreme Court overruled a previous law under which every discriminatory paycheck was a new violation that restarted the clock for filing a claim.

The Supreme Court's decision put workers who were subject to discrimination at an extreme disadvantage. As Ms. Ledbetter's case shows, it is very difficult for employees to discover pay discrimination, and workers may not discover pay discrimination for many years after they are discriminated against. Under the Supreme Court's decision, many victims of this deplorable practice would be left without recourse.

Furthermore, the Supreme Court's decision encourages employers to keep a discriminatory pay decision secret for 180 days, allowing them to pay the discriminatory the rest of a worker's career.

Mr. Speaker, for all of these reasons the Supreme Court's decision rendered much of our civil rights law virtually unenforceable. This was a decision that affected not only gender discrimination, but also discrimination on the grounds of race, ethnicity and sexuality. I am therefore proud to support this legislation and encourage my colleagues to do so as well.

Mr. GEORGE MILLER of California. I yield back the balance of my time.

The SPEAKER pro tempore. All time for debate has expired.

Pursuant to House Resolution 87, the Senate bill is considered read and the previous question is ordered.

The question is on the third reading of the Senate bill.

The Senate bill was ordered to be read a third time, and was read the third time.

MOTION TO COMMIT

Mr. MCKEON. Mr. Speaker, I offer a motion to commit.

The SPEAKER pro tempore. Is the gentleman opposed to the bill?

Mr. MCKEON. I am.

The SPEAKER pro tempore. The Clerk will report the motion to commit.

The Clerk read as follows:

Mr. McKeon moves to commit the bill S. 181, Lilly Ledbetter Fair Pay Act, to the Committee on Education and Labor.

The SPEAKER pro tempore. Pursuant to the rule, the gentleman from California is recognized for 5 minutes in support of his motion.

Mr. MCKEON. Mr. Speaker, I move to commit this bill to the committee so that this bill, which is so sweeping in its scope, be given an opportunity to be debated in a comprehensive fashion. To this day, this committee has never had a hearing on this bill.

There has not been a full and fair debate, regular order has not been followed, and it needs to be. As I noted in my remarks, we have not entertained, in the three times that this bill has been brought to the floor, a single Republican amendment.

I yield back the balance of my time.

Mr. GEORGE MILLER of California. I rise to speak against the motion to commit.

The SPEAKER pro tempore. The gentleman from California is recognized for 5 minutes.

Mr. GEORGE MILLER of California. Mr. Speaker, Members of the House, this motion to commit is clearly an effort to not only send this bill back to committee, but to kill this legislation. My colleagues on the other side of the aisle recognize the situation that we find ourselves in. The House has passed this legislation earlier, in this session, and the Senate has passed similar legislation which we are now taking up. And when we vote in a little while, this afternoon, we will pass this legislation, and it will go to the President of the United States.

So this is a desperate attempt to somehow keep that from happening. And what we will be sweeping is we will be sweeping away a policy of discrimination in the workplace against women who are paid less than their male counterparts for the same work.

The fact of the matter is that there were hearings held both in the Judiciary Committee, in the last session of Congress, and in the Education and Labor Committee, and all sides were allowed to present their views in those hearings.

□ 1545

In the last Congress, it was subject to a full committee markup, which all Members could have offered as many amendments as they like. They offered two amendments. Those amendments were rejected. They could have offered more. They chose not to.

The bill went to the House floor, debated, and was passed on a bipartisan vote of 225–199 in June of 2007. The minority had an opportunity to offer a motion to recommit. They chose not to. The bill went to the Senate, where it was filibustered. Filibustered. And then the bill was reintroduced identical to what the House had already passed earlier this month.

On January 9 of this year, we passed the bill on the House floor again, 247–171, on another bipartisan vote. The minority had another opportunity to offer a motion to recommit. They chose not to.

The bill went to the Senate, where it was subjected to amendment after amendment. The bill was passed on a bipartisan vote of 61–36. And now we are on the cusp of sending this bill to President Obama for his signature. That is what we should do.

We should reject this motion to commit, an attempt to kill this legislation, and make sure that this bill goes to the President's desk and ends this discriminatory policy against women in the workplace. I urge my colleagues to vote ''no'' on the motion to commit and vote ''aye'' on the passage of the legislation.

I yield back the balance of my time.

The SPEAKER pro tempore. Without objection, the previous question is ordered on the motion to commit.

There was no objection.

The SPEAKER pro tempore. The question is on the motion to commit.

The question was taken; and the Speaker pro tempore announced that the noes appeared to have it.

Mr. McKEON. Mr. Speaker, I object to the vote on the ground that a quorum is not present and make the point of order that a quorum is not present.

The SPEAKER pro tempore. Evidently a quorum is not present.

The Sergeant at Arms will notify absent Members.

Pursuant to clause 9 of rule XX, the Chair will reduce to 5 minutes the minimum time for any electronic vote on the question of passage.

The vote was taken by electronic device, and there were—yeas 176, nays 250, not voting 6, as follows:

[Roll No. 36]

YEAS—176

Aderholt
Akin
Alexander
Austria
Bachmann
Bachus
Barrett (SC)
Bartlett
Barton (TX)
Biggert
Bilbray
Bilirakis
Bishop (UT)
Blackburn
Blunt
Boehner
Bonner
Bono Mack
Boozman
Boustany
Brady (TX)
Broun (GA)
Brown (SC)
Buchanan
Burgess
Burton (IN)
Buyer
Calvert
Camp
Campbell
Cantor
Cao
Capito
Carter
Castle
Chaffetz
Childers
Coble
Coffman (CO)
Cole
Conaway
Crenshaw
Culberson
Davis (KY)
Deal (GA)
Dent
Diaz-Balart, L.
Diaz-Balart, M.
Dreier
Duncan
Ehlers
Emerson
Fallin
Flake
Fleming
Forbes
Fortenberry
Foxx
Franks (AZ)
Frelinghuysen
Gallegly
Garrett (NJ)
Gerlach
Gingrey (GA)
Gohmert
Goodlatte
Granger
Graves
Griffith
Guthrie
Hall (TX)
Harper
Hastings (WA)
Heller
Hensarling
Herger
Hoekstra
Hunter
Inglis
Issa
Jenkins
Johnson (IL)
Johnson, Sam
Jones
Jordan (OH)
King (IA)
King (NY)
Kingston
Kirk
Kline (MN)
Lamborn
Lance
Latham
LaTourette
Latta
Lee (NY)
Lewis (CA)
Linder
LoBiondo
Lucas
Luetkemeyer
Lummis
Lungren, Daniel E.
Mack
Manzullo
Marchant
McCarthy (CA)
McCaul
McClintock
McCotter
McHenry
McHugh
McKeon
McMorris Rodgers
Mica
Miller (FL)
Miller (MI)
Miller, Gary
Moran (KS)
Murphy, Tim
Myrick
Neugebauer
Nunes
Olson
Paul
Paulsen
Pence
Petri
Pitts
Platts
Poe (TX)
Posey
Price (GA)
Putnam
Radanovich
Rehberg
Reichert
Roe (TN)
Rogers (AL)
Rogers (KY)
Rogers (MI)
Rohrabacher
Rooney
Ros-Lehtinen
Roskam
Royce
Ryan (WI)
Scalise
Schmidt
Schock
Sensenbrenner
Sessions
Shadegg
Shimkus
Shuster
Simpson
Smith (NE)
Smith (NJ)
Smith (TX)
Souder
Stearns
Sullivan
Terry
Thompson (PA)
Thornberry
Tiahrt
Turner
Upton
Walden
Wamp
Westmoreland
Whitfield
Wilson (SC)
Wittman
Wolf
Young (FL)

NAYS—250

Abercrombie
Ackerman
Adler (NJ)
Altmire
Andrews
Arcuri
Baca
Baird
Baldwin
Barrow
Bean
Becerra
Berkley
Berman
Berry
Bishop (GA)
Bishop (NY)
Blumenauer
Boccieri
Boren
Boswell
Boucher
Boyd
Brady (PA)
Braley (IA)
Bright
Brown, Corrine
Butterfield
Capps
Capuano
Cardoza
Carnahan
Carney
Carson (IN)
Cassidy
Castor (FL)
Chandler
Clarke
Clay
Cleaver
Clyburn
Cohen
Connolly (VA)
Conyers
Cooper
Costa
Costello
Courtney
Crowley
Cuellar
Cummings
Dahlkemper
Davis (AL)
Davis (CA)
Davis (IL)
Davis (TN)
DeFazio
DeGette
Delahunt
DeLauro
Dicks
Dingell
Doggett
Donnelly (IN)
Doyle
Driehaus
Edwards (MD)
Edwards (TX)
Ellison
Ellsworth
Engel
Eshoo
Farr
Fattah
Filner
Foster
Frank (MA)
Fudge
Giffords
Gonzalez
Gordon (TN)
Grayson
Green, Al
Green, Gene
Grijalva
Gutierrez
Hall (NY)
Halvorson
Hare
Harman
Hastings (FL)
Heinrich
Herseth Sandlin
Higgins
Hill
Himes
Hinchey
Hinojosa
Hirono
Hodes
Holden
Holt
Honda
Hoyer
Inslee
Israel
Jackson (IL)
Jackson-Lee (TX)
Johnson (GA)
Johnson, E. B.
Kagen
Kanjorski
Kaptur
Kennedy
Kildee
Kilpatrick (MI)
Kilroy
Kind
Kirkpatrick (AZ)
Kissell
Klein (FL)
Kosmas
Kratovil
Kucinich
Langevin
Larsen (WA)
Larson (CT)
Lee (CA)
Levin
Lewis (GA)
Lipinski
Loebsack
Lofgren, Zoe
Lowey
Luján
Maffei
Maloney
Markey (CO)
Markey (MA)
Marshall
Massa
Matheson
Matsui
McCarthy (NY)
McCollum
McDermott
McGovern
McIntyre
McMahon
McNerney
Meek (FL)
Meeks (NY)
Melancon
Michaud
Miller (NC)
Miller, George
Minnick
Mitchell
Mollohan
Moore (KS)
Moore (WI)
Moran (VA)
Murphy (CT)
Murphy, Patrick
Murtha
Nadler (NY)
Napolitano
Neal (MA)
Nye
Oberstar
Obey
Olver
Ortiz
Pallone
Pascrell
Pastor (AZ)
Payne
Perlmutter
Perriello
Peters
Peterson
Pingree (ME)
Polis (CO)
Pomeroy
Price (NC)
Rahall
Rangel
Reyes
Richardson
Rodriguez
Ross
Rothman (NJ)
Roybal-Allard
Ruppersberger
Ryan (OH)
Salazar
Sánchez, Linda T.
Sanchez, Loretta
Sarbanes
Schakowsky
Schauer
Schiff
Schrader
Schwartz
Scott (GA)
Scott (VA)
Serrano
Sestak
Shea-Porter
Sherman
Shuler
Sires
Skelton
Slaughter
Smith (WA)
Snyder
Solis (CA)
Space
Speier
Spratt
Stark
Stupak
Sutton
Tanner
Tauscher
Taylor
Teague
Thompson (CA)
Thompson (MS)
Tierney
Titus
Tonko
Towns
Tsongas
Van Hollen
Velázquez
Visclosky
Walz
Wasserman Schultz
Waters
Watson
Watt
Waxman
Weiner
Welch
Wexler
Wilson (OH)
Woolsey
Wu
Yarmuth

NOT VOTING—6

Brown-Waite, Ginny
Etheridge
Lynch
Rush
Tiberi
Young (AK)

□ 1615

Messrs. CONNOLLY of Virginia, ADLER of New Jersey, LUJÁN, JACKSON of Illinois, HOYER, BOREN, KLEIN of Florida, GUTIERREZ, Ms. KOSMAS, Ms. BEAN, Ms. MOORE of Wisconsin, Messrs. HILL, TANNER, GORDON of Tennessee, Ms. McCOLLUM, Messrs. CARNEY, SESTAK, MINNICK, BERMAN, CARDOZA, CUELLAR, OLVER, Mrs. MALONEY

and Mr. SPRATT changed their vote from ''yea'' to ''nay.''

Mrs. LUMMIS and Messrs. BILBRAY, COLE, LATHAM and HERGER changed their vote from ''nay'' to yea.''

So the motion to commit was rejected.

The result of the vote was announced as above recorded.

Stated for:

Mr. CASSIDY. Mr. Speaker, on rollcall vote 36, I inadvertently voted "nay." I meant to vote "yea."

The SPEAKER pro tempore. The question is on the passage of the Senate bill.

The question was taken; and the Speaker pro tempore announced that the ayes appeared to have it.

Mr. GEORGE MILLER of California. Mr. Speaker, on that I demand the yeas and nays.

The yeas and nays were ordered.

The SPEAKER pro tempore. This will be a 5-minute vote.

The vote was taken by electronic device, and there were—yeas 250, nays 177, not voting 6, as follows:

[Roll No. 37]

YEAS—250

Abercrombie
Ackerman
Adler (NJ)
Altmire
Andrews
Arcuri
Baca
Baird
Baldwin
Barrow
Bean
Becerra
Berkley
Berman
Berry
Bishop (GA)
Bishop (NY)
Blumenauer
Boccieri
Boswell
Boucher
Brady (PA)
Braley (IA)
Brown, Corrine
Butterfield
Capps
Capuano
Cardoza
Carnahan
Carney
Carson (IN)
Castor (FL)
Chandler
Clarke
Clay
Cleaver
Clyburn
Cohen
Connolly (VA)
Conyers
Cooper
Costa
Costello
Courtney
Crowley
Cuellar
Cummings
Dahlkemper
Davis (AL)
Davis (CA)
Davis (IL)
Davis (TN)
DeFazio
DeGette
Delahunt
DeLauro
Dicks
Dingell
Doggett
Donnelly (IN)
Doyle
Driehaus
Edwards (MD)
Edwards (TX)
Ellison
Ellsworth
Engel
Eshoo
Farr
Fattah
Filner
Foster
Frank (MA)
Fudge
Giffords
Gonzalez
Gordon (TN)
Grayson
Green, Al
Green, Gene
Grijalva
Gutierrez
Hall (NY)
Halvorson
Hare
Harman
Hastings (FL)
Heinrich
Herseth Sandlin
Higgins
Hill
Himes
Hinchey
Hinojosa
Hirono
Hodes
Holden
Holt
Honda
Hoyer
Inslee
Israel
Jackson (IL)
Jackson-Lee (TX)
Johnson (GA)
Johnson, E. B.
Kagen
Kanjorski
Kaptur
Kennedy
Kildee
Kilpatrick (MI)
Kilroy
Kind
Kirkpatrick (AZ)
Kissell
Klein (FL)
Kosmas
Kratovil
Kucinich
Lance
Langevin
Larsen (WA)
Larson (CT)
Lee (CA)
Levin
Lewis (GA)
Lipinski
Loebsack
Lofgren, Zoe
Lowey
Luján
Maffei
Maloney
Markey (CO)
Markey (MA)
Marshall
Massa
Matheson
Matsui
McCarthy (NY)
McCollum
McDermott
McGovern
McIntyre
McMahon
McNerney
Meek (FL)
Meeks (NY)
Melancon
Michaud
Miller (NC)
Miller, George
Minnick
Mitchell
Mollohan
Moore (KS)
Moore (WI)
Moran (VA)
Murphy (CT)
Murphy, Patrick
Murtha
Nadler (NY)
Napolitano
Neal (MA)
Nye
Oberstar
Obey
Olver
Ortiz
Pascrell
Pastor (AZ)
Payne
Pelosi
Perlmutter
Perriello
Peters
Peterson
Pingree (ME)
Polis (CO)
Pomeroy
Price (NC)
Rahall
Rangel
Reyes
Richardson
Rodriguez
Ross
Rothman (NJ)
Roybal-Allard
Ruppersberger
Rush
Ryan (OH)
Salazar
Sánchez, Linda T.
Sanchez, Loretta
Sarbanes
Schakowsky
Schauer
Schiff
Schrader
Schwartz
Scott (GA)
Scott (VA)
Serrano
Sestak
Shea-Porter
Sherman
Shuler
Sires
Skelton
Slaughter
Smith (NJ)
Smith (WA)
Snyder
Solis (CA)
Space
Speier
Spratt
Stark
Stupak
Sutton
Tanner
Tauscher
Taylor
Teague
Thompson (CA)
Thompson (MS)
Tierney
Titus
Tonko
Towns
Tsongas
Van Hollen
Velázquez
Visclosky
Walz
Wasserman Schultz
Waters
Watson
Watt
Waxman
Weiner
Welch
Wexler
Whitfield
Wilson (OH)
Woolsey
Wu
Yarmuth

NAYS—177

Aderholt
Akin
Alexander
Austria
Bachmann
Bachus
Barrett (SC)
Bartlett
Barton (TX)
Biggert
Bilbray
Bilirakis
Bishop (UT)
Blackburn
Blunt
Boehner
Bonner
Bono Mack
Boozman
Boren
Boustany
Boyd
Brady (TX)
Bright
Broun (GA)
Brown (SC)
Buchanan
Burgess
Burton (IN)
Buyer
Calvert
Camp
Campbell
Cantor
Cao
Capito
Carter
Cassidy
Castle
Chaffetz
Childers
Coble
Coffman (CO)
Cole
Conaway
Crenshaw
Culberson
Davis (KY)
Deal (GA)
Dent
Diaz-Balart, L.
Diaz-Balart, M.
Dreier
Duncan
Ehlers
Emerson
Fallin
Flake
Fleming
Forbes
Fortenberry
Foxx
Franks (AZ)
Frelinghuysen
Gallegly
Garrett (NJ)
Gerlach
Gingrey (GA)
Gohmert
Goodlatte
Granger
Graves
Griffith
Guthrie
Hall (TX)
Harper
Hastings (WA)
Heller
Hensarling
Herger
Hoekstra
Hunter
Inglis
Issa
Jenkins
Johnson (IL)
Johnson, Sam
Jones
Jordan (OH)
King (IA)
King (NY)
Kingston
Kirk
Kline (MN)
Lamborn
Latham
LaTourette
Latta
Lee (NY)
Lewis (CA)
Linder
LoBiondo
Lucas
Luetkemeyer
Lummis
Lungren, Daniel E.
Mack
Manzullo
Marchant
McCarthy (CA)
McCaul
McClintock
McCotter
McHenry
McHugh
McKeon
McMorris Rodgers
Mica
Miller (FL)
Miller (MI)
Miller, Gary
Moran (KS)
Murphy, Tim
Myrick
Neugebauer
Nunes
Olson
Paul
Paulsen
Pence
Petri
Pitts
Platts
Poe (TX)
Posey
Price (GA)
Putnam
Radanovich
Rehberg
Reichert
Roe (TN)
Rogers (AL)
Rogers (KY)
Rogers (MI)
Rohrabacher
Rooney
Ros-Lehtinen
Roskam
Royce
Ryan (WI)
Scalise
Schmidt
Schock
Sensenbrenner
Sessions
Shadegg
Shimkus
Shuster
Simpson
Smith (NE)
Smith (TX)
Souder
Stearns
Sullivan
Terry
Thompson (PA)
Thornberry
Tiahrt
Turner
Upton
Walden
Wamp
Westmoreland
Wilson (SC)
Wittman
Wolf
Young (FL)

NOT VOTING—6

Brown-Waite, Ginny
Etheridge
Lynch
Pallone
Tiberi
Young (AK)

ANNOUNCEMENT BY THE SPEAKER PRO TEMPORE

The SPEAKER pro tempore (Ms. DELAURO) (during the vote). There is 1 minute remaining in this vote.

□ 1625

So the Senate bill was passed.

The result of the vote was announced as above recorded.

A motion to reconsider was laid on the table.

AMERICAN RECOVERY AND REINVESTMENT ACT OF 2009

The SPEAKER pro tempore (Mr. HOLDEN). Pending any declaration of the House into the Committee of the Whole pursuant to House Resolution 88 for the consideration of the bill, H.R. 1—which contains an emergency designation for purposes of pay-as-you-go principles—the Chair must put the question of consideration under clause 10(c)(3) of rule XXI.

The question is, ''Will the House now consider the bill?''

The question was taken; and the Speaker pro tempore announced that the ayes appeared to have it.

RECORDED VOTE

Mr. MICHAUD. Mr. Speaker, I demand a recorded vote.

A recorded vote was ordered.

The vote was taken by electronic device, and there were—ayes 224, noes 199, not voting 10, as follows:

[Roll No. 38]

AYES—224

Abercrombie
Ackerman
Adler (NJ)
Altmire
Andrews
Baca
Baird
Baldwin
Bean
Becerra
Berkley
Berman
Bishop (GA)
Bishop (NY)
Blumenauer
Boccieri
Boswell
Boucher
Brady (PA)
Braley (IA)
Brown, Corrine
Butterfield
Capps
Capuano
Cardoza
Carnahan
Carson (IN)
Castor (FL)
Chandler
Clarke
Clay
Cleaver
Clyburn
Cohen
Connolly (VA)
Conyers
Costa
Costello
Courtney
Crowley
Cummings
Dahlkemper
Davis (AL)
Davis (CA)
Davis (IL)
Davis (TN)
DeFazio
DeGette
Delahunt
DeLauro
Dicks
Dingell
Doggett
Doyle
Driehaus
Edwards (MD)
Edwards (TX)
Ellison
Engel
Eshoo
Farr
Fattah
Filner
Foster
Frank (MA)
Fudge
Gonzalez
Gordon (TN)
Grayson
Green, Al
Green, Gene
Grijalva
Gutierrez
Hall (NY)
Halvorson
Hare
Harman
Hastings (FL)
Heinrich
Herseth Sandlin
Higgins
Hill
Himes
Hinchey
Hinojosa
Hirono
Hodes
Holden
Holt
Honda
Hoyer
Inslee
Israel
Jackson (IL)
Jackson-Lee (TX)
Johnson (GA)
Johnson, E. B.
Kagen
Kennedy
Kildee
Kilpatrick (MI)
Kilroy
Kind
Kirkpatrick (AZ)
Kissell
Klein (FL)
Kosmas
Kucinich
Langevin
Larsen (WA)
Larson (CT)
Lee (CA)
Levin
Lewis (GA)
Lipinski
Loebsack
Lofgren, Zoe
Lowey
Luján
Maffei
Maloney
Markey (CO)
Markey (MA)
Massa
Matheson
Matsui
McCollum
McDermott
McGovern
McMahon
McNerney
Meek (FL)
Meeks (NY)
Miller (NC)
Miller, George
Mitchell
Mollohan
Moore (KS)
Moore (WI)
Moran (VA)
Murphy (CT)
Murphy, Patrick
Murtha
Nadler (NY)
Napolitano
Neal (MA)
Nye
Oberstar
Obey
Olver
Ortiz
Pallone
Pascrell
Pastor (AZ)
Payne
Pelosi
Perlmutter
Perriello
Peters
Pingree (ME)
Polis (CO)

Pomeroy
Price (NC)
Rahall
Rangel
Reyes
Richardson
Rodriguez
Ross
Rothman (NJ)
Roybal-Allard
Ruppersberger
Rush
Ryan (OH)
Salazar
Sánchez, Linda T.
Sarbanes
Schakowsky
Schauer
Schiff
Schrader
Schwartz
Scott (GA)
Scott (VA)
Serrano
Sestak
Shea-Porter
Sherman
Sires
Skelton
Slaughter
Smith (WA)
Snyder
Solis (CA)
Speier
Spratt
Stupak
Sutton
Tanner
Tauscher
Teague
Thompson (CA)
Thompson (MS)
Tierney
Titus
Tonko
Towns
Tsongas
Van Hollen
Velázquez
Visclosky
Walz
Wasserman Schultz
Waters
Watson
Watt
Waxman
Weiner
Welch
Wexler
Wilson (OH)
Woolsey
Wu
Yarmuth

NOES—199

Aderholt
Akin
Alexander
Arcuri
Austria
Bachmann
Bachus
Barrett (SC)
Barrow
Bartlett
Barton (TX)
Berry
Biggert
Bilbray
Bilirakis
Bishop (UT)
Blackburn
Blunt
Boehner
Bonner
Bono Mack
Boozman
Boren
Boustany
Boyd
Brady (TX)
Bright
Broun (GA)
Brown (SC)
Buchanan
Burgess
Burton (IN)
Buyer
Calvert
Camp
Campbell
Cantor
Cao
Capito
Carney
Carter
Cassidy
Castle
Chaffetz
Childers
Coble
Coffman (CO)
Cole
Conaway
Cooper
Crenshaw
Cuellar
Culberson
Davis (KY)
Deal (GA)
Dent
Diaz-Balart, L.
Diaz-Balart, M.
Donnelly (IN)
Dreier
Duncan
Ehlers
Ellsworth
Emerson
Fallin
Flake
Fleming
Forbes
Fortenberry
Foxx
Franks (AZ)
Frelinghuysen
Gallegly
Garrett (NJ)
Gerlach
Giffords
Gingrey (GA)
Gohmert
Goodlatte
Granger
Graves
Griffith
Guthrie
Hall (TX)
Harper
Hastings (WA)
Heller
Hensarling
Herger
Hoekstra
Hunter
Inglis
Issa
Jenkins
Johnson (IL)
Johnson, Sam
Jones
Jordan (OH)
Kanjorski
Kaptur
King (IA)
King (NY)
Kirk
Kline (MN)
Kratovil
Lamborn
Lance
Latham
LaTourette
Latta
Lee (NY)
Lewis (CA)
LoBiondo
Lucas
Luetkemeyer
Lummis
Lungren, Daniel E.
Mack
Manzullo
Marchant
Marshall
McCarthy (CA)
McCaul
McClintock
McCotter
McHenry
McHugh
McIntyre
McKeon
McMorris Rodgers
Melancon
Mica
Michaud
Miller (FL)
Miller (MI)
Miller, Gary
Minnick
Moran (KS)
Murphy, Tim
Myrick
Neugebauer
Nunes
Olson
Paul
Paulsen
Pence
Peterson
Petri
Platts
Poe (TX)
Posey
Price (GA)
Putnam
Radanovich
Rehberg
Reichert
Roe (TN)
Rogers (AL)
Rogers (KY)
Rogers (MI)
Rohrabacher
Rooney
Ros-Lehtinen
Roskam
Royce
Ryan (WI)
Sanchez, Loretta
Scalise
Schmidt
Schock
Sensenbrenner
Sessions
Shadegg
Shimkus
Shuler
Shuster
Simpson
Smith (NE)
Smith (NJ)
Smith (TX)
Souder
Space
Stearns
Sullivan
Taylor
Terry
Thompson (PA)
Thornberry
Tiahrt
Turner
Upton
Walden
Wamp
Westmoreland
Whitfield
Wilson (SC)
Wittman
Wolf
Young (FL)

NOT VOTING—10

Brown-Waite, Ginny
Etheridge
Kingston
Linder
Lynch
McCarthy (NY)
Pitts
Stark
Tiberi
Young (AK)

ANNOUNCEMENT BY THE SPEAKER PRO TEMPORE

The SPEAKER pro tempore (during the vote). Two minutes remain in this vote.

□ 1642

Mr. BOSWELL changed his vote from ''no'' to ''aye.''

So the question of consideration was decided in the affirmative.

The result of the vote was announced as above recorded.

A motion to reconsider was laid on the table.

Stated for:

Mrs. McCARTHY of New York. Madam Speaker, today, I was unexpectedly detained and missed one vote.

On rollcall No. 38, on the question of consideration of the bill H.R. 1, the American Recovery and Reinvestment Act of 2009, I would have voted ''aye.''

The SPEAKER pro tempore. Pursuant to House Resolution 88 and rule XVIII, the Chair declares the House in the Committee of the Whole House on the State of the Union for the consideration of the bill, H.R. 1.

□ 1643

IN THE COMMITTEE OF THE WHOLE

Accordingly, the House resolved itself into the Committee of the Whole House on the State of the Union for the consideration of the bill (H.R. 1) making supplemental appropriations for job preservation and creation, infrastructure investment, energy efficiency and science, assistance to the unemployed, and State and local fiscal stabilization, for the fiscal year ending September 30, 2009, and for other purposes, with Mr. TIERNEY in the chair.

The Clerk read the title of the bill.

The CHAIR. Pursuant to the rule, the bill is considered read the first time.

General debate shall not exceed 3½ hours, equally divided and controlled by the chairman and ranking minority member of the Committee on Appropriations, who may yield control of blocks of that time.

The gentleman from Wisconsin (Mr. OBEY) and the gentleman from California (Mr. LEWIS) each will control 1 hour and 45 minutes.

The Chair recognizes the gentleman from Wisconsin.

□ 1645

Mr. OBEY. Mr. Chairman, I yield myself 5 minutes.

Mr. Chairman, this country is facing what most economists, I believe, consider to be the most serious and the most dangerous economic situation in our lifetimes, certainly going back to the early thirties.

If you take a look at what has happened in the country, late last year, former President George Bush recognized that the world's credit markets were near a state of total collapse, and he asked this Congress to take unprecedented action in order to try to prevent that. Since that time, we've seen a continued unraveling of financial markets, we've seen a continued unraveling of the housing markets, and we've seen the most spectacular loss of consumer confidence in the modern history of this country. New claims for unemployment insurance last week hit 590,000. In the last 2 months alone, we've seen this country lose more than a million jobs.

Consumer purchasing power has evaporated. New home starts fell 15 percent in December, to the lowest number on record going back more than 50 years. And we've seen other evidence of panic in the marketplace and on Main Street.

Normally, when consumer purchasing power collapses, our government uses the tool of monetary policy in order to try to resurrect and reinflate the economy. The problem is we've already shot that bullet. The Federal Reserve has taken phenomenal actions to try to stabilize the situation to very moderate effect. And now we're being asked to consider the other tool in our arsenal. We're being asked to use fiscal policy to expand consumer purchasing power to try and stop the slide. And that is what this proposal before us here today will try to do.

In most recessions, we're eventually led out of those recessions through the leadership of the housing sector and the automobile sector. This time around, both of those sectors are in shambles, and they're not likely to lead anybody out of anything. So that leaves us with very limited tools.

This package today that we are considering is an $825 billion package that does a variety of things to try to reinflate the economy. It, first of all, provides tax cuts—which Mr. RANGEL will discuss—in order to try to put some money in people's pockets. We hope that that succeeds to a greater extent than the last round of tax rebates did.

Secondly, this package attempts to jump-start job creation through infrastructure investments in roads, bridges, sewers, water repair, modernizing our electric power grid and expanding broadband access so that all parts of the country have an opportunity to compete, with Internet access.

Third, this package attempts to help those who are most impacted by the recession, who are losing their jobs, their health insurance, and losing the ability to send their kids to college.

Fourth, this package attempts to modernize the economy—or at least to begin a long process of doing that—by accelerating the development of new technology through key investments in science and energy.

And last, it attempts, also, to save jobs by stabilizing State and local budgets. Because of the economic collapse and because of the collapse of revenue now forecast at the State and local level, States face the need to eliminate gargantuan deficits because they're required to balance their budgets. Without help from the Federal Government to stabilize their situation, they will be forced to impose

major tax increases and devastating service cutbacks, which under these economic conditions would be hugely counterproductive. This package attempts to do all of those things.

Now, none of us can be certain about the degree of success that would flow from passage of this package.

The CHAIR. The time of the gentleman has expired.

Mr. OBEY. I yield myself 2 additional minutes.

But the fact is we are as close as we will ever see to being in the same position that Franklin Roosevelt was in in the thirties. And at that time he tried some things; some of the things he tried worked, some of them didn't, and so he moved on and tried other things.

There is no person on this floor who can guarantee the success of this package. Certainly, standing alone, this package will not succeed, because it is going to have to be accompanied by further actions to build confidence in the economy. It is going to have to be accompanied by new actions to prevent massive house foreclosures all across the country. We are going to probably have to have even further intervention in the financial markets of the country. And this package that we have here today, the spending portion of this package, may very well undershoot rather than overshoot the target that many economists have set out for us.

When President Bush came to office, I was divided in my judgment about whether I should support his first major new initiative, which was the No Child Left Behind education package. I had grave misgivings about that package, but in the end I supported it, largely because I thought that, as the incoming President, the President deserves to have the benefit of the doubt. President Obama is in that same situation, only in far more dire straits. He has asked the Congress to pass an economic recovery package, and this bill today is attempting to do that.

The CHAIR. The time of the gentleman has expired.

Mr. OBEY. I yield myself 1 additional minute.

He has asked us to provide a reasonable balance between tax cuts and spending increases to revive the ability of consumers to purchase the goods and services produced by this society. Unless someone has a clearly better idea, I think we have an obligation to support the President's proposal, at this point as the only game in town. The risks are enormous if we do not move ahead.

Everyone talks, for instance, about how disappointed they are with what the previous Bush administration did with respect to the package on Wall Street. I'm certainly extremely unhappy with some of the actions taken by Secretary Paulson.

The CHAIR. The time of the gentleman has expired.

Mr. OBEY. I yield myself 1 additional minute.

I believe, nonetheless, that the President was right at the time in telling the Congress that if we did not take action, the results could have been catastrophic. I believe if we do not take action on this package today, the results can be similarly catastrophic. And with that, I urge Members to support the package.

Mr. Chairman, I reserve the balance of my time.

Mr. LEWIS of California. Mr. Chairman, I yield myself such time as I might consume.

As we begin today's debate, Mr. Chairman and my colleagues, I'd like to reiterate my willingness and desire to work with President Obama.

Mr. President, each of us wants to see you be successful, and we welcome the opportunity to work with you and your administration. The challenges we face as Americans—not Democrats or Republicans, but Americans—are great. We have much work to do.

Mr. President, it is our sincere hope that we will work together across party lines to restore confidence in our economy and create a climate conducive to job growth. We can no longer afford to point fingers and cast blame. If there was ever a time for our country to come together, it is now.

There is no greater challenge facing working families today than our Nation's struggling economy. Each of us can speak passionately and with great empathy of people we know in our own districts who have lost their jobs, are unable to pay their mortgage, don't have health insurance, or are struggling to make ends meet. They are asking for our help. As we demonstrate our compassion, let us also be mindful of our responsibility to assist those in need without creating an untenable situation for future generations. That is the balance we must strive to achieve.

The centerpiece of any stimulus bill ought to be job creation. Government has a role; but our constituents are not asking for an unlimited expansion of government. They are asking Congress to focus on specific sectors of our economy and to provide solutions that will offer tangible, near-term results.

Most of us would agree that the recent $700 billion Troubled Asset Relief Program, known as TARP, is an illustration of how good intentions don't always deliver desired results. Many Members, I'm sure, would like to have their vote back if they voted for that package.

When Congress spends too much too quickly, it doesn't think through the details and oversight becomes more difficult. The TARP bill is only the most recent example. The lesson learned was this; we cannot manage what we do not measure. We simply cannot afford to make the same mistake again.

Public dismay over the lack of transparency in TARP implies a public desire for more openness and thoughtful consideration of stimulus spending. A Web site is not oversight. Posting $606 billion worth of Federal spending on a Web site does not ensure that these funds will be well spent. Each and every agency should be required to submit a spending plan to Congress—on the front end, not after the fact—to ensure that every dollar is spent as intended. Our constituents, Mr. Chairman and Members, deserve no less.

These taxpayers, who will repay this debt over time, also deserve specific answers before we spend another nickel of their money. They deserve to know how many jobs will be created in 6 months, 12 months, 18 months, or longer. They deserve to know where these jobs will be created, how many of these jobs will be skilled and unskilled positions, and whether these jobs will be sustained through higher taxes or even more government spending down the road. These are thoughtful, reasonable questions deserving a thoughtful and reasonable response.

Many have described this legislation as a transportation and infrastructure investment package. However, the fact remains that only $30 billion, or 3 percent of the funding, is directed towards ''shovel-ready'' road and highway spending. The backlog of these projects is some $64.3 billion. Similarly, $4.5 billion is allocated for the Corps of Engineers for improving flood protection and navigation, when a $61 billion backlog exists for Corps projects that are fully authorized. These are the types of targeted infrastructure investments that will create sustainable jobs and should be given even greater priority within this package.

Many Republicans support wellness programs, analog TV conversion coupons, and the NEA, for example, but these and many other items in this bill don't create jobs and ought to be funded through our regular appropriations process. They do not belong in a stimulus bill.

□ 1700

Nor should a stimulus package be used to establish 32 new government programs at a cost of some $136 billion, which this bill does. Thirty-seven percent of the appropriated dollars in this package, more than $1 out of every $3, is dedicated to creating new government programs.

Are we fostering job creation and economic stimulus, or are we simply growing the size of government? I know my taxpayers are asking. How about yours?

Our opposition to this package is not based on partisan politics but on economic reality. There is tremendous pressure on Congress to maintain funding of existing programs even before we create new ones. Again, let's take off our partisan hats and look at the sobering facts before us.

Congress recently provided $700 billion for TARP. It's now considering $816 billion in this stimulus bill. There is talk of the Senate's adding another $70 billion to address the AMT fix. Congress will next week, consider a $410 billion omnibus spending bill for the

work we didn't finish last year. And before long we will be considering another emergency supplemental spending bill.

Let's be perfectly honest. All these spending bills are placing a tremendous burden of debt on present and future generations. Our projected deficit of 2009 is already approaching $1.2 trillion, the largest in history, even before we consider this stimulus proposal.

So what can be done to make this a better and perhaps even a bipartisan spending bill? Let me offer four suggestions, Mr. Chairman:

First, narrow the focus of this bill to those items that provide measurable economic stimulus or produce jobs. Spending should be targeted to key infrastructure investments that will create jobs over the next 2 years. We don't question the urgency of this package. We question its priorities and its price tag.

Secondly, address public concerns over adequate transparency and accountability by requiring agencies to submit a spending plan before they start spending the money in this package, as we did in the 9/11 package. Such an approach will ensure that every dollar is spent as intended.

Further, I would suggest that this bill should ensure that it captures the full costs associated with waiving cost-sharing requirements and hiring of additional Federal employees. Proper safeguards are needed to prevent the unintentional growth of government over time.

And, lastly, limit the use of the stimulus bill as a vehicle for increasing base funding of popular domestic programs. Large increases in these programs create unrealistic expectations for future spending.

I will conclude my remarks as I began them with a message for our new President:

Mr. President, the challenges we face transcend partisan politics. We have an historic opportunity to work together to craft a stimulus package that Republicans and Democrats can support. We appeal to you to include us in this process. We wish you and your family Godspeed and welcome the opportunity to work with you, Mr. President.

Mr. Chairman, I reserve the balance of my time.

ANNOUNCEMENT BY THE CHAIR

The CHAIR. Members are reminded to address their remarks to the Chair.

Mr. OBEY. Mr. Chairman, pursuant to the rule, I yield 15 minutes to the chairman of the Ways and Means Committee, Mr. RANGEL; 15 minutes to the chairman of the Energy and Commerce Committee, Mr. WAXMAN; 10 minutes to the chairman of the Education and Labor Committee, Mr. MILLER; 10 minutes to the chairman of the Transportation and Infrastructure Committee, Mr. OBERSTAR; 5 minutes to Ms. GIFFORDS of the Science and Technology Committee; 5 minutes to the chairwoman of the Small Business Committee, Ms. VELÁZQUEZ; 5 minutes to the chairman of the Budget Committee, Mr. SPRATT; and 2 minutes to the chairman of the Government Investigations Committee, Mr. TOWNS.

The CHAIR. Members so designated will control the time mentioned.

The Chair recognizes the gentleman from New York.

Mr. RANGEL. Mr. Chairman, I yield myself 3 minutes.

(Mr. RANGEL asked and was given permission to revise and extend his remarks.)

Mr. RANGEL. My colleagues, someone once said that when the going gets tough, the tough get going. I think of our great country, knowing that through the Depression, that's just what happened. We came back stronger, more competitive, and became a nation that was respected. I remember so clearly in 1941 they thought America was a loser. We almost lost our entire fleet. But what happened after that? Again America came back stronger as a world power economically and militarily. And now we're in trouble again.

This $275 billion bill brings relief. The Ways and Means Committee is proud to bring this to you for your consideration. It doesn't help our banks. It doesn't help our fiscal institutions. They don't cry. But those of us who go back home know who's doing the crying: those people who work hard every day, and yet they're losing their jobs, they're losing their dignity, they're losing their homes, they can't put food on the table.

There is only one way to do it, and that is to be equitable and to make certain that we have a decent and fair response to their tax relief, and that's what we intend to do.

We provide $144 million to people who work every day to put food on the table, to be able to get clothes for their children. And the reason they don't have confidence is because they don't have money, and we provide that for them. For families that are low income that have children, we try to provide something not only for those people who don't have tax liability immediately but to relieve them of that payroll tax, because at the end of the day, it's what you take home and not what you call it.

For working families we have the earned income tax credit. And we tried desperately hard to make certain that for those people who have lost their jobs that they not lose their dignity, they not lose their health insurance, and that they be able to get education and retraining.

For small businesses, unless we have the people who are working that have resources to be able to buy, we try to help our small businesses by giving them an easy opportunity to depreciate and to buy equipment and not to have to lay off.

And one of the most important parts of our bill is something that they'll never be able to take away from our great country, and that is education and technology training. So we can come back stronger. We can come back notwithstanding what's happening here. And I can't see anybody in this House going back home saying we didn't do enough because for those that are out there feeling the pain of what we're going through, they are just waiting for relief to be coming. And our President has promised this, our leadership has promised this, and this is the time for the Congress to be a part of that.

The health information technology is not only going to save lives, it's going to be able to say at the end of the day that we moved forward to make our country healthier, better educated, knowing more about technology. And once we do that, when people ask how are you going to pay back the money, you don't pay it as a sick Nation. You pay it back as an educated, healthy Nation that restored the dignity and prosperity that we know. And so we find Members will have ribbons on, and I refer you to the RECORD to know more about the bill.

Mr. Chairman, I reserve the balance of my time.

Mr. LEWIS of California. Mr. Chairman, I yield 4 minutes to the original chairman of the Homeland Security Subcommittee of Appropriations, the gentleman from Kentucky, HAL ROGERS.

(Mr. ROGERS of Kentucky asked and was given permission to revise and extend his remarks.)

Mr. ROGERS of Kentucky. Mr. Chairman, there is no question but that the Congress must act swiftly and boldly to counteract the downturn in the economy. But there's a difference between actions that are swift and bold and spending huge sums of borrowed money irresponsibly.

When the dust finally settles on this boondoggle, perhaps then we will face the facts regarding this colossal trillion dollar spending bill. And the fact is that the Pelosi-Obey bill isn't an economic stimulus plan at all, but a rampant spending spree, much of which has nothing to do with bailing out a sagging economy, but with a liberal litany of left-leaning, big government programs.

We need a true stimulus bill. That much we can all agree on. But it needs to be aimed directly at creating jobs. It needs to give real incentives to small businesses, which create three out of four new jobs in the country. It needs to have a strict oversight program, given the recent TARP fiasco. And it needs to solely focus on stimulating the economy, not a mandate to overspend on a broad range of government programs.

First, this bill is not aimed directly at job creation. According to the Congressional Budget Office, a nonpartisan office, only 40 percent of the discretionary funds in this bill will actually stimulate the economy and create jobs by 2010. Economists all across the Nation question the wisdom of the U.S. Government's competing for debt financing, when our small businesses are

struggling to refinance their own debt. How does squeezing out our small business owners help create jobs in this troubled economy?

Editorial boards across the country are questioning the spending priorities that have needlessly crept into this bill: $50 million for the National Endowment for the Arts, $200 million for tree trimming and sod planting on the National Mall, $150 million for Smithsonian facility upgrades, $16 billion in Pell grants for college students.

To quote The Washington Post, which I rarely do: ''All of those ideas may have merit, but why do they belong in an emergency measure aimed to kick-start the economy?''

If the majority wants to debate funding for the arts, let's do it in the annual Interior Appropriations bill. If the majority wants to increase Pell grant funding, bring it up through the annual education spending bill that's coming up shortly. And if you want to go out and borrow another $825 billion from your children in the name of saving the economy, we should demand that it be spent producing jobs for Americans.

The true drivers of this economy, the small business owners, are literally left out in the cold. While we're planting sod and cleaning up trash on the National Mall to the tune of $200 million, we are only allocating a fraction of that amount to our small business owners across the Nation in the form of tax breaks. It's not hard to see where the true priorities lie with this majority.

Second, who knows where this money will go? The bill fails to demand a full accounting of the funds before they are allocated. Last week's disapproval vote of more TARP funds would make you think that we'd learned a thing or two about writing a blank check to the administration without seeing how they intend to spend it. But apparently we haven't.

The CHAIR. The time of the gentleman has expired.

Mr. LEWIS of California. Mr. Chairman, I yield the gentleman an additional minute.

Mr. ROGERS of Kentucky. When the Appropriations Committee considered this legislation last week, the minority put forth several thoughtful, fiscally-responsible proposals to prioritize infrastructure investment and demand greater accountability, all denied on a party-line vote.

I proposed an amendment that withheld a portion of these funds until a simple spending plan was submitted to Congress, a plan requiring expenditure details, all rejected. It's a sad day when the majority won't even allow the formulation of a plan before spending bonanzas begin.

Mr. Chairman, this bill should be about encouraging our small businesses to create jobs and providing the proper oversight and accountability that working families deserve. Unfortunately, this bill fails miserably on both counts.

If money is no object, if success is not your goal, if accountability is not important to you, vote for this bill. But I urge Members to oppose this bill and support a bill that actually creates jobs and demands accountability for the taxpayers.

□ 1715

Mr. RANGEL. I yield 2 minutes to the gentleman from Washington (Mr. MCDERMOTT), who will share with you our concern about people who have lost their jobs.

(Mr. MCDERMOTT asked and was given permission to revise and extend his remarks.)

Mr. MCDERMOTT. Mr. Chairman, every day and every corner of this Nation, and every sector of this economy, the casualties keep mounting. Seventy-five thousand people lost their jobs yesterday, at Alcoa, Boeing, Caterpillar, Home Depot, Intel, Microsoft, Pfizer, Sprint, Texas Instruments and many small businesses. Over 11 million Americans have already lost their jobs, the highest level in 25 years, and every major economist says it's going to get worse before it gets better.

Behind every number is a personal story of an American family struggling to cope with and survive this economic crisis. Behind every story is an American who deserves our help, who has earned our help on the job and has every right to expect Congress to act with all deliberate speed. We must not let them down.

Helping these Americans while they look for work is not only the right thing to do for them, it is the only thing we can do in our economy. Unemployment insurance is one of the most effective forms of economic stimulus, because jobless Americans have little choice but to spend the money that's given them.

Every unemployment insurance dollar spent returns an economic impact of $1.64. That's the kind of significant return on investment that will help America restart its economic engine. This recovery engine responds to rising unemployment with a historic level of assistance. It provides $27 billion for a program of extended benefits. For the first time ever, this legislation provides financial incentives for States to modernize their unemployment insurance programs and increase access to benefits.

For the first time ever, this legislation provides a Federal supplement to increase unemployment benefits by an extra $100 a month for the next year, and, again for the first time, we will provide assistance to unemployed workers who are trying to afford health care coverage. The primary goal of this legislation is to create jobs, but we must also help the unemployed as those jobs are being created, and this measure does just that. By voting for this bill, we are standing up for the American people and standing alongside the American people right where we belong.

I urge support for this critically important legislation.

Mr. LEWIS of California. Mr. Chairman, I yield 3 minutes to the gentleman from Virginia (Mr. WOLF), a member of the committee.

(Mr. WOLF asked and was given permission to revise and extend his remarks.)

Mr. WOLF. Mr. Chairman, I think this bill really ignores the major issue that we are really facing. Our Nation is fundamentally broke, but we have $57 trillion of unfunded obligations. The Ways and Means Committee, with all due respect, is doing nothing about dealing with this issue.

I have a bill in with JIM COOPER and Senator CONRAD, Senators CONRAD and GREGG have it over on the Senate side, that creates a bipartisan commission similar to what we did on the Iraq Study Group with every spending program, including Medicare, Medicaid and Social Security and tax policy. Some on my side won't like that, a tax policy on the table, and we give the commission 1 year to go around the country holding public hearings, coming up with a proposal to require, to require this institution that has fundamentally failed to do its responsibility.

Now, China holds a large portion of our debt. People talk about it, but yet nobody does anything about it. If the Chair of the Ways and Means Committee gets on the train in Washington and takes it to New York City and looks to the right and to the left, the factories are in decay. There is graffiti all over the walls, the windows are broken. You come through my old neighborhood in Philadelphia, and it's in decay.

By doing this, by getting control of our spending in a way that would honestly do it in a bipartisan way, I would tell the Chair of the committee, we would bring about a renaissance in this Nation whereby we would have the ability to invest in Alzheimer's research and autism research and cancer research and manufacturing to create new jobs that really show that America is back. So I think the failure of this bill is that this provision is not in it.

The last issue is, I call it the father amendment or the mother amendment or the grandmother/grandmother amendment, all of us at some time are going to get an opportunity, and we are going to leave here. And our grandkids are going to say, you know, Dad, when you were there, or Mom, when you were there, or Grandpop, when you were there, or Grandmom, when you were there, did you know that China was buying our debt up? Did you know the Saudis were buying our debt up? Did you really know, Grandfather or Grandmother, that our factories were in decay? Did you know that they controlled our debt? Did you? Did you, Pop? Pop, did you do anything about it? Dad, did you do anything about it?

And the answer is, as of now, this Congress, and let me just say, both political parties, have fundamentally

failed. So you are going to have to tell your kids and your grandkids, no.

When I was there, as of January of 2009, we did nothing, and we allowed our country to fall into decline. This amendment ought to be, it ought to be in the Republican substitute, and it's not, and I voted against the Republican substitute. It ought to be in this, and it's not, and I voted against this. And if this does not pass, Barack Obama will preside over the decline of this Nation when he is running for reelection as President of this Nation in 4 years.

Mr. RANGEL. Mr. Chairman, I yield 1 minute to the gentleman from Oregon (Mr. BLUMENAUER), who is going to share with us his dreams about a country that is not dependent on fossil fuel.

Mr. BLUMENAUER. Thank you. I appreciate the gentleman's recognition. I appreciate Mr. LEVIN's courtesy.

I have been listening to our friends on the other side of the aisle. These are the architects of the Bush economic meltdown, who have given him billions and billions and billions of borrowed dollars, blank checks, to the last administration. All of a sudden, they are fiscally interested.

Well, let me just say, we just left a Budget Committee meeting where we had five brilliant respected Ph.D.s from all across the spectrum who said we are on uncharted water, you should err on the side of a larger stimulus, not a smaller, and that one of the most important areas deals with energy.

I am proud that we have taken these provisions that we have been dancing around for the last 3 or 4 years and playing Russian roulette with where the private sector couldn't invest in them. It was on again, off again. Now we have made them certain and indefinite. We have encouraged these investments by increasing the level and giving them a longer period of time to cope with them.

I think all of us ought to embrace this. These are provisions that are investing in our energy future. They are going to create jobs, they are going to fight global warming, and they are going to help us in the international arena.

Mr. LEWIS of California. Mr. Chairman, I yield 2 minutes to the gentleman from Georgia (Mr. KINGSTON), a member of the committee.

Mr. KINGSTON. I thank the gentleman for yielding.

I was in a meeting today with the Republican Party and President Obama, and we pledged to work with him to turn this economy around, and we feel very serious about working with the President on a bipartisan basis.

But as we look at the stimulus package, I don't think this is quite what he had in mind. Only 7 percent of the appropriation goes to shovel-ready projects, only 13 percent in general goes to public works-type projects. At that rate it spends $275,000 per job, and the household income for America is about $50,000. This is not bold enough in terms of job creation for the targeted 3 to 4 million jobs.

The second part is this bill creates 32 brand new Federal programs at a cost of $136 billion, new spending, and yet we didn't have hearings on all of these new programs.

Then it has extension of some spending that we already have, millions of dollars for contraceptives, $50 million for the National Endowment for the Arts, $200 million for grass resodding on The Mall. In fact, for every $1 in small business tax relief, this bill gives $4 to resod The National Mall, and $600 million to prepare the country for universal health care.

And then, as Mr. WOLF said, we are going to talk about the debt. Our Nation is $10.6 trillion in debt.

Now, the worst Republican deficit was $412 billion. The Democrats this quarter will exceed $1 trillion in deficit spending and, as Mr. WALZ said, we owe $3 trillion to other countries, led by China.

I sit on the Agriculture Committee. We have about $26 billion in the Agriculture portion of this bill, but only $1.7 billion is spent on public works, things that will create jobs. The rest of it is traditional left-wing spending, expansion of the Food Stamp Program, even though food stamps has an automatic enrollment, and it also has an automatic inflation guard. But we are increasing food stamps.

The CHAIR. The time of the gentleman has expired.

Mr. LEWIS of California. I yield the gentleman 30 additional seconds.

Mr. KINGSTON. This changes our $400 million loan program to extend broadband, changes it to a $2.8 billion grant program, thus creating one of the largest corporate welfare elements that's out there—and I don't know how that creates jobs—and $23 million for the Inspector General for audits, and how does that create jobs. There are better ways.

We should reduce unfunded mandates, we should increase the public works, we should have more tax cuts for small business, we should implement the SAFE Act, and we should reward responsible behavior.

ANNOUNCEMENT BY THE CHAIR

The CHAIR. All Members are advised not to traffic in the well when a Member is under recognition, as a matter of courtesy.

Mr. OBEY. I yield 1 minute to the gentleman from Washington (Mr. DICKS).

Mr. KINGSTON. I want to say I apologize.

Mr. DICKS. Well, I accept the gentleman's apology, but he was inaccurate on what he said. That is something I cannot forgive him for.

Out of the $200 million for The Mall, $150 million is to save the Jefferson Monument from sinking, sinking, into the Tidal Basin. Only part of the money is used to resod the grass, and, there is money also to protect and restore the Sylvan Theater as well.

There is a national group that has organized to restore The National Mall. We just saw $1.8 million Americans come and stand on that Mall. It is a national treasure. It is part of the Park Service. It deserves to be fixed.

Mr. LEWIS of California. Mr. Chairman, I yield 3 minutes to the chairman of our committee, the gentleman from New Jersey (Mr. FRELINGHUYSEN).

Mr. FRELINGHUYSEN. I thank the gentleman for yielding.

Mr. Chairman, there is no greater challenge facing our families and businesses today with our Nation's struggling economy. The past few months have been absolutely traumatic for many. There is genuine anxiety and fear about job security, loss of savings, a serious drop in home values and the decline of the value of personal investments.

As a result, consumer confidence is at historic lows. Quite correctly, Americans are asking for help. We must respond by passing an economic package as quickly as possible. However, we must make sure that that response is effective, efficient and timely.

Unfortunately, the bill the majority has placed before us today does not meet those common-sense standards. Clearly, many Americans find themselves in real trouble and in need of relief. Provisions of this bill, such as the extended unemployment benefits, nutrition assistance and job training are critically important to help many Americans struggle through hard times. However, they have little to do with creating 3 to 4 million jobs.

However, there is a significant role for government to play in the targeted infrastructure, investment, roads, tunnels, bridges, sewers, flood control.

□ 1730

As Mr. LEWIS said earlier, many of the majority have described this legislation as a transportation and infrastructure investment package. However, only $30 billion of that, or 3 percent of the funding, is directed towards shovel-ready road and highway spending that would immediately create jobs. And there's a $61 billion backlog in Army Corps projects that could be addressed immediately.

According to the nonpartisan Congressional Budget Office, less than half the spending in this stimulus package will be paid out in the next 2 years. At that rate, an economic recovery will probably outrun most of that spending.

This should worry all Americans. This isn't just a stimulus package; it is legislation jam packed with a lot of domestic spending, even if there's no evidence that that spending will create jobs or prevent layoffs.

I note that the majority proposes a $79 billion State stabilization fund. Apparently, this program is designed to bail out some—I repeat—some States that did little to control their own spending and bonded indebtedness in recent years.

Take my own State of New Jersey as an example. In the last 6 years, New Jersey State spending has increased by

$11 billion, and our State's debt has more than doubled to $36 billion. Clearly, this is not a picture of restraint. Add to that picture some of the highest taxes in income taxes in the Nation.

In other words, while the Federal budget deficit has exploded, Federal taxpayers are now supposed to pull some State governments out of a fiscal hole that was partially of their own making.

Mr. OBEY. Mr. Chairman, I yield myself 1 minute. Mr. Chairman, if we are going to quote CBO, we ought to quote CBO accurately. In fact, the Congressional Budget Office has said that, in their estimate, 65 percent of the money in this bill will be spent in the next 2 years. The administration's estimate is 75 percent.

I would point out CBO also says that over the next 2 years this bill will inject $526 billion into the economy, and they state that the implementation of this bill ''would have a noticeable impact on economic growth and employment in the next few years.'' That is a whole lot better than doing nothing.

Mr. LEWIS of California. Mr. Chairman, I yield 2 minutes to a member of the committee, the gentleman from Kansas (Mr. TIAHRT).

Mr. TIAHRT. I thank the gentleman from California.

Mr. Chairman, there is no argument that our economy is on a downhill slide. Chairman OBEY conveyed that very well in his opening remarks. But there is an argument on how we get out of this economic slide downwards.

The bill before us is based on the philosophy that government spending will stir the economy. It will not. Historically, we know that bailouts and government spending simply don't work.

During the Great Depression, high Federal spending did not save our economy. Instead, it remained stagnant. World War II built the industrial base. And it was in the 1950s, with the private sector, that drove us to a number one economy in the world.

In the 1990s, Japan tried to stimulate their economy with the bailout of banks and with federal government spending. They borrowed the equivalent of $250 billion and spent it. What happened? Their economy remained stagnant, and their average per capita income went from second in the world to tenth in the world.

This bill has the same idea that failed in the 1930s and failed in Japan: borrowed money, Federal spending. But there is a better plan. Let's get the money directly to working Americans.

Let's cancel the unauthorized and new programs and new spending in this bill and return it in the form of waived payroll taxes for working Americans. Give them a vacation from payroll taxes. It will be like a 10 percent pay raise.

We all know what they will do with it. They will do one of three things. They will either save it, which helps the banks recapitalize and creates mortgages and home sales; or they will spend it, which creates a demand for goods and a demand for more jobs; or they will invest it, which means companies can expand their businesses and hire more employees.

All we have to do is exchange the unauthorized new government spending and transfer that money back to hard-working Americans who earn the money. A very simple concept that will have a direct stimulation to our economy. And it will happen this year. We will not be waiting until 2010 or 2011 or 2012 or 2013. It will happen this year.

So let's cancel those new unauthorized programs and give back the taxes to working Americans and get the economy rolling.

Mr. RANGEL. Mr. Chairman, I yield 1 minute to the gentleman from Michigan (Mr. LEVIN).

(Mr. LEVIN asked and was given permission to revise and extend his remarks.)

Mr. LEVIN. Well, the opponents of this bill say there is a dramatic set of conditions that are new, but they have too narrow a focus, and they are singing the same old song, and we just heard it.

There are crises of confidence in this country, and this bill addresses it. There's a crisis of confidence in jobs. This bill addresses the need for jobs and for those who lose them. Families are worried about the education of their kids, and they wonder whether the government will respond. This bill provides, I think, $140 billion to make sure that the education of the kids in this country will continue.

Families are worried about whether health care will continue. This bill provides dramatic new provisions for health care for 8 million families, at least, in this country.

Vote for this bill.

Mr. LEWIS of California. Mr. Chairman, I yield 3 minutes to a member of this committee, the gentleman from Iowa (Mr. LATHAM).

Mr. LATHAM. I thank the ranking member.

Mr. Chairman, we all know that we are in unprecedented economic times that call for unprecedented action. The bill we have under consideration is certainly unprecedented because of the size itself. $825 billion. That is just for now, without the add-ons we expect over in the Senate.

This measure will have an unprecedented impact on the deficit by increasing it by hundreds of billions of dollars over the next few years. In turn, this dramatic rise will trigger large-scale borrowing from the future incomes of our children and our grandchildren.

These add-on deficits will cause the Nation's debt to soar to a level at which we will owe interest payments of more than $750 billion per year by the year 2019, according to the Congressional Budget Office. Those numbers assume that the stimulus package actually works—and we don't know for certain that it will work.

I raise these points because with spending numbers this high, we need to get it right. While there are certainly some good qualities to this bill, there are also numerous elements thus far, including spendout rates noted by CBO, that raise questions about the stimulus impact of the bill. Currently, there are estimates on the job creation potential of the bill that show only about 10 percent of the funds creating jobs. If those estimates are accurate, the question arises as to where the other funds are going.

Some analyses show that the lion's share of the monies in this bill are destined for expansion of an assortment of government programs that have nothing to do with economic stimulus. Moreover, these programs are ones that are funded each year through the normal appropriations process, and will be funded again in 2010.

That tells me that we are using this bill to expand the funding scope of certain programs in order to make room for additional spending in the 2010 cycle. We are calling this extra spending ''emergency'' spending so we will not have to find a way to pay for it. Whether we call it emergency, or something else, the deficit effect is still the same, and our children will pay for it.

Many of these programs already have large, unexpended balances. For example, there's $5 billion for public housing. Yet, we have close to $7 billion in unexpended public housing balances.

Many of the proponents of this bill talk of the need to rebuild the Nation's highway and bridge infrastructure, and speak of the job creation potential of these activities. Yet, the highway portion of this bill contains less than 4 percent of the total funding.

I am very supportive of legitimate stimulus that results in net economic activity and job creation. For that reason, I offered an amendment in the full committee designed to ensure that all stimulus funds would produce net economic activity and not supplant existing funds. I also cosponsored an amendment with Mr. FRELINGHUYSEN that would have moved some $60 billion to transportation, flood control, and environmental restoration projects.

Ladies and gentlemen, our children and grandchildren are going to pay for this debt.

Mr. OBEY. I yield myself 15 seconds. My friend from Iowa says that this bill is too big. I will make a deal with him. I will be happy to give him a smaller bill if he will show me a smaller problem.

Mr. LEWIS of California. Speaking of smaller problems, I might mention I had hoped that the chairman put that Jefferson Memorial problem in the 2009 bill, which is yet to be passed, through the whole process.

I yield 2 minutes to the gentlewoman from Missouri (Mrs. EMERSON.)

Mrs. EMERSON. Let me say how pleased I am to be the ranking member of the Financial Services and General Government Subcommittee for the

111th Congress and look forward to working cooperatively with Chairman SERRANO.

Regarding the Financial Services section of the recovery bill we are debating today, I am disappointed that neither I nor the minority's committee staff were given an opportunity to consult with the majority members or staff before the bill was produced and unveiled on the Internet.

One percent. One percent sound like a small amount but in this bill even one-tenth of 1 percent is not trivial. Here's an example. This bill includes $7.7 billion for the GSA to build and renovate new Federal buildings and ports of entry. It's nearly 1 percent of the bill. However, in fiscal year 2008, GSA received a total appropriation of only $1.4 billion for construction and renovations.

Now, most of us know from personal experience that GSA construction projects in our districts are hardly ever completed on time, and never under budget. At its highest levels, this is an agency that needs a wake-up call and a good scrubbing behind the ears. What it does not need is 5½ years' worth of annual budget appropriations to spend in 120 days, a task it most certainly cannot accomplish with any semblance of efficiency.

GSA lacks the contracting, program management and building engineering expertise to go from $1.4 billion in appropriations to $7.7 billion in just 1 year. Giving GSA the keys to nearly 1 percent of the stimulus package will result in gross mismanagement and future funding liabilities.

Additionally, according to lists provided by GSA of the projects they list that can be awarded within 120 days, 36 percent, or $2 billion, are in Washington, DC. In a bill for the economic health of our entire Nation, Washington is surely getting the lion's share.

I am also concerned with $600 million in the bill for the purchase of vehicles for Federal agencies. The bill states that these are to be primarily alternative fuel and plug-in hybrid vehicles, technologies I greatly support. However, there's currently no U.S. production for plug-in vehicles, and they won't be here until after the deadline of this bill has passed.

The CHAIR. The time of the gentlewoman has expired.

Mr. LEWIS of California. I yield the gentlelady 30 additional seconds.

Mrs. EMERSON. Additionally, the lack of fueling stations for these vehicles could produce a fleet of cars and trucks in this country that could create new obstacles for Federal agencies. Even David Brooks of the New York Times noted that concerns such as this one ''were cast aside with bland reassurances'' in our committee markup of this bill.

Mr. Chair, this is neither what we should be doing with the taxpayers' money, nor how we should be doing it.

Mr. RANGEL. I yield 1 minute to the gentleman from Texas (Mr. DOGGETT).

Mr. DOGGETT. One way this bill promotes economic recovery is by promoting educational opportunity. $13½ billion of targeted tax relief to help young people and not so young people attend college. Today, one out of five graduating high school students does not qualify for this assistance. But, because we provided a refundable tax credit, we help them, just as the appropriations section of this bill helps with expanded Pell Grants and other direct aid.

For one of these, Brad Burnett at Austin Community College, he says, ''Getting a college education means breaking a generations' long cycle of poverty within my family that lets me fulfill the American dream.''

For the first time, we cover textbooks and instructional materials under this bill. As we provide this individual opportunity, we upgrade the skills of our workforce and help climb out of this economic recession. For students, this is a bill that provides hope we can believe in. And for every one of these students who uses the opportunities in this bill, it can provide a diploma that they can count on.

Mr. LEWIS of California. Mr. Chairman, I yield 3 minutes to the gentleman from Idaho (Mr. SIMPSON).

Mr. SIMPSON. I thank the ranking member for the time. Everyone on this floor agrees that something needs to be done in terms of stimulating this economy. We all know that we are in difficult times. I also agree with Speaker PELOSI that any stimulus plan needs to be timely, temporary, and targeted.

It is timely. We need to do something. We know we need to do it quickly. Targeted. This would be targeted if your weapon was a scatter gun, because everything but the kitchen sink has been thrown into this appropriation bill.

□ 1745

Temporary? It would take a stretch of the imagination to believe that this was temporary.

Today, President Obama came and spoke with us. He said that he didn't want programs started that had what he called ''a long tail,'' and that meant that it contributed to the long-term deficit of this country and that they were going to have to cut in later years.

I will tell you that there is nothing as eternal on this earth as a temporary government program. We all know that. I give you one example, school construction. We are going to start a school construction program. It has never been authorized before, but we are going to start one here. Does anybody really believe that we will then end it after 3 or 4 or 5 years whenever this slowdown in our economy turns around? It will be going on forever. We all know that.

We have a number of programs that have never been debated; I can't remember the exact number, something like 32 new authorizations, that have never been debated in committee. They may be appropriate, I don't know, but we have never debated them to see if they should be authorized and whether they can compete against other programs for the limited amount of money. Well, the unlimited amount of money we apparently have in this bill.

In other cases, the spend-out is 3 or 4 or 5 years down the road. And I would ask you, why are we appropriating money for a program that will spend out money in 4 or 5 years down the road when we all hope that this economy has turned around? But yet, we are appropriating money now for that spend-out. It just doesn't make sense.

Why don't we go through the regular appropriation process to do that? I will give you one example dealing with the National Mall that we have talked about here today.

The Tidal Basin work alone has had huge swings in cost estimates for the very complicated and extensive work. In late December, the Park Service told the subcommittee that the Mall work alone could cost $600 million, and now that number is $20 million. In late December, the Park Service Budget Office told the subcommittee staff that they could use only $15 million to $20 million for planning and design the next 2 years, which seemed honest and logical given the size of the plan. Now, they claim they can spend over $200 million over the next 2 years.

Our problem is that these things should be going through the regular appropriation process, and they are not. And there is a reason that they are not: It is because every idea that anyone has ever had for spending that they think is appropriate has been thrown into this bill to avoid the PAYGO rules. We all know that is the case, and we need to redo this bill and target it.

Mr. RANGEL. At this time I yield 1 minute to the gentleman from California (Mr. THOMPSON), who will share his idea of a new America.

Mr. THOMPSON of California. Mr. Chairman, the green stimulus provisions in this bill will generate tens of thousands of jobs and result in billions of dollars in economic investment.

Solar tax provisions that I authored will allow State and local governments, like Sonoma County in my district, to help homeowners and businesses more easily finance the purchase of solar. We are also making other critical investments in solar by creating a grant program to incentivize businesses to invest in renewable technology today, instead of waiting until the economy improves. An additional $4 billion in bonds for use in renewable energy projects will be available for State and local governments as well.

These are just a few of the green stimulus provisions. Not only will this bill create green jobs that our economy needs today, but it will also enhance the long-term security and sustainability of our economy by investing in a smart-energy future that helps free us from our dependency on foreign oil.

I encourage everyone to vote ''aye'' on this bill.

Mr. LEWIS of California. Mr. Chairman, I am proud to yield 3 minutes to the gentleman from Florida (Mr. CRENSHAW).

Mr. CRENSHAW. I thank the gentleman for yielding the time.

Let me say that a lot of people I hear say they want to oppose this package because you really can't spend your way out of a recession; and, therefore, if spending is the only answer, then why not spend twice as much and get out of the problem twice as fast? But those same people think that maybe you shouldn't do anything, and I think they are just as wrong, to stand here and do nothing in the midst of this tremendous economic crisis.

But I do think we have to put a test to anything we try to do. It was pointed out earlier, and I have heard a lot of discussion: If you are going to have a stimulus package, it ought to meet certain criteria. It ought to be focused, targeted, if you will; it ought to be timely in the sense that it ought to begin to act immediately; and it ought not to last forever. And it seems to me, when I look at those three criteria, this package fails on all three counts. It is not focused. It is not targeted. It seems to be a hodgepodge, just kind of quickly thrown together, 152 different appropriations. No strategic vision involved, no underlying theme, just a little bit of spending on everything you wanted to spend money on but were afraid to ask, until now. And it, I think clearly, in so many cases doesn't pretend to be timely. When you do research, when you do student special education, how does that quickly kickstart the economy? It fails that test. And, finally, if we badly design a package like this, it will continue on, and the $1.2 trillion deficit becomes $2 trillion.

So I think there is a better way, and I think the Republicans have put forward that; because if we go through with a poorly, badly designed stimulus package, we are going to end up, in the words of Tennessee Ernie Ford, his old song, when he said we will just end up ''another day older and deeper in debt.'' So I think there is a better way.

Mr. RANGEL. Mr. Chairman, I would like to yield 1 minute to my friend from New Jersey (Mr. PASCRELL).

Mr. PASCRELL. Many of us in this body, including myself, have been speaking about the perfect storm developing in this economy before 9/11. The truth is, we should have taken this aggressive action years ago. Today, we have finally constructed legislation which directly invests in the good people of America.

Through middle-class tax cuts, direct aid to State and local governments, and reinvestment in renewable energy, Congress is taking an affirmative step to enable economic recovery.

Mr. Chairman, just think of how municipalities will be able to take advantage of tax exempt bonds and tax credit bonds, and I speak as a former mayor, in depressed areas throughout the United States to provide municipalities with the wherewithal to really, really move this economy and provide jobs to our American people.

To ensure our children can compete and succeed in the troubling economy, we will renovate and modernize 10,000 schools. Who said it didn't work back in the thirties? Who said it?

Through this bill we also make college affordable and provide a $2,500 college tax credit to 4 million students, and triple the number of fellowships in science to help spur the next generation of innovation.

This legislation invests American tax dollars in real infrastructure projects that are ready to go. Specifically, this plan allocates money for the repairing and modernizing of thousands of miles of America's roadways and providing new mass transit options for millions of Americans.

I want to commend my colleagues for their leadership and commitment to taking an explicit and aggressive lead in the creation of a comprehensive economic recovery and reinvestment package.

I urge all of my colleagues on both sides of the aisle to take swift and decisive action to pass this legislation.

Mr. LEWIS of California. Mr. Chairman, I yield 1 minute to the gentleman from California (Mr. MCCLINTOCK).

Mr. MCCLINTOCK. I thank the gentleman for yielding.

Mr. Chairman, with this measure the new administration seems bound and determined to continue the failed policy of the past administration. It proves what I like to call McClintock's Second Law of Political Physics, which is, the more we spend on our mistakes, the less willing we are to admit them.

This policy has failed every time and every place it has been tried for a simple reason: Government cannot inject a single dollar into the economy that it has not first taken out of the same economy.

If I take a dollar from Peter and give it to Paul, it is true that Paul now has an extra dollar to spend; and, when he spends it, that dollar is going to ripple through the economy. The gentleman is correct. But the gentleman forgets that Peter now has one less dollar to spend in that same economy. In short, it nets to zero. In fact, it nets to less than zero, because we are shifting enormous resources away from investments that would be based on economic calculations in favor of investments that are being made on political ones.

Mr. RANGEL. Mr. Chairman, I yield 1 minute to the gentleman from Maryland (Mr. VAN HOLLEN).

Mr. VAN HOLLEN. I thank the chairman, and rise in strong support of this legislation because of the boost it will provide to our ailing economy and the priority investments it makes in our Nation. To struggling families and communities around the country, with the passage of this bill we can say help is on the way.

We have heard from economists from all sides of the political spectrum, and they all agree inaction and doing nothing is not an option. We need to join together with our new President, President Obama, and act boldly and decisively, and that is what this legislation does, by directing $825 billion in stimulus where it is needed most, ready-to-go projects to put people back to work, investing in clean energy and the infrastructure we need for the 21st century, and middle-class tax relief for struggling American families so they have a little more breathing room in their budgets.

I am especially pleased with the provisions relating to energy efficiency and renewable energy that we have worked on, on a bipartisan basis, loan guarantees for renewable energy projects that are sidelined because of the credit crunch, and new authority for homeowners to retrofit their homes.

I urge passage of this legislation.

Mr. LEWIS of California. Mr. Chairman, I am proud to yield 1 minute to the gentleman from Georgia (Mr. BROUN).

Mr. BROUN of Georgia. I thank the gentleman for yielding.

I have a question for my Democratic colleagues: How would $50 million for the National Endowment of the Arts possibly stimulate our economy? It won't. And the thing is that this whole bill is actually a steamroller of socialism that is being forced down our throats, and the economy is going to choke to death on this steamroller of socialism that you all are bringing forward.

It is a nonstimulus bill. It is not going to stimulate the economy. It is going to create very few jobs, if any at all. For every dollar of tax relief, you all are going to spend $4 to put new grass on the Washington Mall. It is insane. It is absolutely insane the things that are in this bill.

I am going to vote ''no,'' and I encourage my colleagues to vote ''no,'' and I encourage the American people to stand up and say we are not going to tolerate this kind of stuff going on in this country.

We have got to slow down. We have got to look at alternatives that really will stimulate the economy, that is by reducing taxes and leaving dollars in the hands of the American public.

Mr. RANGEL. I yield 1 minute to the gentlelady from Nevada (Ms. BERKLEY), a hardworking member of the committee.

Ms. BERKLEY. I thank the chairman for yielding.

I grew up in my congressional district of Las Vegas. By any standard of measure, it has been a boomtown; record increases in population, almost no unemployment, record home ownership.

What a difference an economic meltdown can make. Nevada's economy, fueled by construction and tourism, has suffered beyond all imagination in this financial crisis. Las Vegas has the highest mortgage foreclosure rate in

the Nation, drastic drops in home values, and thousands of construction workers are without work. Casino workers, the backbone of our economy, laid off. The number of visitors flying to Las Vegas dropped 8 percent this past year, the largest drop in 25 years. My State needs help, and we need it now.

This bill will create or save millions of jobs over the next 2 years. In my district, thousands of construction workers will be put back to work improving roads and highways, building renewable energy facilities, improving aging school buildings and other infrastructure. The bill will also provide for extended unemployment benefits for the over 9 percent of my workforce out of work.

The bill will also provide extended unemployment benefits for the 9 percent of the workforce out of work and provide needed money for medicaid to provide health care to the neediest among us.

Ninety-five percent of our fellow citizens will get a tax cut.

Nevada and our country need the jobs and other support provided by this bill. I urge my colleagues to vote for H.R. 1.

Mr. LEWIS of California. Mr. Chairman, I yield 2 minutes to the gentleman from Texas (Mr. HENSARLING).

Mr. HENSARLING. I thank the gentleman for yielding.

Mr. Chairman, it is a sad day for the United States Congress. People are hurting throughout this entire economy. And instead of bringing a bill that would stimulate our economy, what we see before us is a bill that will simply stimulate big government.

You know, most Americans, Mr. Chairman, believe that the reason that we are in the problem economy that we have is because as a Nation we borrowed and spent too much. And, instead, we have a bill theoretically to solve our problem that borrows and spends too much. You cannot borrow and spend your way into prosperity.

Now, Mr. Chairman, if we were all Keynesians, and I assure you I am not, but if we were, all government spending is not created equal. The Keynesians would tell you. You look at this bill, 4 percent of this is spent on what most economists would call infrastructure, our roads and bridges.

We need tax relief for small businesses. We need tax relief for American families. And we need to do it in a way that doesn't send the bill to future generations. The tax relief for small businesses is as miniscule, less than 2 percent.

□ 1800

Instead, what we have is over half of this bill is to inflate big government. We have $50 million for the National Endowment for the Arts, $726 million for an after-school snack program, office furniture for the Public Health Service, $1 billion for the Census.

Mr. Chairman, the list goes on and on and on. And what we have is a bill that when you add the debt service is $1.2 trillion.

Mr. RANGEL. Mr. Chairman, I would like to yield 1 minute to the gentleman from Illinois (Mr. DAVIS), a new member of the committee, but a seasoned legislator.

Mr. DAVIS of Illinois. I want to thank the chairman for yielding.

I rise in strong support of this legislation, and I do so because it appears to me that it's actually tailor-made for my district and tailor-made for areas throughout the country. Most impressive about it for me is the fact that it provides the assistance to those at the very bottom of the socioeconomic scale, dislocated workers, individuals who have lost their jobs and individuals who are unemployed, money to assist States with their Medicaid deals, individuals who without it wouldn't know where to turn, wouldn't know what to do. It's interesting to hear about great giveaways. But do you know that what is a giveaway for some is a need for others?

There has never been more need for this legislation than right now. I commend Chairman RANGEL and all of the other chairpersons who have worked on it. It's a great piece of legislation. I will proudly vote for it.

The CHAIR. The gentleman from New York has 2 minutes remaining. The gentleman from California has 64½ minutes remaining.

Mr. LEWIS of California. I will be yielding time, Mr. Chairman, to others, so I will reserve my time for now.

Mr. RANGEL. I would like to yield 1 minute to the gentleman from Virginia (Mr. NYE), and commend him for his hard work to expand the work opportunity to encourage business to hire our beloved veterans.

Mr. NYE. I thank the chairman for his leadership and for giving me the opportunity to work with him to make sure that our veterans and our small businesses are included in this economic recovery package.

Mr. Chairman, helping businesses hire veterans makes good economic sense. That is why I strongly support the provision of this bill that would give substantial tax credits to businesses that hire unemployed veterans.

This proposal will reduce taxes for small businesses. It will bring more highly-trained workers into the workforce. And perhaps most importantly, it will help us keep faith with the men and women who have served our country in uniform.

In my home district, the Second District of Virginia, we're home to the largest population of military personnel and veterans in the country. And as the people of Hampton Roads can tell you, an investment in our veterans and small businesses is a responsible investment in our economy and a wise investment for our future.

I thank Chairman RANGEL for his leadership. I know he shares my commitment to standing up for all of our veterans, and I look forward to working with him on this issue as we continue to rebuild our economy.

Mr. LEWIS of California. Mr. Chairman, in order to ask a question, let me yield 30 seconds to the gentleman from Texas (Mr. HENSARLING).

Mr. HENSARLING. I thank the gentleman. I listened to the gentleman from Virginia carefully, and I'm curious. I would be happy to yield time to him.

When he talks about provisions that make economic sense, could he explain how $50 million to the National Endowment for the Arts makes economic sense for his congressional district? I would be happy to yield to the gentleman.

Mr. OBEY. I would be happy to respond to that if the gentleman wants to yield to me.

Mr. HENSARLING. The gentleman from Virginia was the one who spoke. So I'm happy to yield time to him. I see the gentleman is not interested in answering the question.

Mr. OBEY. I will be happy to respond to the gentleman if he wants, since I am responsible for the money in the bill.

Mr. HENSARLING. Well, I appreciate the offer of the chairman. But I have plenty of opportunities to speak with him.

The CHAIR. The gentleman from New York has 1 minute remaining.

Mr. RANGEL. Well, this could be one of the roughest times our great Nation has faced economically, but I think that history is going to recall this as one of the proudest moments that our Congress would be involved in. No, we're not taking care of banks or fiscal institutions or those who buy the jets. But we are taking care of our middle class. That is the heart of America. That is what pumps our economy. And that is why we're trying to help them by expanding their disposable income, helping the working families with kids, helping our veterans who are unemployed, bringing some relief to those who feel the pain yet are looking toward the future for new economies to make this a greener America, getting involved in high tech and helping people out with health.

In the final analysis, besides the flag, what makes us so great is that this country is going to be healthy, educated and competitive. And at the end of the day, it will be recalled that, yes, we got hit hard economically, but the strong middle class and this United States House of Representatives came forward, and we saved our country and we saved our economy.

Mr. LEWIS of California. Mr. Chairman, I yield 1 minute to the gentleman from Georgia (Mr. LINDER).

Mr. LINDER. I thank the gentleman for yielding.

Mr. Chairman, we have all heard the proverb that if you give a man a fish, he can eat for a day. If you teach him to fish, he can eat for a lifetime. This bill is full of fish going to deserving people to eat for 1 day. There is nothing in here for fishing rods. There is nothing in here for training.

To get out of the slump, we need to get people who are unemployed employed in real jobs with real companies. We have the second highest tax on corporations in the world. Lowering that tax burden would help get people hired. To hire people, most of whom will be hired by small businesses, the owner of that business needs a predictable future. This gives him none of that.

The other side is very proud to say that 95 percent are going to get a tax cut. But that tax cut means a refundable tax credit for people who do not pay taxes. Today, 15 million people get their income tax rebated plus a payroll tax plus more from the taxpayer.

The CHAIR. The gentleman from California (Mr. WAXMAN) is now controlling 15 minutes.

Mr. WAXMAN. Mr. Chairman, I yield myself 3 minutes.

Members of Congress and those who are watching our deliberations today, this is an important bill. We have 7 percent of the country unemployed, and that number is going up. So in this legislation, we are trying to put funds to help people get jobs and move our economy to a stronger position.

The Committee on Energy and Commerce has three important areas where we have made a contribution to this legislation. We have investments in building out a new broadband infrastructure. This will allow rural and other underserved areas to join the global economy. This legislation also provides $27 billion to accelerate deployment of smart grid technology, fund energy efficiency investments and establish a new loan guarantee program for renewable energy. These will provide new jobs. They will reduce our dependence on foreign oil. And they will protect our environment.

This bill contains important health provisions. The bill will help those people who lose their jobs by providing temporary health insurance. We do this in two ways. The COBRA program, which allows people to keep their insurance from their former employer, will be subsidized for those who want to hold on to that private insurance. It will also have a component to provide funds under the Medicaid program to cover the unemployed Americans who do not have COBRA coverage. Secondly, the bill would accelerate the nationwide adoption of health information technology. This investment will create high tech jobs, reduce medical errors and improve care. And thirdly, the bill will provide a temporary boost for State Medicaid programs facing surges in caseloads at the same time that the State has fewer resources in revenues. This is called the FMAP, the Federal Medicaid Assistance Program, and it would provide additional funds for States with particularly high unemployment.

In this bill, when it was reported out of committee, we had a sensible provision to allow low-income women better access to family planning services, one of the most important preventive health services we can provide. It also would allow women to stay in the workforce. Unfortunately, this provision has generated a firestorm of misinformation and unfounded criticism from the Republican members. I have spoken to President Obama about this provision. He strongly supports this cost-saving policy. He is committed, as I am, to seeing this provision become law. But we don't want this provision to become a distraction from the other legislation.

The CHAIR. The time of the gentleman has expired.

Mr. WAXMAN. I yield myself an additional 20 seconds.

So in order to keep the spotlight focused on the important task at hand, this provision will be removed from the bill. We will get it into the law in some other legislation later in the year.

We in this bill have an important down payment on programs that lead us in the right direction.

I urge my colleagues to support H.R. 1.

Mr. LEWIS of California. Mr. Chairman, I proudly yield 2 minutes to the gentleman from Indiana (Mr. BURTON).

Mr. BURTON of Indiana. I thank my good buddy for yielding.

Margaret Thatcher, the former Prime Minister of England, said that the problem with socialism is you eventually run out of somebody else's money. And what I'm concerned about here is not just the money we're spending today. We have spent $700 billion on the Wall Street bailout, and we don't know where most of that money has gone. Now we're going to put another $835 billion into this so-called economic stimulus bill.

President Obama said on January 16 that this plan is a significant down payment on our most urgent challenges. Vice President BIDEN said last Sunday that Timothy Geithner, the Treasury Secretary, will soon recommend to President Obama whether more money is needed beyond the $700 billion allocated to American banks. Lawrence Summers, the top economic adviser to the President, said that the government can't afford to spend more than $1 trillion to boost the economy and save financial institutions.

My question is, where does it end? We're printing so much money and we're going to spend so much money that we're going to put this whole country and our future generations into a deep hole which will lead us, in my opinion, to government control and socialism.

The thing that has made this country great is the free enterprise system and private enterprise and private individuals making a profit, creating jobs and making the economy flourish. What we're doing is we're turning this whole economy over to the government with more and more and more spending. And what we're doing today is just the beginning. We're talking about $2 trillion, $3 trillion, $4 trillion more down the road, and we can't afford it. We can't afford the inflation, and we certainly can't afford socialism and more government control.

Mr. WAXMAN. Mr. Chairman, I'm pleased at this time to yield 1 minute to the very distinguished gentleman from Ohio (Mr. SPACE), a new member of our committee who has played a very constructive and important role in the development of this bill.

Mr. SPACE. Mr. Chairman, I rise today to support the American Recovery and Reinvestment Act, and I would like to thank Chairman WAXMAN and the leadership for including funds in this bill for improved access to rural broadband. Put differently, it recognizes the importance of access to high-speed Internet technology for all communities, regardless of affluence or location.

This bill will help bridge the divide between rural America and urban and suburban America when it comes to access not only to technology, but what technology brings; better educational opportunities, better health-care related opportunities and certainly better economic development opportunities.

What we're saying in this bill is something that I have known for a long time. High speed Internet access is not a luxury. It is a necessity. And what we're saying with this bill today and with the allocation of these funds for rural broadband is that our rural communities will no longer be left behind and no longer be relegated to the sidelines of advancing technology.

Today is not a small step. It is a massive leap that will bring hundreds of thousands of Americans in Appalachian Ohio and in other underserved areas into the new century.

Mr. LEWIS of California. Mr. Chairman, I'm pleased to yield 1½ minutes to the gentleman from Nebraska (Mr. FORTENBERRY).

□ 1815

Mr. FORTENBERRY. Mr. Chair, I do not want to see any family face unemployment or foreclosure, or any business experience a downturn, but I fear we are suffering from a tyranny of worn-out ideas here.

This bill is called a stimulus bill, but I believe it is an unsustainable spending bill.

Mr. Chairman, when did we decide that more Federal spending in itself is economic stimulus? Since 2000, we have increased spending by about 60 percent in this country and the national debt has nearly doubled. Despite these growing expenditures, our economy has worsened, and we are left with an $11 trillion debt. And now we have a proposal that is before us that would be the largest spending bill in the United States history, and no plan to pay for it.

Will we continue to rely on foreign nations, such as China, already bankrolling our spending habits? Or just defer responsibility to our children

and our grandchildren and future generations? We are delaying tough choices and we are pushing reality down the road here. Much of this assistance goes to subsidizing States. Some States, like Nebraska, have thus far managed their budgets responsibly, even in tough times. I won't ask Nebraskans to pay for poor governance elsewhere.

Mr. Chair, I don't want to give a speech simply to oppose. There are some important, new bold ideas here, such as alternative energy for a sustainable energy future, a modern electrical grid and health information technology. But the entirety of the package puts us on a path of aggressive spending, in the name of stimulus, that will be nearly impossible to reverse.

Mr. WAXMAN. Mr. Chairman, I ask that the balance of our time be managed by the gentleman from New Jersey (Mr. PALLONE).

The Acting CHAIR (Mr. ALTMIRE). Without objection, the gentleman from New Jersey will control the time.

There was no objection.

Mr. PALLONE. Mr. Chairman, I yield myself 2 minutes.

Last year, 2.6 million jobs were lost, and on Monday alone four American companies announced that they were laying off 37,000 employees. When workers lose their jobs, many also lose their health insurance. And for those lucky enough to keep their coverage, many end up delaying medical care because they choose to use their limited resources on groceries and other basic necessities. These families need help, and they will get it from this economic recovery package.

This bill makes important improvements to COBRA coverage so it is more affordable for workers who have been laid off. In addition, for those workers who have lost their job but are not eligible for COBRA coverage, the bill creates a new temporary Medicaid option that will be paid for entirely by the Federal Government. Combined, these provisions will help provide health coverage to over 8 million Americans over the next year.

In addition, this bill will provide States with urgent fiscal relief. Right now, almost every State is experiencing a budget crisis. Governors are struggling to find ways to close these budget gaps, and many governors are starting to look at scaling back on their Medicaid programs, just as more and more people are in need of Medicaid services.

This bill provides critical financial assistance so States are not forced to scale back their Medicaid programs and can continue to serve those in need.

We also make a significant investment in our economic future by investing $20 billion to help doctors and hospitals acquire and use health information technology. For years we have all been talking about the need to modernize our health care system, and this bill finally provides the means to do so. Not only does this legislation invest in our economy today, but it also makes our health care system safer and more efficient for years to come.

The recovery package answers the pleas from economists who said that we must act quickly and boldly, and it certainly deserves bipartisan support.

Mr. Chairman, I reserve the balance of my time.

Mr. LEWIS of California. Mr. Chairman, I yield 1 minute to the gentleman from Georgia (Mr. GINGREY).

Mr. GINGREY of Georgia. Mr. Chairman, I thank the distinguished ranking member for yielding me this time, and I do rise, unfortunately, in opposition to H.R. 1, the American Recovery and Reinvestment Act of 2009, the so-called stimulus package.

Mr. Chairman, we spent 12 hours in the Energy and Commerce Committee marking our portion of this bill up last week, and a few, a very few Republican amendments were approved and summarily stripped out as we see this new bill before us today.

But it is not really process that is my objection, it is just that I have a great fear that instead of throwing water on a fire, as it has been described, this economic problem that we have, we are about to throw kerosene on the fire and make the matter a lot worse. We tried to explain that to President Obama when he visited our conference today, and we want him to show some changes in the bill that we Republicans can accept, like more tax breaks for small businesses and entrepreneurs who create jobs.

I regretfully oppose the bill.

Mr. PALLONE. Mr. Chairman, I yield 1 minute to the gentleman from Washington (Mr. INSLEE).

(Mr. INSLEE asked and was given permission to revise and extend his remarks.)

Mr. INSLEE. Mr. Chairman, we are not launching just a stimulus package here, we are launching a new, clean energy rocket. We know how to launch revolutions in technology. We did it in the original Apollo project that started right in this Chamber when John F. Kennedy launched that project standing right behind me. In this bill today, we are launching a similarly ambitious and similarly important clean energy revolution.

The reason I say that is the next few years, when hundreds of people go to work building lithium-ion batteries for our advanced electric cars, like at the A123 Battery Company in Massachusetts, it is because of this bill. When hundreds of people go to work doing advanced photovoltaic panels, like at Nanosolar, a thin-film photovoltaic company in California, it is going to be because of this bill. When hundreds of people go to work making gasoline out of algae, like they are doing in the deserts of Nevada, it is because of this bill. We are launching a rocket, a revolution, today.

Mr. LEWIS of California. Mr. Chairman, I am pleased to yield 2 minutes to the gentleman from California (Mr. NUNES), a member of the Ways and Means Committee.

Mr. NUNES. Mr. Chairman, the significance of what we face can only be described as a generational challenge. Many of my colleagues seem to believe that the only solution is to spend enormous amounts of taxpayer money.

First we are told that we had to spend $700 billion to bail out Wall Street. Then we were told that, despite the bailout's failure, we needed another $350 billion. And now this Congress is told to approve nearly $1 trillion in a taxpayer-funded giveaway.

Mr. Chairman, perhaps it is time to remind my colleagues that this Nation is already facing unsustainable levels of government spending. Responsible action today is not to spend more, but to reform the way we do business and spend less. The current economic crisis should serve as a warning, a powerful warning to this Congress: face your economic demons, or be crushed by your political cowardice.

For years we have lived on borrowed time. We have continued to throw money at unsustainable and broken programs like Social Security, Medicare and Medicaid. These programs must be fixed.

On a more blunt point, our Nation's energy policy is an absolute travesty. To put it simply, our policies are bizarre. We want abundant energy, but we enact policies that do nothing but march us in the opposite direction.

It is time for this Congress to face reality. We should permit more oil development off Alaska and our coastlines. I know this is shocking to hear, but we must also match the leadership of France and produce 80 percent of our electricity from nuclear reactors.

The bottom line is we need jobs. Energy development will create jobs. I can assure you that throwing more and more money at the problem isn't going to solve the crisis. Simply taking action to be seen as doing something is denying reality and is an injustice to the American people.

Tough choices need to be made. While they will not always be popular, nor will they be easy, they are most certainly necessary.

Mr. PALLONE. Mr. Chairman, I yield 3 minutes to the gentleman from Massachusetts, the chairman of the Environment and Energy Subcommittee, Mr. MARKEY.

Mr. MARKEY of Massachusetts. Mr. Chairman, I thank the gentleman.

This urgently-needed stimulus bill funds infrastructure projects that are shovel-ready, while also supporting future-oriented projects that are circuit-ready: broadband, electronic medical records, smart grid, advanced battery technologies, and other vital priorities.

This package is a major downpayment on the clean, renewable energy future this country has been waiting for and desperately needs.

But this legislation should not be characterized by what we spend, but

rather by what we save. These smart, clean energy investments will save jobs, ensuring that windmills and solar panels are built here at home. It will save energy through efficiency measures on schools and buildings, and it will save consumers and businesses money on their heating, gas and energy bills.

With the support included in this package, wind capacity will grow from 25,000 megawatts today to 44,000 megawatts generated on a daily basis in 2012. At 220 tons of steel per wind turbine, that is nearly 3 million tons of new steel demands. Those steel jobs are blue collar jobs tinted green by the force of the clean energy revolution.

The massive investments in weatherization, State energy efficiency grants, and Federal building efficiency are some of the safest and smartest investments our country can make right now. They put money into the pockets of American workers and pay for themselves in the form of energy savings and lower energy prices.

This energy efficiency double dividend is a proven, reliable phenomenon that our current weak economy must exploit. Working smarter, not harder, that is what this bill is all about.

The bill provides $20 billion in new health IT infrastructure to improve care, lower costs and reduce medical efforts. I am pleased that the bill includes patient privacy safeguards that I have long advocated, including a provision that I offered at the Energy and Commerce Committee markup to ensure that patients' medical records are made unreadable to unauthorized individuals. This was supported by Chairman WAXMAN and Ranking Member BARTON. This is an issue that we all agree on, the privacy and security of our medical records.

Today we have before us a balanced, well-thought out package that provides tax relief for 95 percent of Americans and targets investments in key areas to turn around the American economy. I strongly support these measures and urge my colleagues to vote in favor of the American Recovery and Reinvestment Act of 2009.

Mr. LEWIS of California. Mr. Chairman, I am pleased to yield 2 minutes to my colleague from Indiana, Mr. BUYER.

Mr. BUYER. Mr. Chairman, in December as then President-elect Obama was putting together his transition team, I turned to the staff on the House Veterans' Affairs Committee on the Republican side and said I do appreciate Mr. Obama's tone for bipartisanship, and I instructed the staff to look at all of the construction projects and work with the Bush administration. We sent a letter then to not only Speaker PELOSI but also President-elect Obama. We asked for two things, in essence. What I sought to do was complement then President-elect Obama with regard to the extension of his hand in bipartisanship.

My letter asked to include veterans in the stimulus plan, and to do two things. Since my Democrat colleagues love to do public works, we would do that for them. We would do public works, and we will also do job creation and entrepreneurship to satisfy Republicans. We would be bipartisan in regard to our letter to the transition team and to the Speaker of the House.

Well, what do you think happened? My gesture was half met. So as the ranking Republican on Veterans' Affairs, I asked for a billion dollars with regard to $950 million for hospital nonrecurring maintenance, i.e. construction, and then $500 million for cemeteries, recurring maintenance, and then a billion dollars for small business loan guarantees.

Oh, we are not going to take creation of jobs and entrepreneurship. That was rejected. What they took were the public works side. Let's create jobs. Well, excuse me, strike that. We are going to create work. See, there is a difference between creation of work and creation of a job.

So what I am hopeful is here, I have gone to the Rules Committee and I have offered four amendments to the Rules Committee, and I am hopeful that they will adopt this. Entrepreneurship is important.

The CHAIR. The gentleman's time has expired.

Mr. LEWIS of California. I yield an additional 30 seconds.

Mr. BUYER. Mr. Chair, the balance of my remarks I submit for the RECORD.

Mr. Chair, today, the headline in the State's largest newspaper noted an additional 50,000 job losses across the country. Indiana's unemployment rate jumped a full 1% last month to 8.2%. Hoosiers are worried about their economic future, wondering if they can afford to send their kids to college or afford retirement.

The stimulus bill being rammed through Congress is not the medicine to meet the economic challenges we face in the short term or the long term. Business owners, workers and employers tell me they believe we need a short term stimulus to get the economy moving again, real tools to help them stay solvent.

However, the bill before us is a political tool geared more toward 2012 than 2009. Very little of this stimulus bill will do anything to grow the economy or expand our job base. Not to mention the cost on future generations. According to the Congressional Budget Office (CBO), the federal deficit will rise to a record $1.2 trillion in 2009, and that does not even include the near $1 trillion included in this massive spending bill.

Most of the discretionary spending in this bill will not actually be spent until after 2010—only 8% of the spending will take place this year.

This legislation alone increases the national debt by $6,700 for every American household. It doles out enough money to give every man, woman and child in the nation $2,700 each. How can I explain that as responsible and rational government spending to the Hoosiers that I represent back home in Indiana?

This is only the first shot. Watch out America. The increased debt caused by this legislation will be used as a further rationale for raising taxes and continued government spending in the future.

The Federal Government cannot spend its way out of this recession. History tells us that to expand the economy the private sector must grow. We need to pass policies that promote growth and economic expansion, not policies that give handouts. Instead of a handout, we must give Americans a hand through short-term stimulus and long-term tax policies which will allow the real job makers—the private sector—to grow our economy.

This legislation is not the appropriate means to revitalize the economy. Instead of creating higher taxes for American families by increasing government spending, we should make permanent the 2001 and 2003 tax reductions and reduce individual, small business and corporate taxes. Extending these tax cuts and further reducing taxes would stimulate long-term job production and increase the gross domestic product, thereby improving our economy and shortening the length of the recession. This bill creates a lot of work, not the desperately needed jobs that help bolster the long term growth of this Nation's economy.

□ 1830

Mr. PALLONE. Mr. Chairman, I yield 1 minute to the gentlewoman from Illinois (Ms. SCHAKOWSKY).

Ms. SCHAKOWSKY. I thank you for yielding.

I rise today in strong support of the American Recovery and Reinvestment Plan and to give you just 10 of the many good reasons to support this particular bill.

One, it will save and create three to four million jobs;

Two, it provides a critical boost in Medicaid assistance to States so that budget shortfalls don't harm access to health care;

Three, it will help those who lose their jobs maintain health insurance;

Four, it invests in renewable energy technologies and research;

Five, it provides a 100 percent increase in weatherization funding to help make homes and businesses energy efficient;

Six, it extends unemployment insurance coverage through the end of the year and increases the benefit by $25 a week;

Seven, it increases the maximum Pell Grant to help more people go to college;

Eight, it helps rebuild our schools and gives them financial support;

Nine, it increases funding for affordable housing and homelessness prevention programs;

Ten, it will give a tax credit to 95 percent of American workers, a credit worth up to $1,000.

This is a good bill, and I urge my colleagues to support it.

Mr. LEWIS of California. Mr. Chairman, I yield 1 minute to the gentleman from Texas (Mr. NEUGEBAUER).

Mr. NEUGEBAUER. I thank the gentleman.

This debate is really about two dollars. This is the dollar that's in the hands of the American people tonight, and this is the dollar, what it looks like when we give it to the Federal Government. You know, it shrinks because we don't spend it wisely.

Tonight we're being asked to consider a bill for $825 billion. And you know what? We don't have $825 billion. You know what we're going to have to do? We're going to have to print these. And guess what? In order to issue them, we're going to have to borrow the money from countries like China.

The question is, are we going to try and spend and borrow our way out of this economic downturn? The American people know that's not the answer. They also know that it's better for them to invest this dollar in the American economy than let the Federal Government go spend this dollar in our economy.

Mr. Chair, I'm disappointed that we are considering a bill tonight that's almost equal to the entire discretionary budget that would normally go through the appropriation process. Oh, no, we didn't go through any process, we were brought a bill and said this is what we should do.

The American people want us to leave this dollar in their pocket.

Mr. PALLONE. Mr. Chairman, I yield 1 minute to the gentleman from Pennsylvania (Mr. ALTMIRE).

Mr. ALTMIRE. I thank the gentleman.

Mr. Chairman, today this House will vote on the largest economic recovery package in this Nation's history. After weeks of discussion and debate, we have come to a compromise bill that incorporates different points of view and makes the necessary hard choices.

Funding in this bill rebuilds crumbling roads and bridges, locks and dams, it improves security on our borders and our ports, it repairs and maintains our VA and DOD health facilities, modernizes our schools, laboratories and classrooms. But, most important, this economic recovery package will put people back to work and put money back in their pockets with a tax cut for 95 percent of working families in America. It will create jobs, get the economy moving again, and leave this country with items of lasting significance to show for it.

Mr. Chairman, we simply cannot wait any longer to help our economy and get this country moving again. Passage of this bill is a necessary step in that direction.

Mr. LEWIS of California. Mr. Chairman, could I inquire as to the amount of time that's remaining?

The CHAIR. The gentleman from California has 53½ minutes remaining.

Mr. LEWIS of California. Mr. Chairman, pursuant to H. Res. 88, I yield the balance of my time to the ranking member of the Ways and Means Committee, Mr. CAMP.

The CHAIR. The gentleman from Michigan will control the balance of the time.

Mr. CAMP. At this time, Mr. Chairman, I yield 3 minutes to the distinguished ranking member of the House Budget Committee and member of the Ways and Means Committee, Mr. RYAN of Wisconsin.

Mr. RYAN of Wisconsin. I thank the gentleman.

Mr. Chairman, we can do better than this. We're losing tens of thousands of jobs a week in this economy. This is the worst recession we've seen in generations. And what are we about to vote on? We are about to vote on a trillion dollar spending package—yes, a trillion dollars, because the Congressional Budget Office just told us today just to pay for the interest on this bill is another $350 billion. We're going to vote on a trillion dollar spending package that amounts to basically a spending wish list for all the special interest groups out there. In fact, for those who are into all of this spending, half of the spending doesn't even occur for 2 more years. But the spending that occurs quickly are things like $15 million for the National Endowment for the Arts, $6 billion for arts and culture, $600 million to buy new cars for Federal employees. Is this the way toward prosperity? Toward jobs?

I want you to take a look at the tax policy in this bill. The big idea is let's give everybody a rebate that's 10 bucks a week per individual or a whopping $20 a week for couples. Do you really think that's going to turn this economy around?

2.7 percent of this bill is aimed at encouraging businesses to retain and create jobs; 2.7 percent of this entire $1 trillion bill to help businesses create jobs. I think we need a little more than that. We need to help the small businesses, the self-employed, the entrepreneurs get out there and create jobs. We had a major manufacturer in the Midwest just announce 20,000 layoffs yesterday. There is hardly anything in this bill that will do anything to help those manufacturers get those jobs back.

What's worse is that after we go on this spending binge, this will lead to higher taxes. The Congressional Budget Office is saying we're going to have the highest unemployment we've seen in 25 years for the next 4 years. And what this bill will do is it will lead us to higher taxes; higher taxes on small businesses, higher taxes on capital, higher taxes on investment, on our savings portfolios, on our retirement, on our college savings plans. That's what is in store right around the corner at the end of next year.

My fear is this: we need to come together with an economic rescue package that actually helps the economy. This bill is not worthy of our new President's signature. We can do better than this. This is not something that should come to the floor. I understand the majority can do as they please. They can shut the minority out—and that's fine, they did that, and that is their choice and their prerogative—but what really matters is whether this creates jobs, and it doesn't.

Mr. PALLONE. Mr. Chairman, I yield 2 minutes to the gentleman from Georgia (Mr. SCOTT).

Mr. SCOTT of Georgia. Mr. Chairman, let me just take up where my good friend from the other side left off. I take great umbrage with what he has said.

This is a very good measure that is timed for this extraordinary time that we're in now. We are in the worst economic crisis in the history of this country, many say since the Depression. But from what I understand, at the rate of losing 6,000 homes to foreclosures every day, we're losing 7,200 jobs every day since the beginning of this year, there has been nothing like that in the history of this country. The American people are expecting us to act and move with boldness, with confidence, not whining, not saying, oh, woe is me.

Now, Mr. Chairman, let me tell you that these are, indeed, the times that try men's souls. In the history of this country we've had those moments. When the history is written on this moment, what do we want them to say about what the Congress did when we faced the greatest economic crisis of our time? Do we want to say we whined and said no and did nothing? Or do they want to see where we did the practical thing of stimulating the economy by investing in its infrastructure, in its schools, in its health care, that not only creates jobs, but creates wealth and gets our economy well?

And, yes, we understand there's another way to stimulate the economy through selective tax cuts, but Mr. Chairman, those tax cuts needed to be targeted down at the level of the people at the lower incomes and the middle incomes that are going to be most likely to spend the money.

Now, Mr. Chairman, we've taken care of the banks; let's take care of the American people and pass this measure.

Mr. CAMP. Mr. Chairman, I yield 3 minutes to the distinguished member of the Ways and Means Committee, the gentleman from California (Mr. HERGER).

Mr. HERGER. Mr. Chairman, I rise in strong opposition to this bill with the firm belief and hope that we can do better.

We are currently undergoing a severe economic downturn. My own State and district have been badly impacted. And I share our new President's desire to move quickly on an economic recovery measure. However, I cannot support a bill that claims to provide $275 billion in tax relief when $80 billion of that is going to people with no income tax liability. You can't cut taxes for someone who doesn't pay taxes. Mr. Chairman, we can do better by focusing on tax relief that creates incentives for economic activity.

Nor can I support a bill that spends hundreds of billions on big government programs like the National Endowment for the Arts or new cars for Federal workers. We do need to make long-term investments in infrastructure and health information technology, but long-term investments require careful planning. We can do better by taking

the time to get infrastructure and health IT right, and by eliminating wasteful spending.

Nor can I support a bill that would lead employers to cut jobs or drop health coverage in the middle of a recession. Allowing workers to stay on COBRA longer—more than 30 years in some cases—could impose an unfunded mandate on employers of $40 billion or more. In the Ways and Means Committee, the majority refused even to study the effect of this provision on coverage. We can do better by expanding eligibility for health insurance tax relief, and by providing more funding for high-risk pools for those who can't get coverage elsewhere.

Finally, I can't support an $825 billion bill that won't fully take effect until 18 months or 2 years down the road, or even longer. Mr. Chairman, people in my district need help today. We can do better by passing fast-acting tax relief that will create jobs this year, plus extended unemployment benefits for those out of work.

I urge my colleagues to vote ''no.'' Mr. Chairman, we can and must do better.

The CHAIR. The gentleman from New Jersey has 30 seconds remaining.

Mr. PALLONE. I would yield that remaining time to Mr. OBEY.

Mr. OBEY. Mr. Chairman, I reserve the balance of my time.

Mr. CAMP. At this time, I yield 2 minutes to the distinguished member of the Ways and Means Committee, the gentleman from Texas (Mr. BRADY).

Mr. BRADY of Texas. I know that our new President is sincere in trying to get the economy moving. Unfortunately, I think the only winners in this bill are the special interests who are swarming the Capitol looking for their piece of the pie. And the losers will be the American taxpayers, who ultimately are going to see their taxes increased to pay for all this spending. There's a right way to spur the economy. This isn't it. And again, it will lead to higher tax increases.

Proponents claim that this will help spur demand for families, but the average worker will only take home an extra $1.35 a day. I can't imagine them rushing to the mall with that small of a windfall. This is supposed to help small businesses create jobs, but in truth, there's more money allocated to buy new art in America than there is to help small businesses expense new equipment and computers.

This is designed to create jobs, but each job would cost $225,000 to create a smaller $50,000 job. This is supposed to be about infrastructure, but only about a tiny part, 3½ percent, will go to new roads. And school construction is just a tiny part of a massive education bill. And what's frustrating is there is no free money, there is no free money in Washington; someone sometime is going to have to pay for this. And at a time when we are seeing record debt, the highest debt in peacetime since 1930, it is the American public who ultimately will have to pay this bill.

To put it in perspective so that every taxpayer understands, the cost of this measure is equal to doubling all the income taxes every American pays for 1 year; not just the wealthy, not just the middle class, every taxpayer would have to double their taxes in order to pay for this spending spree.

Mr. President, I would urge you to veto this bill. It is not targeted or timely. It is not an era of new responsibility. This is a tax increase, a stimulus that will fail, unfortunately, and we have a better idea.

□ 1845

Mr. GEORGE MILLER of California. Mr. Chairman, I yield 1 minute to the gentleman from Colorado (Mr. POLIS) for the purpose of entering into a colloquy.

Mr. POLIS of Colorado. Mr. Chairman, I would like to engage Chairman MILLER in a colloquy for purposes of illuminating the intent of the job training and worker diversification provisions of H.R. 1, the Economic Recovery and Reinvestment Act of 2009.

Earlier in the month, I, along with 12 of my colleagues, sent a letter to then President-elect Obama seeking to promote gender equity in the infrastructure job creation spurred by the economic recovery funding. With women holding less than 10 percent of construction jobs, the letter asked for additional funding for the Department of Labor program known as WANTO, which trains women for higher-wage nontraditional jobs, and to strengthen the Office of Federal Contract Compliance Programs so it can effectively enforce current laws that require contractors to reach out and recruit women into jobs in which they're underrepresented.

Mr. GEORGE MILLER of California. If the gentleman would yield, I want to say to the gentleman I share your concern that women receive equal opportunity to be trained and hired in the types of higher-paid positions that are traditionally occupied by men. The bill provides approximately $4 billion to train workers who need new or additional skills. Job training to train women in nontraditional job retains its priority recognition as under current law.

The CHAIRMAN. The time of the gentleman has expired.

Mr. GEORGE MILLER of California. Mr. Chairman, I yield the gentleman an additional 30 seconds.

The bill also provides $80 million to enhance worker protections on those jobs including through the Office of Federal Contract Compliance, Health and Safety, and wage and hour enforcement.

Mr. POLIS of Colorado. I thank the chairman for his explanation. I appreciate the consideration that this Chamber has given to improving the protections and opportunities afforded to women seeking to take care of their families in this very challenging economic time.

Mr. CAMP. Mr. Chairman, I yield 2 minutes at this time to the distinguished gentleman of the Ways and Means Committee from Washington State (Mr. REICHERT).

Mr. REICHERT. Mr. Chairman, just last week the Joint Committee on Taxation could not say whether any jobs would be created by the nearly $1 trillion package before us.

We cannot let calls for swift action overrun common sense, thorough consideration, and healthy debate. The bailout showed us the mistakes that can happen when government rushes to action.

We are united, however, Democrats and Republicans, together in recognizing the need for action. This is a time for smart, accountable, and targeted investments to get our economy back on track, not more of the same shotgun spending that mortgages our children's futures.

There are clearly provisions in this bill that I support and I think every Member in the House has something in this bill they support. But we are here to pass an emergency stimulus package that creates jobs, not another spending bill.

To stimulate the economy and preserve, promote, and create jobs, we must enact proven measures like broad-based tax relief for families and small businesses, opening new markets to trade, and investing wisely in infrastructure. Those are the things that will get our economy moving and create jobs for people in our Nation.

So I urge my colleagues to oppose this measure so that we can work together with President Obama, who has reached out to the Republican side and encouraged us to provide our input, our ideas, and our thoughts to craft effective legislation that gets our economy back on track.

Mr. GEORGE MILLER of California. Mr. Chairman, I yield 1 minute to the gentleman from Ohio (Mr. KUCINICH).

Mr. KUCINICH. Mr. Chairman, I rise in support of the legislation.

Our economy is falling apart. We have millions of people out of work. We have millions of people who are out of work that don't even have unemployment benefits anymore. We have got to respond to the immediate needs of the American people.

I don't agree with everything in this legislation, but I know one thing: If we don't move quickly to try to take steps to stimulate this economy, we are only going to go down faster. I see this legislation as being an appropriate first step that will help bring needed money and put it in the hands of the American people.

We're going to have to do more, though. I have bills to create a universal pre-kindergarten program that will help American families relieve a lot of financial burden; a bill with JOHN CONYERS to create a not-for-profit health care system, universal health care, that will solve a major problem for business and industry and give all Americans health care.

Congress must make a beginning. That's what we were elected to do. We need to work together, Democrats and Republicans, and put aside our differences on some of the issues that are in this package in order to look for the higher good of the American people.

The CHAIRMAN. The time of the gentleman has expired.

Mr. GEORGE MILLER of California. Mr. Chairman, I yield the gentleman an additional 30 seconds.

Mr. KUCINICH. So I would say to my colleagues on both sides of the aisle, we see things in this package we don't like. We don't like the fact that some of the benefits aren't getting to people quickly enough. I am concerned about that as well. But the fact of the matter is we have to realize this is our first step, and that first step has to be in the direction of relieving the economic crisis for the American family.

I stood with Members on the other side of the aisle in challenging the bailout. But it's time that we start to give benefits to the American people, and this legislation does that. I urge its support.

Mr. CAMP. Mr. Chairman, I yield 2 minutes to the distinguished member of the Ways and Means Committee, the gentleman from Louisiana, Dr. Boustany.

Mr. BOUSTANY. Mr. Chairman, both sides can agree that our national economy is in trouble as tens of thousands of Americans are without work. But the question remains, are we going to get this right? The bill before us falls far short of the goals that we are hoping to achieve.

In 2005 my home State of Louisiana saw economic devastation as the result of two hurricanes. During that recovery effort, we learned many things about what government can and can't do effectively and quickly. Tax relief for small businesses and families enable businesses across the Gulf Coast to rebuild, expand, and create good-paying, long-lasting jobs. As a result, thousands of Louisiana families found security they desperately needed following these two storms.

Government direct spending was also attempted. However, 3 years later, 3 years later, much of that money is still tied up in bureaucratic entanglement.

There's a lesson here. There is clearly a lesson. There are many different solutions to a problem, and this economic crisis, as complex as it is, certainly proves this. But secondly and more importantly, we must look for solutions that will produce results.

We need to spur job creation to get Americans working again, and the best way to achieve that job creation is by reducing taxes on small businesses, entrepreneurs, and companies who can put people to work now.

We are willing to work with the administration and with our friends across the aisle to accomplish these goals. Together I believe we could craft a bill that would stimulate private sector job growth, which is what's desperately needed. That will make this country competitive again. This bill will not accomplish those goals.

I would urge a ''no'' vote on this bill, and let's come up with a better way to do this.

Mr. GEORGE MILLER of California. Mr. Chairman, I yield myself such time as I may consume.

Mr. Chairman and Members of the House, I must say that I truly admire the courage of my friends on the other side of the aisle. In the middle of the worst economic downturn that any of us can remember, our parents told us about the Depression, an unprecedented and accelerating job loss all across the American economy in every sector, our friends on the other side of the aisle ask us just for one last time to do what they've been doing the last 8 years; to just one more time give the tax cuts to the richest people in the country; to just one more time dive into the tank of fiscal irresponsibility.

They inherited a $5 trillion surplus, and they squandered it to an $8 trillion deficit. They created the slowest job creation since World War II, the slowest job creation since World War II in a recovery. They held middle income wages stagnate. In fact, many families lost ground. The wealthy did the best.

They stood by while banks created liar loans, while banks created no-doc loans, while people on Wall Street played fast and easy with hardworking Americans' money in their pension plans. And what do we get for their 8 years? We see people now getting their returns on their pensions, their 401(k) plans, and 30, 40, 50 percent of their assets are gone and those who are over 55 living in panic about how will they have a retirement. And yet they stand here day after day and say just let us have more of what we were doing in the past.

You know, when that helicopter took off outside here in this plaza, millions of Americans gave that President a wave good-bye because in the middle of this historic downturn, millions and millions of Americans made a decision to go in another direction because what you were doing hadn't worked for them or for their families, hadn't worked for them or their families, because that was your policy.

Mr. Chairman, that was their policy, crude and rude with respect to working Americans in this country and their families.

So what do we have now? We have an incredible consensus of economists who are on the left, who are on the right, who advised Republican candidates in the past, Ronald Reagan, JOHN MCCAIN, and they have said you have got to put together a recovery act where the government spends this money on projects to put people back to work to create jobs. It will not stop unemployment, but it will help. It will help. And that's what we're doing here. That's what we're doing here.

They also said from the right and the left, as they told us that the American economy is shutting down while you're asking to do more of the same, they said don't forget education. We cannot have young people lose a year or 2 years of education because of an economic downturn. You must support education at the local level. Why? Because the States and local governments are hemorrhaging, hemorrhaging the loss of revenues. Because people can't afford to buy a car, they're not buying a car. Because home price values are dropping so fast that they're going in and getting their property taxes reestablished because of the loss of value in homes, and that's costing local governments and school districts money from sales tax and property tax. So we're trying to make sure that those students don't lose that educational opportunity.

We see a number of students are now starting to forego college who are in the middle of their college education because of costs. Yes, we're going to increase the Pell grant so they can stay. We're going to give an income tax credit so they can stay in school. We're going to give them work opportunities on campus so they can stay in school. Because that's what the economists, that's what the venture capitalists said, that's the captains of industry said needs to be done. Don't lose that, because when this economy re-emerges, we need those people to be competitive with the rest of the world.

Yes, we're going to help school districts and school construction so that young students can go to school in a cleaner, better environment, so they'll be connected to the latest technology, so they'll have the educational opportunities. And it will be a safe school. It will be a modern school. Yes, we're going to help them out and do that because they don't have the ability to do that because your economic policies froze municipal bonds and school bonds where people voted to impose taxes on themselves to improve their schools, to improve their cities. But the credit markets are seized; so we're trying to help them out for the time being until those markets unfreeze.

And, yes, $300 billion was given to the Bush administration and Secretary Paulson, and so far it appears it was given without conditions in terms of any effort by the big banks to unfreeze the credit markets to lend to small businesses, to lend to families in need.

Yes, we're changing policy. And we're doing it at the direction of the American people because the policy you gave them for 8 years was a disaster for them, their families, their retirements, their wages, their health care. They want to go in a different direction, and we will take them in a different direction. We will take them to job creation. We'll take them to better education. And, hopefully, we'll take them to a stronger economy on the advice, on the advice, with all due respect, of not the other side of the aisle, but of economists from the left to the right of impeccable credentials who said the

only question about this package really is, is it large enough?

ANNOUNCEMENT BY THE CHAIR

The CHAIR. All Members are reminded to address the Chair with their remarks.

□ 1900

Mr. CAMP. I thank the Chair for that statement.

At this time I yield 2 minutes to the distinguished member of the Ways and Means Committee, the gentleman from Illinois (Mr. ROSKAM).

Mr. ROSKAM. I thank the gentleman for yielding.

So much material and so little time. You know, we heard the President in his speech talking about putting aside petty recriminations, and he characterized that as, actually, childish arguments. And I think that some of the tone that I have heard tonight, we can rise above.

You know, I find it ironic that the gentleman from California referred favorably, maybe for the first time in his career, the first time in my hearing, favorably quoting and referring to Republican economists as ''persuasive.'' I had never heard that from him before, Mr. Chairman.

But I would like to quote from our President. In his State of the Union Message, he said something that I think actually brings us all together, it's really poignant, and I think it's beautiful. In fact, it says it has been risk takers, the doers, the makers of things who have carried us up the long rugged path towards prosperity and freedom. The market's power to generate wealth and expand freedom is unmatched.

Here we are, on the verge of the majority spending $825 billion in a spending plan, the likes of which we have not seen before, with only $40 million in tax relief for small business. When the President came in, he seemed surprised at those numbers, by comparison, $40 million to the risk takers that we all say are the economic engine that are going to move us into the future.

We can do better, and I think it's incumbent upon us to take up that challenge.

The CHAIR. The gentleman from Minnesota (Mr. OBERSTAR) is recognized and controls 10 minutes.

Mr. OBERSTAR. Mr. Chairman, I yield myself 2 minutes.

Our committee's portion, the infrastructure recovery program is targeted. It will be transparent and recipients will be held accountable, and the investments are desperately needed. The construction sector is suffering the highest unemployment rate of any industrial sector, 15.3 percent, 1.4 million construction workers out of a job.

Fully implemented, as our committee proposes, we can have a million workers on a construction site in June of this year and generate $325 billion in total economic activity when fully implemented, jobs that cannot be outsourced to other countries, using materials that are made in America, not outsourced beyond our shores.

Transparency, we require reporting by every State DOT, every transit agency, every airport authority, every 30 days on the contract awarded, by contract, on the specific jobs, job description and payroll, which we will receive and make public through hearings that we will conduct 30 days after the funding is allocated to the States and every 60 days thereafter.

Accountability, an amendment which I expect or hope to offer tomorrow made in order by the Rules Committee, will have a requirement that funds be committed in 90 days, use it or lose it.

I am pleased to rise in strong support of H.R. 1, the ''American Recovery and Reinvestment Act of 2009''.

With more than 1.4 million construction workers out of work, and the construction industry suffering the highest unemployment rate (15.3 percent) of any industrial sector, this bill is urgently needed to put America back to work. The infrastructure investments funded by this bill will create good, family-wage jobs—jobs that cannot be outsourced to another country, because the work must be done here in the U.S. on our roads, bridges, transit and rail systems, airports, waterways, wastewater treatment facilities, and Federal buildings.

For more than a year now, I have worked to ensure that infrastructure investment plays a key role in our Nation's economic recovery.

I thank Chairman OBEY for working with me in this effort. We consulted extensively on the transportation and infrastructure provisions in the bill. Although the legislation before us today does not include everything I had proposed, it is a very good start, and I am hopeful it can be improved and fine-tuned as deliberations continue.

In December 2008, I proposed to House Leadership that the economic recovery legislation include at least $85 billion for transportation, environmental, and other public infrastructure investments. H.R. 1 includes approximately $63 billion for these programs.

My proposal adhered to the following six principles:

Funds must be invested in ready-to-go projects. I believe we need an aggressive timetable for the use of funds, including a 90-day, ''use-it-or-lose-it'' requirement for 50 percent of the funds, which will produce a ''quick hit'' that will jump-start our economy and create a substantial number of new construction jobs by June.

2. Funds must be used to create green-collar jobs and invest in projects that decrease our dependence on foreign oil and address global climate change.

3. The steel, iron, and manufactured goods required for these projects must be manufactured in the United States.

4. Wherever possible, funds must be distributed by existing statutory formulas, with no earmarks, to expedite the flow of funds.

5. Transparency and accountability in the use of funds must be achieved.

6. States and other recipients of formula funds must maintain their effort in terms of current State and local investment levels.

These principles are, in large measure, reflected in the legislation before us today.

Although the use-it-or-lose-it deadline in the bill is currently set at 180 days, I am hopeful it can be shortened to 90 days, and I will be offering an amendment to do so.

On December 18, I had a lengthy conference call with 14 State Secretaries of Transportation and Chief Executive Officers of public transit agencies. I outlined for them my 90-day, use-it-or-lose-it proposal, which would require them to obligate 50 percent of the funds allocated to them within 90 days.

Every one of the participants on the conference call enthusiastically affirmed that they are ready to go within 90 days and can meet the use-it-or-lose-it requirement.

In another conference call earlier this month and at a Committee hearing last week, we were again assured that State and local grant recipients are proactively preparing to meet tight deadlines and will be able use these funds quickly.

Despite these assurances from State and local officials, some here in Washington are skeptical that a 90-day deadline can be met. This skepticism is why the use-it-or-lose-it deadline was extended to 180 days in last week's Appropriations Committee mark-up.

Ninety days is a tight deadline, but that is exactly what we need.

Business as usual is not good enough anymore. If the purpose of this legislation is to be achieved, then we must set tight deadlines, and hold everyone—from Federal agencies to State and local grant recipients—accountable to them.

I firmly believe that the infrastructure funds provided by this bill can—with the right incentives—produce a substantial number of jobs by June, while also improving our deteriorating infrastructure and laying the foundation for our future economic growth.

I thank Speaker PELOSI, Chairman OBEY, Chairman of the Committee on Appropriations, and Chairman OLVER, Chairman of the Subcommittee on Transportation, Housing and Urban Development, and Independent Agencies, for working with me throughout the development of this legislation. I strongly urge your support for H.R. 1, a true investment in America's future.

Mr. Chairman, I reserve the balance of my time.

Mr. CAMP. At this time I yield 2 minutes to the gentleman from Pennsylvania (Mr. TIM MURPHY).

Mr. TIM MURPHY of Pennsylvania. Mr. Chairman, with 11 million Americans out of work, we indeed should be concerned about Americans out of work and helping Americans to have jobs.

Tomorrow the House will vote on a bill of some $835 billion as an economic stimulus and spending package. Thirty billion dollars of that will be for infrastructure spending for roads and bridges, some $20 million for electronic medical reports, both worthy causes, which perhaps should be put into the highway section, but that's as it is. What's key here is are these really for American jobs?

The electronic medical records is important because it allows hospitals to have their records on computers so doctors can access them from everywhere competently and confidently, and can help reduce millions of dollars of waste and deaths that occur from hospital errors.

However, in the Energy and Commerce Committee a few days ago I offered an amendment to say let's guarantee that the software work and the applications of that technology be done in America. It's too easy, at the stroke of a keyboard, to send electronic data across the globe where these software applications for hospitals could be done.

So we put an amendment in. The chairman agreed to it. The committee unanimously agreed to, but, mysteriously, when the bill was printed, that and a few other Republican amendments were omitted.

Tonight I was at the Rules Committee asking them to please restore this amendment to say if we are going to spend $20 billion to help American jobs, let's make sure we have a clause in this bill that helps American jobs.

There's another amendment I offered too that says for construction and other parts of this bill let's also use that for American jobs. Let's not have the same mistake that occurred when we approved building a fence line at the border with Mexico, and it turned out it was done using a loophole with Chinese steel. Our concrete, our rebar, the cars that are going to be bought supposedly with this bill ought to be made in America.

From the iron mines to the manufacturers, to the mills, let's use it to buy America. Let's return those amendments to this bill. If we really are going to be serious about American jobs, let's make this American jobs.

Mr. OBERSTAR. Mr. Chairman, I yield 2 minutes to the distinguished Chair of the Surface Transportation Subcommittee, the gentleman from Oregon (Mr. DEFAZIO).

Mr. DEFAZIO. I thank the gentleman.

For 8 long years our Republican colleagues stood shoulder-to-shoulder with George Bush as our country accelerated its slide toward a third world infrastructure. The collapse of the bridge in Minnesota is perhaps the signal moment of the Bush administration. What did they do before and what have they done after for our infrastructure? Nothing.

They didn't believe in investing in our public infrastructure. Tax cuts, tax cuts, tax cuts. Tax cuts never built a single highway. Tax cuts never built a transit system. Tax cuts never replaced a bridge.

Tax cuts are not the answer to all of America's problems. We need to invest in our public infrastructure in this country. The most solid core point of this bill is what we are debating right now, more than $40 billion of investment in the future of America putting our highways and our bridges back in good repair, rebuilding our transit systems, beginning to provide new capacity, to get people more efficiently to work, to avoid the costs of congestion, the costs of the deficient services we suffer.

These are jobs. I heard someone, some bizarre Republican stand up earlier and say something about the difference between work and jobs. This is work that puts Americans to work, and it's jobs, and it rebuilds our country. I don't quite get what point that person was making. And it's not a tax cut. It's real investment.

I can justify borrowing money to build a bridge or a transit system that will serve the next two or three or four or five generations of Americans a lot more than I can justify a tax cut which is gone tomorrow and did nothing to rebuild our future.

They lack vision. In this we will buy American products. ''Buy American'' is the theme of transportation policy in this country. We will buy buses made in America. We will even start buying street cars for the first time made in America.

The CHAIR. The time of the gentleman has expired.

Mr. OBERSTAR. I yield the gentleman an additional minute.

Mr. DEFAZIO. We are going to rebuild our bridges made with steel in America, concrete sourced in America, labor of American workers. This is the core of this bill. It's not enough, in my opinion, and I have made that clear and made some angry by saying that, as has the chairman.

But it is a good, solid down payment and a solid core for an American recovery with these investments. Stop talking just about one-note tax cuts. They didn't work for George Bush. They are not going to work today. We need to begin real investment and rebuilding our future, transportation infrastructure. This is the core of this bill.

Mr. CAMP. Mr. Chairman, I yield 15 seconds to the distinguished member of the Ways and Means Committee, the gentleman from Texas (Mr. BRADY).

Mr. BRADY of Texas. I would point out that it was a Democrat Congress that for decades robbed from the highway trust fund, and it was the Republican Congress, with the Republican President, who insisted for the first time that all the highway fuel dollars would go to actually building highways and bridges in America.

I would note too, Republicans doubled the research and development budget of America, not Democrats.

Mr. CAMP. Mr. Chairman, I yield 3 minutes to the distinguished chairman of the Republican Conference, the gentleman from Indiana (Mr. PENCE).

(Mr. PENCE asked and was given permission to revise and extend his remarks.)

Mr. PENCE. Mr. Chairman, it should be evident to anyone looking on tonight, from the passion that's displayed on both sides of the aisle, this is a serious debate. The American people are hurting. Many millions of Americans have lost their jobs and many more are worried that they will be next.

And so we come to this floor tonight to begin a debate on legislation that should, in the best of worlds, be a result of a thorough vetting and a thorough and bipartisan negotiation over what would be, on balance, in the best interests of the American people. But this legislation falls far short of that standard, and I rise to oppose it.

I commend the President of the United States today for coming to Capitol Hill and meeting with House Republicans. It was a frank and cordial discussion. The conversation is not compromised, and the American people deserve to know that Democrats in Congress have completely ignored our new President's call for bipartisanship in the formation of this stimulus bill.

In reality, House Democrats have used this moment of national economic crisis to fund big government priorities under the guise of stimulating the economy. As I told President Obama today, we take him at his word, but we urge him to make good on his pledge to challenge his party to set aside partisan differences and to bring the best ideas from both parties to the table, and this bill does not accomplish that.

The promises of change and bipartisanship ring hollow in the face of a stimulus bill that does little more than fund a wish list of long-standing liberal spending priorities.

I ask, Mr. Chairman, what is $50 million for the National Endowment for the Arts going to do to create jobs in Indiana? What does $200 million to plant sod on the National Mall going to do to put people back to work in your State, or $400 million for climate change research going to do to get America working again.

The truth is the bill that we will consider tomorrow, fashioned entirely by the majority in this House, won't stimulate anything but more government and more debt. The slow and wasteful spending of the House Democrat bill is a disservice to millions of Americans, and Republicans are disappointed, but the American people should be disappointed as well. These are serious times, and what will come to the floor tomorrow is not a serious effort to address this crisis with reform.

Republicans have a plan. We don't claim to have the exclusive right to all the best ideas in the world, but the time-honored tradition of stimulus from this Chamber has always included real and immediate and significant tax relief for working families, small businesses and family farms. Handing out rebate checks this year, like we did last year, will likely have as little result stimulating our economy as it did before.

And so we will take our case to the American people. We may lose on the floor tomorrow, but the American people will have a choice between slow and wasteful government spending and a plan that will bring tax relief to working families and small businesses.

I urge opposition to the bill.

Mr. OBERSTAR. Mr. Chairman, I yield myself 30 seconds simply to point out that on the Committee on Transportation and Infrastructure the Republicans have been engaged fully from

2007 all through 2008 in fashioning a stimulus initiative. Their ideas have been fully engaged and they have participated in hearings and in the crafting of our portion of this bill.

So whatever criticism there may be of other committees, I say it doesn't apply in our Committee on Transportation and Infrastructure. In fact, Mr. MICA, my good friend, said our portion is a very good bill.

I yield 2 minutes to the distinguished gentlewoman from Texas (Ms. EDDIE BERNICE JOHNSON), Chair of the Water Resources Subcommittee.

Ms. EDDIE BERNICE JOHNSON of Texas. I want to thank the Chair of Transportation, as well as the Chair of Appropriations, for the hard work they put into this.

Mr. Chairman, you know I strongly support the underlying bill. I know that I understand it differently than some others here. But if we keep doing the same thing that we have been doing for the last 8 years, we will get the same results. You can't do the same thing and expect the results to change.

The needed funds for our Nation's roads, bridges, transit systems, airport and water-related infrastructure are very much needed. Over the past 2 years, the Subcommittee on Water Resources and Environment has held numerous hearings on the Nation's water-related infrastructure needs, whether it is the $300 billion to $400 billion investment needed to restore and upgrade our Nation's network of wastewater treatment infrastructure, or the projection of $50 billion to $60 billion for vital projects of the Corps of Engineers.

The water-related infrastructure needs of this Nation are struggling and growing ever longer, and the longer it is put off, the more it will cost.

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Each $1 billion of Federal funds invested in infrastructure creates and sustains approximately 34,000 to 47,000 jobs and $6.2 billion in economic activities. The $3 billion in infrastructure investment funding in the bill for the State of Texas will provide a real tangible benefit to the 700,000 individuals currently unemployed in our State, whether as a paycheck for those responsible for constructing these vital projects or through increased productivity for small businesses that produce the materials needed for these vital infrastructure projects.

These people cannot pay taxes. They don't have jobs.

However, unlike other economic recovery proposals, infrastructure investment provides not only a short-term benefit to American families, it also provides a long-term benefit in terms of sustainable and reliable infrastructure, as well as the potential for increased productivity for the Nation's economy through the efficient movement of goods and services.

It also can enhance the overall quality of the Nation's water-related environment through the implementation of environmental restoration projects by the Corps of Engineers, and through the control of pollutant discharges from combined sewer and sanitary sewer upgrades.

Finally, infrastructure investment provides one of the only benefits that cannot be shipped off to foreign lands. The direct beneficiaries of domestic infrastructure projects are our towns, our local communities, our constituents.

Mr. CAMP. Mr. Chair, I yield 1½ minutes to the gentleman from Texas (Mr. SMITH).

Mr. SMITH of Texas. I thank the ranking member for generously yielding to me.

Mr. Chairman, here are a half dozen of many reasons to oppose this legislation. We should wait and gauge the impact of the $350 billion in TARP funds already approved before spending even more. Spending another $825 billion—$6,000 for every taxpayer in America—will inevitably hike inflation and increase taxes, further damaging the economy.

Much of the money will be used to bail out States that have overspent their budget. This rewards bad behavior. What happened to the ''era of responsibility?''

This is not free money. It's a nonsecure loan extracted from the American people. Let them keep the dollars and decide how to spend them. It would be far better to provide tax incentives and investment credits to the small businesses that create 70 percent of all new jobs in America. This massive monstrosity of spending is the wrong kind of change. It will only make the economic crisis wider, deeper, and longer.

Mr. OBERSTAR. Mr. Chairman, I yield 2 minutes to the Chair of our Economic Development Subcommittee, the distinguished gentlewoman from the District of Columbia (Ms. NORTON).

Ms. NORTON. I thank the gentleman for yielding and for his very important and brilliant work on this bill. I thought I heard my friend talk about putting money in people's pockets. Have you forgotten that is exactly what we did with the last stimulus bill? And, guess what? It went to pay the Saudis, who are now enjoying that. People paid off their high gas bills, they paid down their credit cards. Understand that people are afraid to spend money.

What does this bill do? This is not about ''the economy,'' it's not about ''the bailout.'' This bill is about jobs. What it says is if you give a person not money in his pocket, but a job, you have a better chance of reviving your economy.

The GAO says, indeed, if done properly, a public infrastructure program will pay for itself, and more, over time, by increasing productivity. That is the reason we focus on infrastructure and it's interesting to know that many on the other side are pointing in that direction as well.

I am not against some of the tax cuts, if properly done. But the reason we focus on infrastructure is that it alone has a track record of waking up other parts of the economy. That's what we want to do. This is about jobs. This is not about some generic economy. It is the multiplier effect that we are after. We are after jobs that then create support jobs on down the line. And there is no other expenditure that has been shown to do that as well as infrastructure.

We've got a job to do to make sure, as the chairman says, that this gets done, and gets done quickly. But there can be no debate. Even as we heard testimony, investments in infrastructure have a broader effect and a bigger benefit on the economy than, for example, tax cuts, or any form of tax relief.

Mr. CAMP. I yield 2 minutes to the gentleman from Minnesota (Mr. PAULSEN).

Mr. PAULSEN. I thank the gentleman.

Mr. Chairman, I am pleased that the President has asked for swift action to spur the economy in the need to usher in a new era of responsibility. I also agree that Congress must act immediately to help get our economy back on track.

My concern with the bill that we are addressing here tonight is that it is acting irresponsibly. This stimulus bill has essentially now turned into a supplemental spending bill. The budget deficit is already more than $1 trillion this year alone. What is Congress proposing? More borrowing and more spending.

After this bill passes, Mr. Chairman, the annual budget deficit will surpass $2 trillion in just 1 year. Just this 1 year. An economic stimulus should be quick and it should be immediate. However, the recent analysis by the Congressional Budget Office shows that only 7 to 8 percent of the infrastructure spending, which is valuable in this plan, will be delivered in the economy in the first year alone, and less than half will be spent in the first 2 years.

Mr. Chair, a real fiscal stimulus is one that will put people back to work and focuses like a laser beam to help protect and preserve and, most importantly, create jobs. Why aren't we focusing tonight on helping small businesses do what they do best?

We need to make sure that we are allowing those small businesses, the entrepreneurs, the risk-takers, the innovators, and the self-employed, do what they do best, and that is create jobs. Unfortunately, this bill has become a grab bag of special interest spending, and many of these may be some worthwhile projects, but they should not be snuck into a stimulus bill.

Instead, let's focus on changing politics as usual and working together and finding real solutions to put people back to work.

Mr. OBERSTAR. How much time remains?

The CHAIR. The gentleman from Minnesota has 1 minute remaining.

Mr. OBERSTAR. I yield the remaining time to the distinguished gentleman from Virginia (Mr. CONNOLLY).

Mr. CONNOLLY of Virginia. As a new Member of this body, this is going to be one of the most important votes I cast. And to hear some of the rhetoric tonight from the other side makes one think of Charles Dickens. Are there no workhouses?

We are in the worst economic meltdown in 76 years. The middle class is crying for relief. We are on a precipice, and this body must act. I feel dutybound to cast my vote in favor of this legislation because it is action. It is designed to spur infrastructure. It is designed to provide middle-class tax relief.

And when I hear language of special interest, I wonder if we mean by that our State and local governments that are hemorrhaging red ink and need the relief contained in this legislation. As someone who's just come from local government, I know firsthand how every State and every locality in this country is hurting.

I intend to support this legislation, especially the infrastructure provisions in it that will get people back to work and spur local economies.

Mr. CAMP. At this time, I yield 3 minutes to the distinguished gentleman from Georgia (Mr. PRICE).

Mr. PRICE of Georgia. I thank the gentleman for yielding, and I am interested in the comment just made by the gentleman from Northern Virginia, Mr. CONNOLLY. If the gentleman would take a question, I'd be pleased to yield to him for an answer.

Mr. CONNOLLY, would you be interested in taking a question? I was interested in your comments, because you said, Mr. CONNOLLY from Northern Virginia——

The CHAIR. The gentleman will address the Chair, please.

Mr. PRICE of Georgia. Mr. Chair, the gentleman said these are the worst economic times, and this will stimulate infrastructure. I was wondering if the gentleman was aware that only 7 percent, or $26 billion of the $274 billion in infrastructure money, will be spent by the end of this budget year. And adding the interest, this stimulus, which will exceed $1.1 trillion, will cost each and every American $3,300 in this economy.

Does the gentleman think that that is a wise idea? I yield to the gentleman.

Mr. CONNOLLY of Virginia. Mr. Chair, if I understand the gentleman's question, first of all, I think his numbers are not correct, if I look at the Chairman of the Transportation and Infrastructure Committee. I think it's considerably more than the number the gentleman has cited.

I also think the gentleman fails to recognize that there's cumulatively $120 billion of relief for State and local governments. I would also point out to him that every State and every locality virtually in this country is hemorrhaging red ink.

Mr. PRICE of Georgia. Reclaiming my time, Mr. Chairman, and I would ask the gentleman to tell the House if he believes that in this worst economy that it's appropriate to put in place a policy that makes it so that each and every American is liable for $3,300 more; $3,300 more for each and every single American. Is that an appropriate policy to be put in place at this time, I would ask the gentleman.

Mr. CONNOLLY of Virginia. Mr. Chair, I don't believe that is the appropriate question.

Mr. PRICE of Georgia. Reclaiming my time, Mr. Chairman. That is indeed the appropriate question. And that is why you hear individuals on our side of the aisle fighting on behalf of the American taxpayer, fighting on behalf of American jobs, fighting on behalf of appropriate policy that will in fact stimulate the economy.

Mr. CONNOLLY of Virginia. Mr. Chairman, I think the opposite is true. I think the gentleman is fighting for policies that prove to be a failure.

The CHAIR. The gentleman from Georgia has control of the time.

Mr. PRICE of Georgia. We all want our economy to turn around. The question really isn't is this too much or too big, although I believe it to be. The question is, Will it work, and, What else is in this bill?

I want to highlight an item that is buried in this bill. The Comparative Effectiveness Research Council. $1.1 billion for this board. In the language, it states, regarding health care, ''Those items, procedures and interventions that are most effective to prevent, control, and treat health conditions will be utilized, while those no longer found to be effective and, in some cases, more expensive, will no longer be prescribed.''

Mr. Chairman, this is the beginning and the foundation of nationalized health care.

The CHAIR. The time of the gentleman has expired.

Mr. CAMP. I yield the gentleman an additional 30 seconds.

Mr. PRICE of Georgia. I thank the gentleman. In fact, the Secretary of Health and Human Services said in his book that this body would have recommendations that may not have teeth because all Federal health programs would have to abide by them. But Congress would go back and further the board's recommendations. It could, for example, link the tax exclusion for health insurance to insurance companies that comply with the board's recommendations.

Mr. Chairman, this is indeed the foundation of rationing of American health care for each and every American. Not only will there be no stimulus in this bill, there will be major policy changes to health care; nationalized health care on its way, courtesy of the majority party.

The CHAIR. The gentlewoman from Arizona (Ms. GIFFORDS) now controls 5 minutes of the time.

Ms. GIFFORDS. I'd like to thank Chairman OBEY as well for all his work, and members of the committee on both sides of this bill, and I yield myself such time as I may consume.

As a member of the Science and Technology Committee, it's my great privilege to work with Chairman GORDON and Ranking Member HALL to advance our Nation's capabilities in scientific research and technological innovation.

The American Recovery and Reinvestment Act contains critical funding for the National Science Foundation, the Office of Science at the Department of Energy, the National Institute of Standards and Technology, the National Oceanic and Atmospheric Administration, and NASA. It also includes significant funding for research and development in advanced energy technologies.

These critical investments will create high-quality jobs, strengthen our economic competitiveness, and improve access to clean, affordable energy.

With that, I reserve the balance of my time.

Mr. CAMP. I'd like to inquire of the Chair the time remaining.

The CHAIR. The gentleman from Michigan has 28 minutes remaining.

Mr. CAMP. And on the other side?

The CHAIR. The gentleman has 51 minutes.

Mr. CAMP. At this time we will reserve our time until it becomes a little more balanced, Mr. Chairman.

Ms. GIFFORDS. I yield 2 minutes to the gentleman from Oregon (Mr. WU).

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Mr. WU. I thank the gentlelady, and I rise in support of the underlying legislation.

I want to commend President Obama, his administration, Speaker PELOSI, Chairman OBEY and Chairman GORDON for their leadership and commitment to ensure that this bill provides strong funding for science, technology, and long-term economic growth in order to get our economy back on track. We need to rebuild from the ground up. We need to invest in research that will create the jobs of the 21st century, including those jobs in health information technology.

Health IT has the potential to reduce medical errors, decrease inefficient, unnecessary, duplicative treatments that cost our health care system $300 billion annually. Health IT should lower our health care costs while improving the quality and safety of care. Health IT is economic stimulus.

However, one study states that more than 40,000 health care IT workers will be needed in health care facilities, and jobs already exist in this field. We just need qualified workers. Without the staff needed, our investments in health IT will do little to meet the potential of this field. That is why I am happy to see the provisions of the 10,000 Trained by 2010 Act, a bill that I introduced, are included as part of this legislation. My legislation helps train individuals

in health IT, and provides the seed corn to create the jobs of our new economy in a field that will help curb the cost of health care for years to come. I urge my colleagues to support the provision and the legislation.

Mr. CAMP. I reserve the balance of my time.

Mr. OBEY. Mr. Chairman, I think when I yielded time earlier in the day, I shortchanged the gentlewoman from Arizona (Ms. GIFFORDS) by 5 minutes. I would like to yield an additional 5 minutes of my time to her.

The CHAIR. The gentlewoman will control an additional 5 minutes of the time.

Ms. GIFFORDS. Mr. Chairman, I now yield 1 minute to the gentlewoman from Maryland (Ms. EDWARDS).

Ms. EDWARDS of Maryland. Mr. Chairman, I rise today in support of the American Recovery and Reinvestment Bill of 2009.

We are entering a new era of job creation through science, research, and technology, and this bill makes timely targeted investments to create high-quality jobs, strengthen American competitiveness, and improve access to clean affordable energy.

The bill allocates funds to the National Institute of Standards and Technology, which is in my congressional district in Maryland, for competitive construction grants for research science buildings at colleges, universities, and other research organizations and to coordinate research efforts of laboratories and national research facilities by setting standards for manufacturing.

The bill also allocates funds to the National Aeronautics and Space Administration to put more scientists to work doing climate change, important climate change research, including earth science recommended by the National Academies, satellite sensors that measure solar radiation critical to understanding climate change.

I am proud that this bill includes $10 billion for science research facilities and instrumentation, to focus American brain power and education on solving the energy and climate challenges.

The CHAIR. The time of the gentlewoman has expired.

Ms. GIFFORDS. I yield the gentlewoman an additional 30 seconds.

Ms. EDWARDS of Maryland. This is an investment for the 21st century. It is for our children, it is for our grandchildren. I applaud Chairman GORDON and the House leadership for making these investments, and I urge my colleagues to support this bill. This is about the future.

Ms. GIFFORDS. Mr. Chairman, I now yield 1 minute to the gentleman from New York (Mr. TONKO).

Mr. TONKO. Mr. Chairman, I represent the capital region of New York State, an area which, led by Thomas Edison, pioneered a revolution in electricity which changed our society a century ago. I believe it is with that spirit that we look to take bold action with the American Recovery and Reinvestment Act.

This package contains some $4 billion for job training, which is essential to preparing the American workers to compete for the jobs of the future. It also contains $2 billion for alternative energy research, and $11 billion to develop and build the next generation energy grid. These are crucial investments that will create high-paying jobs right now and make our country more secure and energy efficient into the future.

In these difficult economic times, we must not forget our commitment to our children and grandchildren. The stimulus bill will provide over $140 billion to make sure that our education system can move forward into the 21st century. We must act now and boldly to move our country in the right direction and to provide relief for our overburdened working families.

Ms. GIFFORDS. Mr. Chairman, may I inquire how much time we have remaining?

The CHAIR. The gentlewoman has 4½ minutes remaining.

Ms. GIFFORDS. Mr. Chairman, I now yield 1 minute to the gentleman from Ohio (Mr. BOCCIERI).

(Mr. BOCCIERI asked and was given permission to revise and extend his remarks.)

Mr. BOCCIERI. Mr. Chairman, the people of Ohio's 16th District elected me to fight for them and their tax dollars. The American Recovery and Reinvestment Act is about putting America first. It is about investing in our country. Some on the other side didn't bat an eye when they voted to use American tax dollars to rebuild Iraq, spending billions on new roads and bridges there. There was no outrage during those spending days.

Our people are hurting. Our people are struggling and asking us for leadership. It is time to put partisanship aside. In this time of great need, investing in our schools, our roads, our bridges is about making America stronger. Ohio will receive a much-needed economic boost with these resources, and we will invest in the future of our country. Ohio needs the estimated $1.5 billion in infrastructure improvements to help create jobs. Creating jobs in alternative energy like fuel cells or plug-in hybrids being researched in my district will move us away from the dependence on foreign oil. This bill will help America innovate and invest in the jobs of tomorrow.

Ms. GIFFORDS. Mr. Chairman, I now yield 1 minute to the gentleman from Michigan (Mr. PETERS).

Mr. PETERS. Mr. Chairman, I rise in support of H.R. 1. This recovery package supports the development of new advanced vehicle technologies that will lower emissions, improve fuel economy, and create new jobs across the country. This bill includes $2 billion to build new manufacturing facilities for the kinds of advanced vehicle batteries and battery components that will power the next generation of vehicles.

We are facing a global credit crisis, and auto companies around the world are struggling. Foreign governments are taking dramatic steps to help their own auto companies. If we are going to ensure the next generation of green manufacturing jobs are created here in the United States, we have to invest now in these advanced technologies. This bill helps ensure that we do not trade our dependence on foreign oil for a dependence on foreign batteries and other technologies.

The American Recovery and Reinvestment Act is good for Michigan and it is good for America. I urge its passage here today.

Mr. CAMP. Mr. Chairman, I yield 3 minutes to the distinguished ranking member of the Energy and Commerce Committee, the gentleman from Texas (Mr. BARTON).

(Mr. BARTON of Texas asked and was given permission to revise and extend his remarks.)

Mr. BARTON of Texas. Mr. Chairman, I rise in opposition to the so-called stimulus bill for a number of reasons, both process and procedural. On the process, we had 1 day to consider 270 pages of text in the Energy and Commerce Committee. Five Republican amendments were accepted during the markup; three of those five were stricken from the bill before it came to the floor, and the fourth one, which is in the bill, is in the bill in a different form than which it was agreed upon during the negotiations during the markup. I don't think that is really good form.

On the substance of the bill, most of the Energy and Commerce title is really social program policy and spending. It may be good, but it is not stimulative in and of itself in terms of what we are here to do.

There is one title in the energy section which I think my friends on the majority side need to know about; it is something called decoupling. It gives a utility the right to petition a State that if the consumers in that State do all these energy efficient measures and they decrease their use of electricity, by decoupling what the consumers pay for it the utility has a revenue guarantee: Use less, pay more. I mean, as insane as that sounds, it is in this bill. I offered an amendment to strike that from the bill in the committee and it was on a party line vote rejected. Every Democrat voted to keep that in the bill; every Republican voted to remove it.

So if this actually becomes law, if a governor of a State acts positively on a petition from a utility in that State, the utility can decouple what it charges your voters for what you pay for electricity regardless of how much you use. If somebody cuts their electricity use 20 percent, they pay the same. Now, I don't know about most voters, but I know my voters, if they

conserve and consume less electricity, they want to pay less; but under this bill, they are going to pay more. How is that stimulative to the economy? I think that is actually destructive of the economy.

So, Mr. Chairman, with all due respect, while there is some good in this bill, there is so much that is really not stimulative, and there is some stuff that is just really harmful that we should vote ''no.''

There is one other thing. Under this bill, they struck the amendment by Mr. STEARNS that says if a millionaire wants to get on COBRA and get his health care paid for two-thirds of the premium, he has got to prove that he is not a millionaire, that he doesn't have income and he doesn't have assets. They accepted that on a voice vote in the committee, but they struck it out. So there is no income test, there is no means test. Basically, Mr. Madoff, who just defrauded billions and billions of dollars, is going to be eligible for COBRA assistance under this bill. Vote ''no.''

Ms. GIFFORDS. Mr. Chairman, I now yield myself such time as I may consume.

As a Representative from the State of Arizona, the State that is the most abundant State in terms of sunshine, I would like to take the remainder of the time to talk about my support for solar power.

A strong solar power industry is going to create good jobs, it is going to increase our competitiveness internationally, and it is also going to help us reduce the threat of climate change. This form of renewable energy is going to be good for our economy, it is absolutely going to create much-needed jobs, and it is really going to focus on that next 21st century economy. It is going to really focus on our future. So I am pleased that this legislation includes some solar investments such as research and basic science, basic energy science, as well as applied research and development. The bill also includes critical funding for critical research into advanced transmission and energy storage technologies, what Representative PETERS from Michigan spoke of earlier.

Innovation in these two areas is essential to unlocking solar power's full potential. But that is not all that is included in this bill. We also are looking at language that contains critical financial incentives to support the development of solar power generating facilities. These provisions offer direct grants to qualified renewable energy products in lieu of the investment tax credits, also known as the ITC.

In the current economic downturn, the ITC cannot achieve its full potential, because many entities that would like to invest in solar power do not have taxable income. Therefore, this grant program is essential.

Unfortunately, the grant programs application is limited. It falls short of supporting large-scale solar projects with long lead times. We have seen many of these projects proposed throughout the Southwest and in other areas. That is why I have offered an amendment to expand this provision to include the large solar projects with the greatest potential to boost our economy. They are going to maximize job creation, foster greater investments and dramatically expand the amount of power our Nation gets from solar energy.

So as this bill moves forward, I urge the House and Senate to consider this amendment. We have this opportunity to take advantage and facilitate large and small scale projects. I would like us to help achieve President Obama's goal of doubling our Nation's renewable power capacity over the next 3 years. We are looking at 40,000 new jobs and $8 billion in investment. This is exactly the kind of bold action our Nation needs.

I reserve the balance of my time.

The CHAIR. The gentlewoman's time has expired.

Mr. CAMP. I reserve the balance of my time.

The CHAIR. The gentlewoman from New York (Ms. VELÁZQUEZ), the chairwoman of the Small Business Administration, now controls 5 minutes of the time.

Ms. VELÁZQUEZ. Mr. Chairman, I yield myself such time as I may consume.

(Ms. VELÁZQUEZ asked and was given permission to revise and extend her remarks.)

Ms. VELÁZQUEZ. I rise in support of the American Recovery and Reinvestment Act of 2009, which will help restore stability to our weakened economy and drive growth within the small business community.

Mr. Chairman, in a recent hearing my committee met an entrepreneur, Thomas Rankin, whose 83-year-old family business, Ramer Lumber, had managed to weather the great Depression but wasn't able to survive the current downturn. This past November, his business closed its door for good.

All across the country, countless small business firms are facing the same fate. Recovery efforts enacted last fall have not trickled down to Main Street. From Mom and Pop restaurants to technology startups, small firms of every kind are suffering. What we need now are solutions that work for entrepreneurs. After all, they are the ones that are promoting growth and they are the ones with a proven track record of creating jobs.

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But, unfortunately, a combination of restrictive lending and tightening credit has stunted small business growth, preventing entrepreneurs from playing their historic role of economic catalyst.

The Recovery and Reinvestment Act will help turn the tide. To begin with, $30 billion in targeted tax measures would allow struggling startups to stay afloat. For example, the bill will repeal the burdensome 3 percent withholding requirement for government contractors and allow for enhanced expensing for small businesses' purchases. For cash-strapped entrepreneurs, these initiatives could make the difference between meeting payroll and making layoffs.

The Recovery and Reinvestment Act also promises to thaw frozen small business lending and increase guaranties for new loans. At the same time, it will reopen the secondary market which has ground to a halt. Taken all together, these initiatives will put $13 billion into the hands of small businesses immediately, allowing entrepreneurs to do what they do best, create jobs. Small business lending provisions within the Recovery and Reinvestment Act will keep and create over 400,000 jobs. And at the end of the day, that is what small businesses do best, create jobs.

With unemployment at a 16-year high, let's not kid ourselves. There can be no recovery without job creation. That is why it is so critical that entrepreneurs have the resources they need to not just survive the downturn but to emerge from it stronger and ready to bring our economy back on track.

Mr. Chairman, I reserve the balance of my time.

Mr. CAMP. Mr. Chairman, I yield 2 minutes to the gentlewoman from Tennessee (Mrs. BLACKBURN).

Mrs. BLACKBURN. Mr. Chairman, I want to say thank you to my colleagues who are joining me on the floor to fight this stimulus bill that we have before us. Actually, using ''stimulus'' on this piece of legislation is an incorrect term, because when we look at this, what we have learned today is primarily that this is just another spending bill.

I find it so interesting. I don't know if my colleagues have had the opportunity to look at what the information we've had from the Congressional Budget Office, the CBO. And I know time and again, when we were in the majority, you all would take the CBO figures as the gospel. So it's a little bit of a head scratcher to us. You want to say you have a stimulus bill. But it's a spending bill. It's going to cost $1.1 trillion when you add the interest. But, interestingly enough, Mr. Chairman, that money doesn't go into the economy quickly. And I think that is what our constituents are so interested to learn.

Out of this $836 billion, and you add the interest in and you are at $1.16 trillion, now, $92 billion of that is released within the next 12 months. That is 2009 money. And then in 2010 you get another $225 billion, and in 2011 you get $159 billion.

Well, Mr. Chairman, ''stimulus'' means something immediate that is targeted, that is focused and that is going to address a problem. And we don't see that in this piece of legislation.

It is more spending on top of more spending. It is $50 million for the National Endowment for the Arts. It is $16 billion for Pell Grants. It is $2.1 billion for Head Start. It is $200 million for the National Mall. That is not stimulus.

The CHAIR. The time of the gentlewoman has expired.

Mr. CAMP. I yield the gentlewoman an additional 30 seconds.

Mrs. BLACKBURN. That is not stimulus. That is government spending. That is growth of government problems. If you want to stimulate the economy, reduce taxes and leave money with the taxpayers, pay attention to small business and listen to their needs.

Mr. Chairman, my colleagues, the Democrats in Congress are building a ''Bridge to Bankruptcy'' for a lot of small businesses, for a lot of American families and for the U.S. government.

I urge my colleagues to stand strongly against H.R. 1.

Ms. VELÁZQUEZ. Mr. Chairman, I yield 1 minute to the gentlelady from Illinois (Mrs. HALVORSON).

Mrs. HALVORSON. Mr. Chairman, I would like to thank Chairwoman VELÁZQUEZ for the opportunity to speak on this matter of utmost importance to the American people. Nothing is more critical at this moment in time than creating jobs. Days ago I learned that an important employer in my district is cutting 20,000 jobs. This is terrifying news to many of my constituents because each lost job forces a family to make difficult decisions. Health insurance becomes more difficult to maintain. College costs become more overwhelming. Mortgage payments become impossible to meet. It's clear we must act decisively, immediately, and on a scale that is bold, innovative and that will create new jobs to grow our economy.

It's critical that we invest in American infrastructure, including schools, energy, technology and small businesses. The American Recovery and Reinvestment Act will do exactly that.

I urge my colleagues to support this bill.

Mr. CAMP. Mr. Chairman, I reserve my time.

The CHAIR. The gentlewoman from New York has 1 minute remaining.

Ms. VELÁZQUEZ. Mr. Chairman, as a result of restricting lending and vanishing credit, small firms spanning every sector are folding at alarming rates. This is particularly troubling because they comprise 95 percent of American industry and employ half of the private sector workforce.

When these businesses disappear, so do many millions of American jobs. The American Recovery and Reinvestment Act offers an opportunity to keep the jobs we still have and to create hundreds of thousands more. Just as importantly, it is an investment in our Nation's entrepreneurs, the people creating jobs, driving innovation and strengthening the backbone of our economy.

I urge the adoption of this bill.

I yield back the balance of my time.

Mr. CAMP. I continue to reserve.

The CHAIR. The gentleman from South Carolina (Mr. SPRATT) controls the next 5 minutes.

Mr. SPRATT. Mr. Chairman, I yield myself such time as I may consume.

Mr. Chairman, we can debate this bill endlessly tonight, but no one can contest this point, this fact; we are in the midst of the greatest, longest and deepest recession since the Great Depression.

The question before us is simply this: Will we act, act now and act boldly in an effort to restore our economy to a healthy status, or will we run the risk that this recession will become even deeper and longer?

Now, I know that some doubt or disdain the steps taken so far by the government. Let me say up until a week ago that government was the Bush administration. I know that some question whether or not these steps have done any good. But let's go back to September and October. We witnessed a complete collapse of confidence in the global financial system and a wrenching credit crunch for corporate and consumer borrowers both. The spread between the 3-month LIBOR, the London Interbank Lending Rate, and 3-month Treasuries, which is a proxy for the willingness of banks to lend money, reached 360 basis points, 3.6 percent. Many feared, with good reason, that we would soon be in a cash-and-carry economy.

We passed the bill which provided additional liquidity. It hasn't accomplished all we hoped it would. But the spread that I just mentioned has fallen from 360 basis points to 100 basis points, still double the normal spread, but that is a big improvement and one clear indication that government actions have produced some good effect. Sure, they are not lending as much as we would like. Financing for consumer durables like autos and homes is not where we'd like it to be. But we are a lot better off than we would have been if the government had not intervened.

Now, I know some recoil at the enormous costs we are incurring. And I'll be frank with you, I find it stunning. $825 billion. But the cost of doing nothing is not zero. Far from it. What is the cost of doing nothing? Well, the CBO tells us that the cost of doing nothing, nothing tonight, nothing further, could be as much as a 2.2 percent contraction in GDP over 2009, the current year, and an unemployment rate climbing to 9 to 10 percent. Other forecasters predict even worse. We had several before our committee today. Mark Zandi of Moody's Economy.Com forecasted today a 3.4 percent contraction in the economy in 2009 with unemployment soaring to 11 percent next year.

Still people say, well, why does the government need to respond? Why can't we let this recession, like others in the past, run its course and self-correct? Well, our economy is up against some major head winds. Consumers have cut spending because their principal asset, their home, has plummeted in value by 20 percent, and some say it may go 20 percent more before we reach a reasonable trend line. There are huge overhangs in the real estate market. Real estate may have led us out of past recessions, but not this one. Nor will automotives. If anything, they are in deeper doldrums. With credit shrinking and retail sales falling, it is unlikely that the manufacturing sector will step up the production of goods for which there is little market. Finally, with the Fed fund rates at virtually zero, monetary policy is at the end of its tether.

What is left, if we were to do something, if we were to intervene, if we were to restore health to our economy? A major fiscal response by the government is the only viable option left on the table.

Now, what could a $825 billion stimulus bill accomplish? CBO forecasts an economy in 2009 or GDP equal to $14.2 trillion if we don't act. That is an economy operating at 6.8 percent less than its reasonable capacity, its potential. CBO predicts the same for 2010. My friend, that is a gap of nearly $1 trillion in potential production, goods and services that people in this country could enjoy and use, $1 trillion a year if we don't act.

According to CBO, the recovery bill will raise output between 1.3 percent and 3.6 percent by the end of this year. If we take the middle of that range, 2.5 percent, that is an additional $350 billion worth of goods and services purchased which businesses will then generate into several million badly-needed jobs.

A recovery bill that invests in America and begins to repair our stock of capital will yield dividends down the road. If investing in our schools, our children, our workforce, our roads, our bridges, our ports, our schools, our waterways, our transit and our scientific and technological base did not produce solid economic returns, how would our Nation have ever emerged to lead the world.

I urge everyone to support H.R. 1, the American Recovery and Reinvestment Act.

Mr. CAMP. I yield 2 minutes to the gentlewoman from Minnesota (Mrs. BACHMANN).

Mrs. BACHMANN. Mr. Chairman, I thank the gentleman from Michigan for yielding and for the fine work that he is doing on these moments that we have together.

One guarantee that we do have from the stimulus bill that we can count on, that we can take to the bank, on which there will be no disagreement and no dissent is this: If we pass this $825 billion stimulus tomorrow, and it seems to be a certain thing because the majority has the votes, and if we add to that the debt service which would be over $300 billion added on top of that, bringing us to a total of over $1.1 trillion, the certainty, the guarantee that

we will take to the bank, that we will need to look at the American people straight in the eye and be four square honest in telling them is this: You will encounter punishingly high tax increases at every level of the economic spectrum. It's a given. We have to.

Why can we say this with certainty? Because someone has to pay this bill. When you go out to eat, the check comes and someone has to pay for it. Maybe a nice person at the other table will pay for your check. But at the end of the day, someone is paying that check. And it's the American people that are paying for this party.

Make no mistake. This stimulus bill has very little to do with stimulating the economy and helping the average American. This is a bailout for big government. And let's get ready. We are looking at massive tax increases and we are looking at massive inflation or both. In fact, we could be looking at hyperinflation.

I don't want to be ''Debbie Downer'' bringing bad news to the American public, but it's a certainty. If you spend money at this level, and consider we are spending almost as much money on this stimulus bill as we will spend in our discretionary spending, take it to the bank. That is our future.

Mr. Chairman, the legislation under consideration today will saddle generations of taxpayers with hundreds of billions of dollars of debt and will, I fear, not lead this country to real economic recovery.

The Democrats' bill has a starting price of $825 billion—enough money to give every person living in poverty in the United States $22,000.

In fact, the total cost of this one piece of legislation is almost as much as the annual discretionary budget for the entire Federal Government.

To make matters worse, the nonpartisan Congressional Budget Office (CBO) estimates that the real cost of the legislation will be more than $1 trillion.

CBO reports that if Congress borrows more than $800 billion, it will burden future generations with an additional $347 billion in interest payments. That totals more than $1.1 trillion.

And, regrettably, that total includes frivolous spending on items such as $600 million for new cars for the Federal Government and $21 million for sod to fill in the mall after the inauguration.

We must not forget our responsibility to the taxpayer simply because we label something a crisis or even a response to a crisis.

The Democrats' have tried to sell this proposal as a transportation and infrastructure investment package. And, I'm all for investing in rebuilding our Nation's roads and bridges and believe that government spending on transportation infrastructure projects is absolutely important.

However, only $30 billion of the bill—or three percent—is for road and highway spending. And, CBO states that much of this spending will take several years to make any stimulative impact.

My constituents understand that we cannot spend our way to prosperity and that serious consequences lie ahead if Congress goes down this irresponsible borrow-and-spend path.

What the American people really need are long-term, permanent tax cuts which will impact families twice as fast as the Democrats' government spending in this bill. These tax cuts will spur job creation and help stabilize the economy over the long run.

I support much-needed, incentive-based relief for small businesses, the job-creators and the backbone of our economy, and I believe we must reduce the financial burden that the Federal Government imposes on middle-class families.

I'm a cosponsor of the Economic Recovery and Middle-Class Tax Relief Act, which is a real economic recovery plan that has NO welfare spending, NO pork-barrel spending, and NO bailouts.

This package would immediately inject private capital into our economy and at the same time, it would lay the groundwork for sustained economic growth.

It includes a permanent 5 percent across-the-board income tax cut. It increases, and makes permanent, the child tax credit to $5,000 and makes the lower 15 percent capital gains and dividends rates permanent.

It repeals the Alternative Minimum Tax, AMT, on individuals—a punitive and outdated relic of a tax which will hit more than 30 million people in 2009.

It permanently repeals required distributions on retirement accounts and makes all withdrawals from IRAs tax- and penalty-free during 2009. And, it increases by 50 percent the tax deduction on student loans and on qualified higher education expenses.

These are just some of the key initiatives of this legislation.

We have seen the mistakes of tax-and-spend government policies in the past and know that they will not lead to long-term economic growth and recovery.

We must implement real, permanent tax relief for American families and stop this Washington spending spree that will burden many generations to come.

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Mr. CAMP. I yield 2 minutes to the gentleman from Oregon (Mr. WALDEN).

Mr. WALDEN. Mr. Chairman, I rise today in opposition to this spending bill that is before us.

I spent 12 hours in the Energy and Commerce Committee where we marked up our portion of this legislation, and I think there were some real amazing things in this bill that maybe some people on this floor don't know about. I was going to ask the gentlelady from Illinois (Mrs. HALVORSON) about it because she mentioned insurance. In here is a provision for the taxpayers in my district who are still working to support insurance payments up to 65 percent for those who may lose their jobs.

In the Energy and Commerce Committee, we passed an amendment in a bipartisan way to say that millionaires who made a million bucks last year, you don't have to have my taxpayers support your COBRA payments. Unfortunately, somewhere along the mystical way that this bill came to the floor, that bipartisan amendment got stripped out. So now you could be Madoff, I suppose, and get your COBRA paid for.

There is a recoupling provision in here on energy that I think is one of the most perverse things I have ever heard of; that if my constituents invest in energy conservation in their homes to reduce their energy consumption, which is good for the environment and good for their wallets, if you vote for this, you are going to vote to say the utility companies can raise their rates to make up the lost revenue. So this puts utility company revenues ahead of consumers in States, Massachusetts, Oregon, the other 48 States and the territories. You are going to encourage them on the one hand to conserve on energy, and on the other hand you are going to grant this new authority so the utility companies can raise their electricity or gas rates.

This is an enormous borrowing bill. This is making the Federal Government the next subprime lender. Why else is it for the first time I believe in our country's history there is now an insurance product available on U.S. securities? Why? Because people are starting around the world to say we are not so sure about America.

I am trying to figure out, and maybe the gentleman on the other side of the aisle can answer, who is going to loan us this money? Have we ever gone to the market for $2 trillion to $3 trillion?

The CHAIR. The Chair understands the gentleman from Michigan is the remaining speaker on this side. The gentleman from Wisconsin has the right to close.

Mr. CAMP. Mr. Chairman, we have one remaining speaker in addition to myself.

Mr. OBEY. Mr. Chairman, I have two remaining speakers on this side.

First, I would like to redesignate the time previously allocated to the Committee on Oversight and Government Reform to the gentlewoman from New Hampshire (Ms. SHEA-PORTER) of the Education and Labor Committee, 2 minutes.

Ms. SHEA-PORTER. Mr. Chairman, I rise today in strong support of the American Recovery and Reinvestment Act. This legislation is necessary to rebuild our economy. Like other States, my State of New Hampshire has been hit hard by the Nation's economic crisis. Our unemployment rate has risen, foreclosures have increased, and the State is facing a very serious budget shortfall.

Over the past few weeks, I have traveled throughout my district talking to local officials, business owners, and other constituents. In each meeting I have attended, the main theme is the same: infrastructure and jobs, infrastructure and jobs.

In Dover, we talked about the need to replace some of the water and sewer piping of a system that has been in existence since the late 19th century.

In Portsmouth, we discovered the need to invest in the water treatment plant to guarantee safe drinking water into the future.

In Manchester, the largest city in New Hampshire, I heard from the board

of aldermen about the crucial need for transportation funding.

In North Conway, I heard from town officials whose projects were not only necessary for public safety, but were forward-thinking, incorporating green energy technology.

The infrastructure investments in this bill are essential for the current and future health of our economy. We cannot fund every worthy project, but we will create and save jobs in New Hampshire and across the Nation.

I am very hopeful that these funds, like the investment that was made in Dover more than a century ago, will be used to make investments and infrastructure improvements that will leave real, meaningful and lasting results for our communities. After all, we are borrowing money, money that future generations of Americans will have to pay back. I hope that they will be able to see tangible benefits for their money.

So many Americans families are hurting. We must not only acknowledge their pain, we must help them recover. This package will help them recover. This package will help America recover. I urge my colleagues to support this bill.

Mr. CAMP. I yield 2 minutes to the gentleman from Tennessee (Mr. ROE).

Mr. ROE of Tennessee. Mr. Chairman, I rise in opposition to this enormous economic stimulus package. To put its size in perspective, one-tenth of 1 percent of the stimulus would solve Tennessee's State budget deficit.

To quote one of my favorite baseball philosophers, Yogi Berra, if you don't know where you're going, you might end up someplace else. I think with this bill we are going to end up someplace else.

We know that this spending is enormous. The question is, is it going to work? This past week the nonpartisan Congressional Budget Office cast doubt on whether this is going to be effective when it said only 7 percent of the plan's infrastructure spending would be spent by the end of the first fiscal year, and only 65 percent of the total package would be spent by 2010. I as a previous mayor support infrastructure spending.

Even more troubling for taxpayers is where their money is going. We were about to spend $50 million on the National Endowment of the Arts. Whatever one believes about spending taxpayer dollars on the arts, shouldn't we all be able to agree it should not be done when the country is facing a trillion dollar deficit and that it is not economic stimulus.

Until it was exposed, this so-called economic stimulus bill was spending millions on birth control.

People back in Tennessee are adapting to this troubling economic climate by tightening their belts and clamping down on unnecessary spending, and so they are understandably upset that the Federal Government's reaction is exactly the opposite. They are amazed that we preparing to spend an additional $825 billion of their money after a $700 billion bailout was spent without anybody being able to give a straight answer as to where the money went. They are skeptical of the results we are getting, and so am I. An economic stimulus project should fund projects that stimulate the economy, create jobs with long-term economic growth, not as a short-term fix.

Mr. CAMP. Mr. Chairman, I reserve the balance of my time.

Mr. OBEY. Mr. Chairman, I yield 2 minutes to the gentlewoman from Connecticut (Ms. DELAURO).

Ms. DELAURO. Mr. Chairman, the American people have been paying for the Republicans' party for the last 8 years. It is time now to get back to America's middle class. I rise in support of this economic recovery plan. It is a bold plan. It creates jobs and moves to long-term growth. We must act now to help a middle class hit hard by job insecurity, stagnant wages, rising health care costs, and a financial market in crisis. We have an urgent responsibility to invest wisely, target limited resources to proven initiatives that we know will boost employment, support economic growth, and provide critical relief.

That means expanding eligibility of the child tax credit by reducing the threshold from $12,000 to zero. Over 16 million children would benefit. It means child care, Head Start, a serious infusion of resources to No Child Left Behind, and IDEA, investing in our long-term growth so future generations can compete. There is $40 billion for infrastructure funding, transit funding, additional billions for water, housing and school projects to put Americans back to work at a time when we are facing staggering unemployment.

We need to put the resources in the hands of people most likely to spend them quickly. There is $100 billion in unemployment benefits and job training, $27 billion for rural development through health care, public safety services, and an additional $150 million for the Emergency Food Assistance Program, supporting food banks stretched thin by rising food prices and surging demands.

Anyone looking for immediate and significant impact need look no further than Food Stamps, which generate $1.73 in new economic activity for every dollar invested.

This bill provides $20 billion to increase the Food Stamp benefit which could reach 14 million households less than a month after the bill is enacted. Leading economists have said that increasing Food Stamps is one of the most efficient ways to prime the economy's pump, and it also helps part-time workers.

No investments are more critical than those we have to make in human capital. I urge my colleagues to support the bill.

Mr. CAMP. Mr. Chairman, I yield myself such time as I may consume.

Mr. Chairman, our economy is in a recession and we must act. The question, however, is what action do we take. The President has directly challenged us to put aside partisanship and find an American solution.

I was pleased to meet with the President today and ask about including new provisions in this bill. Frankly, what we saw from the President today was a greater effort to reach out to Republicans than we have seen from the House majority.

Mr. Chairman, the American people know we cannot spend our way to prosperity. What was once an $825 billion ''stimulus'' bill has now grown to be $1.1 trillion.

The American people know that adding $1.1 trillion to the deficit for new spending on old government programs will not create jobs. They know small businesses create jobs, not the Federal Government. And they know families can better manage their budgets than the Federal Government.

So as we go through this debate, we will point out some very simple facts about how effective Federal spending is versus tax cuts in creating real private sector job growth.

Just yesterday, the nonpartisan Congressional Budget Office released its review of the spending in the House Democrats' proposed ''economic stimulus'' legislation. This CBO review confirms what Republicans have been saying all along: the Democrat package won't stimulate the economy now when it needs it most.

The primary reason is, the Democrat plan relies too heavily on slow government spending initiatives, not tax cuts to do the job. As seen in the chart next to me, even the Democrat stimulus bill proves tax cuts impact families and the economy twice as fast as government spending.

CBO went on to say reductions in Federal taxes would have most of their effects in 2009 and 2010, but purchases of good and services, either directly or in the form of grants to States and local government, would take several years to complete.

Worse yet, CBO expects that the rate of spending in 2009 would be considerably slower than historical rates of spending, and many of the larger projects initiated would take up to 5 to 7 years to complete.

The bottom line is this, Mr. Chairman: The nonpartisan CBO confirms that tax cuts get more money into the hands of American families and our economy faster than government spending. The American people know that tax cuts are a better way to stimulate the economy than borrowing money from China just to increase Federal spending and raise the Federal deficit.

If the Speaker was interested in answering the President's call to reach a bipartisan American solution to this crisis, she would work with Republicans to increase tax relief for every working American.

Mr. Chairman, I yield back the balance of my time.

Mr. OBEY. Mr. Chairman, I yield myself 3 minutes.

Mr. Chairman, this has been in many ways a very sad debate. We face the prospect of economic collapse. We certainly face the worst economic crisis in our lifetime. We have been asked by the President to pass legislation that will try to put people back to work by repairing schools, by building roads, by developing modern energy grids, and by making broadband available to rural America. We have been asked to invest in science and technology to make our economy more efficient and more productive and more conducive to job growth. And we have been asked to invest money to make our health care system less costly and more efficient and more open to more people.

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We've also been asked to provide assistance to people who have lost their jobs through unemployment insurance, and by helping them to meet the cost of education, especially college.

And we've also been asked to take actions to help stabilize State and local budgets so that while we try to expand the economy at the national level we aren't shrinking the economy at the State level through unfortunate State tax increases or service cutbacks. That's what we're trying to do.

This is serious business. And yet when you look at much of the debate that we had today, you would think that we were playing a game of Trivial Pursuit. We've had at least 10 Members of this body on the other side of the aisle focus on the really big picture by complaining about the fact that there is a $50 million appropriation for the arts or, can you imagine, because we have the temerity to want to try to repair the Jefferson Monument to prevent the plaza on the Mall from sinking into the Tidal Basin. It is really sad, indeed.

I wonder why it's come to this. And then I recall a statement by a member of the House Republican leadership in which he advised his caucus members to deal with their minority status by behaving like a thousand mosquitos and apparently inflicting mosquito bites on the majority.

We've had a lot of Republican talk about bipartisanship, which was welcomed; but yet before President Obama even was able to appear before the Republican Caucus today we are told in newspaper stories that one of the key leaders in the Republican Caucus advised their Caucus even before the President came——

The CHAIR. The time of the gentleman has expired.

Mr. OBEY. I yield myself 2 minutes.

And yet we're told that the Republican Caucus was advised to vote against this bill by one of their leaders.

I think the public will see through this. It doesn't matter much what we say to each other or how we talk to one another. It should, but apparently it doesn't. All I can say is we have a serious job before us. We have had many ideas expressed for many months, but the time for talk is over. We need to make decisions. And right now, like it or not, the only comprehensive package before us, the only balanced package before us is the one being brought to us in this bill today. And I would hope that tomorrow, when we vote on it, that there will be significant bipartisan support for that package. I don't know if I have any real expectations that will occur or not, but I would certainly like to think so.

Ms. JACKSON-LEE of Texas. Mr. Chair, I would like to address H. Res. 88, the rule providing for consideration of the ''American Recovery and Reinvestment Act of 2009'' and the bill itself. I believe the H. Res. 88 can be supported by every Member of the House.

Mr. Chair, just yesterday the Associated Press reported that tens of thousands of Americans will be losing their jobs. This news was on top of the 2.6 million jobs lost last year under the old Bush Administration. Some of the biggest names in industry have announced layoffs yesterday, from Sprint Nextel, Caterpillar, Home Depot, to GM, all of these companies have announced thousands of layoffs.

Experts believe that without intervention, unemployment will rise to 8.8 percent, the highest since 1983, and it is reported that the worst business conditions in greater than 20 years will exist.

The American Recovery and Reinvestment Act will result in infusing greater than $850 billion into America's ailing economy. With this economic recovery plan, there will be 4 million more jobs and an unemployment rate that will be 2 percentage points lower by the end of 2010. Moreover, H. Res. 88 provides for unprecedented accountability and transparency measures that are built into the legislation to help ensure that tax dollars are spent wisely. $550 billion is strategically targeted to priority investments; $275 billion in targeted tax cuts will also help spur economic recovery. All of these laudable aims are achieved without earmarks. This Act represents the culmination of priorities shared with the new Obama administration and is sure to help America's economy in the long term.

AMENDMENTS

I would have offered the following four amendments to the underlying bill, H.R. 1.

AMENDMENT 1

First, I would have offered several amendments that specifically addressed the issue of funding for parklands, either rural or urban in the bill. I would have made clear that the funding in the bill in Title VIII does not preclude the use of the funding ''for the restoration, creation, or maintenance of local and community parks, including urban and rural parks.''

The inclusion of such language would make eminently clear the Congress's intent to work on green spaces and the creation of green jobs in a new America. This is a priority already articulated by the present Obama administration and that would be appropriately mirrored here in this legislation.

AMENDMENT 2

Second, I would have offered an amendment that allowed local parks and recreation facilities to be provided with $125 million for construction, improvements, repair or replacement of facilities related to the revitalization of State and local parks and recreation facilities under the Land and Water Conservation Act Stateside Assistance Program, as amended (16 U.S.C. 4601(4)–(11)), except that such funds shall not be subject to the matching requirements in section 4601–89(c) of that Act:

URBAN PARKS

For construction, improvements, repair, or replacement of facilities related to the revitalization of urban parks and recreation facilities, $100 million is made available under the Urban Park and Recreation Recovery Act of 1978 (16 U.S.C. 2501 et seq.), except that such funds shall not be subject to the matching requirements in section 2505(a) of the Act: Provided that the amount set aside from this appropriation pursuant to section 1106 of this Act shall not be more than 5 percent instead of the percentage specified in such section and such funds are to remain available until expended. Cities and counties meeting this criterion would have to include the required distress factors as part of their applications for funding.

AMENDMENT 3

The third amendment that I would have offered would have extended the special rule regarding contracting under this bill to all sections of the bill.

The special rule on contracting would provide that each local agency that received a grant or money under this Act shall ensure, if the agency carries out modernization, renovation, or repair through a contract, the process for any such contract ensures the maximum number of qualified bidders, including local, small, minority, women- and veteran-owned businesses, through full and open competition.

This amendment is important because it ensures that qualified bidders, including local, small, minority, women- and veteran-owned businesses, participate in the process through full and open competition. This would definitely create jobs and help these communities.

AMENDMENT 4

A fourth amendment that I would have offered would have conditioned the release of monies to the Department of Justice to prevent prosecutorial misconduct. Specifically, the language would have prevented the release of money to the Department of Justice unless the State did not fund any antidrug task forces for that fiscal year or the State had in effect State laws that ensured that:

(A) a person is not convicted of a drug offense unless the fact that a drug offense was committed, and the fact that the person that committed that offense, are each supported by separate pieces of evidence other than the eyewitness testimony of a law enforcement officer or an individual acting on behalf of a law enforcement officer; and

(B) a law enforcement officer does not participate in an anti-drug task force unless the honesty and integrity of that officer is evaluated and found to be at an appropriately high level.

While I did not formally offer these amendments, I believe that their goals are no less aspirational and that these are indeed good ideas that should be included.

OBERSTAR AMENDMENTS

AMENDMENT 1

Mr. Chair, I support, and I urge my colleagues to support two amendments offered by Chairman OBERSTAR. First, I would urge my colleagues to support Chairman OBERSTAR'S

amendment that any monies appropriated under Title XII be used within 90 days or the use of such funding will be forfeited. This so-called ''Use or Lose It'' amendment addresses the issue of job creation and the necessity that the Nation must act fast. It is believed that with the inclusion of this language entities will act without delay for fear of forfeiting access to much needed funds. These monies are critical for the renovation and improvement of the Nation's transportation and infrastructure and must be expeditiously used to ignite our transportation system across the Nation. This infusement of capital into the Nation's transportation and infrastructure will surely create jobs for Americans.

AMENDMENT 2

Similarly, I support Chairman OBERSTAR'S amendment that would authorize $9 billion for use for transportation and Infrastructure development, creation, and renovation in America. Frankly, I would support increasing the amount to $12 billion because the expansion of the Nation's transportation and infrastructure is critically important to the expansion of the economy and job creation. I urge my colleagues to support this second amendment offered by Chairman OBERSTAR as well.

Mr. Chair, given the exigency of the situation and the Nation's current economic crisis, I would urge this Committee and my colleagues to move this bill quickly to the floor and act without delay. The Nation is at a crossroads and is currently sitting in its nadir, as some pundits would argue, the Nation's economy needs to be infused with capital, critical infrastructure and development, and the American people need to employed with real jobs. H.R. 1 does this. It creates the development of infrastructure, provides Americans with jobs, and tries to correct the economy. I am hopeful that this bill will help alleviate the economic woes this country faces.

As the Obama Administration staked its campaign upon the idea of change and won, I believe that America is ready for a change. We are ready to be lifted from the doldrums of economic morass. We are ready for real change that puts America, its economy, its innovation, and entrepreneurial spirit back in its rightful place. I am hopeful and confident that H.R. 1 does just that and places America back in the spotlight as the sunbeam on the world stage. I strongly urge my colleagues to act quickly and support H. Res. 88 as vigorously as I do.

Mr. PRICE of North Carolina. Mr. Chair, I am pleased to rise in support of the package before the House today, which will help put our country on a steady path toward economic recovery.

I want to thank all of the committees that have worked to put this together, particularly the members of the Appropriations Committee and its hardworking staff. As Chairman of the Homeland Security Appropriations Subcommittee, I have tried to develop proposals Members can support with confidence that they will help get our economy moving while also making us safer.

We worked diligently to scrub this bill and to make sure that the provisions that we've included would create jobs and put our economy in a stronger position for the long haul.

The bill contains $1.1 billion in new homeland security investments. We estimate that this will not only directly create thousands of jobs, but will also contribute significantly to improving both security and efficiency at our ports of entry and airports. This funding will primarily accelerate critical investments that the House has repeatedly voted for.

The recovery package contains $500 million to buy and install Aviation Explosive Detection Systems and checkpoint screening systems in the Nation's airports, improving security while helping speed the flow of travelers through airports. A more efficient transportation system will help grease the skids of our Nation's commerce. Funds will be competitively awarded based on security risk.

$150 million is provided to replace and repair Customs and Border Protection-owned land ports of entry at the top 10 facilities. This will improve border security, facilitate travel and trade, and reduce wait times. Once again, it will stimulate commerce by improving the transport of goods.

The package also includes $150 million to enable the Coast Guard to alter or remove hazardous bridges and make marine navigation safer and more efficient.

$100 million is provided for non-intrusive inspection devices to enhance security at seaports. These new devices will replace aging cargo scanning systems to ensure that our security requirements do not interrupt the flow of commerce.

Lastly, this recovery package extends aid to those hit hardest by the recent economic crisis through FEMA's Emergency Food and Shelter Program. $200 million is included to help local community organizations provide food, shelter, and support services to the Nation's hungry, homeless, and people in economic crisis. This will provide, among other things, 1-month utility payments to prevent service cut-off, and 1-month rent or mortgage assistance to prevent evictions or to help people leave shelters. Funds will be distributed by formula based on unemployment and poverty rates.

This funding has been carefully reviewed to ensure it will help the most vulnerable among us, will create new jobs, can be obligated quickly, will make our country safer, and will help improve economic efficiency. I urge members to support these homeland security investments and to vote for this economic recovery package.

Mr. TOWNS. Mr. Chair, H.R. 1, the American Recovery and Reinvestment Act is a critical first step to beginning what will be a long process of recovering from our current economic crisis, the likes of which we have not seen since the Depression of the 1930s. I am proud to be an original cosponsor of this bill.

Our Nation has already lost 2 million jobs in the current recession, and is expected to lose another 3–5 million in the coming year. The bill before us targets priority investments in infrastructure, education, health care, and energy in an effort to forestall those job losses by creating or saving 3–4 million jobs.

While the need for this economic stimulus package is urgent, clear, and compelling, we must also make sure that the money is spent wisely, and that waste, fraud, and mismanagement of these funds is kept to an absolute minimum. That is why this bill includes provisions that will ensure an unparalleled level of oversight, transparency, and accountability.

Over the past few years, Oversight Committee investigations have uncovered waste and theft of government dollars on an unprecedented scale. Stacks of one-hundred-dollar bills were loaded onto cargo planes with forklifts and flown to Iraq—and nobody could say what happened to the money. Billions were spent on Katrina contracts, with little to show for it. When writing this bill, we worked with Chairman OBEY so waste and fraud is prevented from the beginning.

The bill will provide almost $210 million to agency Inspectors General and $25 million to the Government Accountability Office to ensure vigorous oversight of the programs and activities being funded through this bill. It will fund auditors and accountants, and more importantly, criminal investigators, to track the funds. The bill also creates a Recovery Act Accountability and Transparency Board to review management of the funds and provide early warnings of problems.

The bill requires an unprecedented level of transparency over the announcement and award of contracts and grants through a special Government Web site. Federal, State, and local officials will be required to post this information. Governors and mayors will have to certify that any investments funded with recovery act dollars are an appropriate use of tax dollars. It is often said that sunshine is the best disinfectant. This bill puts that sentiment to work in an extraordinarily rigorous way.

In addition, the bill makes clear that Federal contracts awarded using recovery act dollars must comply with the Federal acquisition regulation and that fixed-price, competitively awarded contracts are used to the greatest extent possible. This will ensure that the taxpayer gets the best bang for the buck.

Contractors and other non-Federal employees are also afforded whistleblower protections under this bill. This is critical, since they are often our first line of defense against wasteful spending.

Mr. Chair, this bill is essential to jump-starting our economy and providing sustained growth. But it does so in a way which will ensure unprecedented accountability and transparency. I urge all Members to support it.

Mr. LEVIN. Mr. Chair, there is a crisis of confidence in our country. Much of it related to the meltdown that has occurred within the financial system.

But there is also an uncertainty on the part of everyday people across this country about whether they will be able to maintain the basics in their lives. They wonder if the bottom is going to fall out from beneath their families.

People are worried about their jobs and whether they will be able to meet the mortgage payment. This bill contains funds to create jobs by building roads, sewers, a new electric grid and other needed infrastructure. It also contains a tax cut for 95 percent of working Americans.

People are worried about whether they'll have health insurance for themselves and their families. This bill provides a 65 percent subsidy for COBRA health care coverage for unemployed workers. There is another provision that will allow people to qualify temporarily for Medicaid until they find another job or alternative health care. It is estimated that these two provisions will provide health insurance to more than 8 million people.

They are worried about the cutbacks they see happening in education and how it will affect their kids. And they wonder if they will be able to send their children to college. This bill contains funding for States and school districts to prevent deep cuts in critical education programs and modernize and repair schools. The

bill also boosts Pell grants by $500 to make college more affordable.

As much as anything, people are wondering whether the Federal Government is going to take action to help them—or will the old political divisions keep this Congress from taking effective action to help people in their daily lives.

By passing this bill, we show that we will step up to the plate and help address these concerns. This bill is a first step. Other steps will be needed, but this recovery package is a good beginning. Vote for the bill.

Mr. STUPAK. Mr. Chair, I rise in support of the American Recovery and Reinvestment Act.

With unemployment at its highest level in nearly 30 years, millions of American are struggling to pay for basic necessities as food, housing and health care, it is clear Congress must act.

In my district, our manufacturers have been hit hard by the crisis in the auto industry; our tourism economy has taken a beating as fewer Americans can afford to take a vacation; mining and forestry are suffering as the demand and price for raw materials has plummeted.

Unemployment ranges from the national average of 7.2 percent in Menominee County to 19 percent in Mackinac County. The Congress must act.

This legislation is not perfect; it is not everything I would put into an economic recovery legislation. Still, the Congress must act and act without delay!

My staff and I have been contacted by dozens of local officials from across Northern Michigan who have identified more than $360 million in road, bridge, water infrastructure and construction projects that could help jump start their local economies.

I expect only a portion of these projects may be funded—but Congress must act.

While I have reservations about this legislation, Congress must act to invest in the Americans who need a helping hand, not a hand out.

Michigan's unemployment rate is at 10.6 percent. We must act to extend unemployment benefits to help 3.5 million Americans who have exhausted their benefits.

We must act to increase food stamps to help 31 million Americans, half of whom are children.

We must act to protect health insurance coverage for Americans who have lost their jobs and are one illness or sickness away from bankruptcy.

Mr. Chair, this bill is not perfect. But the needs of the millions of Americans struggling through this deep recession demands the U.S. Congress to act. We must act. I encourage all of my colleagues to join me in supporting the American Recovery and Reinvestment Act.

Mr. MEEK of Florida. Mr. Chair, I support the American Recovery and Reinvestment Act and the important first step it takes toward reinvigorating our faltering economy. The bill invests critical dollars in nearly all major industries and will create more than 4 million jobs by the fourth quarter of 2010.

Over 300,000 jobs will be saved in Florida alone, reducing unemployment by 2.4%.

The $102 billion investment in increased income support will go to those families who are feeling the strains of financial pressure the most, providing increases in unemployment benefits, food stamps and COBRA healthcare.

Floridians can expect to see over $29.8 million directed to Head Start, over $105 million directed to child care and development block grants, over $13 million for low-income energy assistance, over $15 million for elderly nutrition programs, and nearly $9 million aimed for preventative health services.

This will help us ensure that those who have fallen with the economy won't be beaten down, but are given the protection and help they need to get back up.

I am proud the bill provides $211 billion in aid to state and local governments for vital services such as public education and law enforcement.

My own state of Florida is grappling with significant fiscal problems, due in large part to our foreclosure crisis, which has resulted in shrinking tax revenue, declining property values and slow retail sales.

I know that this federal aid to state and local governments will help fill in the gaps, ensuring our children get the educational support they need to complete on the global market. The bill provides over $654 million for grades K–12 and over $306 million for higher education institutions to modernize, maintain and repair their facilities in Florida.

The inclusion of the repeal of the 3% tax withholding on payments made to vendors by government entities will also help stimulate our economy, relieving small business and local governments from this unfair and burdensome requirement. Tax cuts in the stimulus plan will help those with the lowest incomes save more of their hard earned dollars.

In Florida this means those from the lowest end of the scale to those with middle incomes will see their taxes cut by more than 20% in 2009.

I am also pleased that the bill uses this opportunity to look forward, investing in clean and renewable energy and green infrastructure, to create jobs, reduce pollution and help to bring us to a clean energy future.

Mr. Chair, I support this bill and urge its passage.

Mr. KENNEDY. Mr. Chair, I rise today to state for the record the intent of the legislative language in the Special Rules section H.R. 1—American Recovery and Reinvestment Act of 2009, Title V—Medicaid Provisions, Section 5001, subsection (f) STATE INELIGIBILITY AND LIMITATION.

The intent of this language is to ensure that states which had laws directing reduced eligibility in their state plan or waiver on or before July 1, 2008, not be deemed ineligible to receive the increased FMAP that this bill provides, due to subsequent delays when implementing those provisions. It was the case in Rhode Island that as of July 1, 2008, state law directed and authorized the reduction of eligibility in one group of beneficiaries. These provisions were not finalized and fully effective until October 1, 2008 due to a delay in the implementation of a new extension period for the waiver. The language in this special rule allows states which encountered similar delays to remain eligible for an enhanced FMAP in this Recovery and Reinvestment Act.

Mrs. CHRISTENSEN. Mr. Chair, I want to thank Chairmen WAXMAN, OBEY and RANGEL, for their leadership and to thank all of the Ranking Members, Committee Members and Staff for this successful effort to bring the American Recovery and Reinvestment act of 2009 to the floor today so that we may deliver it on schedule to the President's desk. This bill, H.R. 1, will not only stimulate our economy, but will also do much to heal our Nation.

As our president has promised, this bill provides an immediate investment that will create jobs, but also does so with a look to the future so that the jobs created, the infrastructure built, the stronger healthcare system created, the technology that is expanded and the training and education that is improved, not only provides jobs for today but also those we need tomorrow. H.R. 1 will lay a strong foundation upon which to create a more stable and vital economy and will actually create savings in the future.

I am proud to support this bill for the very reason some on purely political reasons oppose it.

I support it because it begins to move our country in a new and better direction—one which once again supports children and working families and begins to lift Americans out of poverty and to expand access to quality, comprehensive and culturally and linguistically appropriate healthcare to everyone regardless of race, ethnicity, gender or geography.

As a physician and as the Chair of the CBC Health Braintrust, I am pleased that this legislation makes the sound and much-needed health and health care investments that many of us have been fighting for over the past eight years.

This bill not only invests needed resources into Medicaid, with increases for the Territories, it extends the period of COBRA coverage to help Americans who have lost their jobs keep their health care coverage and increases FMAP to bolster state economic recovery efforts, but it also begins to modernize our health care system through the widespread implementation of health information technology.

In H.R. 1 we finally begin to make prevention the priority it needs to be—with 3 billion dollars going into a prevention and wellness fund, 1.5 billion dollars going into modernizing and expanding health care services in community health centers and we finally invest in the diversification and expansion of our Nation's health workforce, increasing the number of primary care physicians, nurses and other health care personnel.

Mr. OBEY. Mr. Chairman, I yield back the balance of my time.

The CHAIR. All time for general debate has expired.

Under the rule, the Committee rises.

Accordingly, the Committee rose; and the Speaker pro tempore (Ms. JACKSON-LEE of Texas) having assumed the chair, Mr. TIERNEY, Chair of the Committee of the Whole House on the state of the Union, reported that that Committee, having had under consideration the bill (H.R. 1) making supplemental appropriations for job preservation and creation, infrastructure investment, energy efficiency and science, assistance to the unemployed, and State and local fiscal stabilization, for fiscal year ending September 30, 2009, and for other purposes, had come to no resolution thereon.

GENERAL LEAVE

Mr. OBEY. Madam Speaker, I ask unanimous consent that all Members

may have 5 legislative days in which to revise and extend their remarks and include extraneous material on H.R. 1.

And while I'm at it, I want to express my understanding that apparently an ice storm is on the way, and I appreciate the cooperation we've had from both sides of the aisle in ending this debate a mite early so that people can get to their homes before the ice storm hits.

The SPEAKER pro tempore. Is there objection to the request of the gentleman from Wisconsin?

There was no objection.

ANNOUNCEMENT BY THE SPEAKER PRO TEMPORE

The SPEAKER pro tempore. Pursuant to clause 8 of rule XX, the Chair will postpone further proceedings today on motions to suspend the rules on which a recorded vote or the yeas and nays are ordered, or on which the vote is objected to under clause 6 of rule XX.

Record votes on postponed questions will be taken tomorrow.

DTV DELAY ACT

Mr. BOUCHER. Madam Speaker, I move to suspend the rules and pass the Senate bill (S. 328) to postpone the DTV transition date, as amended.

The Clerk read the title of the Senate bill.

The text of the amendment is as follows:

Amendment:

Strike out all after the enacting clause and insert:

SECTION 1. SHORT TITLE.

This Act may be cited as the ''DTV Delay Act''.

SEC. 2. POSTPONEMENT OF DTV TRANSITION DATE.

(a) IN GENERAL.—Section 3002(b) of the Digital Television Transition and Public Safety Act of 2005 (47 U.S.C. 309 note) is amended—

(1) by striking ''February 18, 2009;'' in paragraph (1) and inserting ''June 13, 2009;''; and

(2) by striking ''February 18, 2009,'' in paragraph (2) and inserting ''that date''.

(b) CONFORMING AMENDMENTS.—

(1) Section 3008(a)(1) of that Act (47 U.S.C. 309 note) is amended by striking ''February 17, 2009.'' and inserting ''June 12, 2009.''.

(2) Section 309(j)(14)(A) of the Communications Act of 1934 (47 U.S.C. 309(j)(14)(A)) is amended by striking ''February 17, 2009.'' and inserting ''June 12, 2009.''.

(3) Section 337(e)(1) of the Communications Act of 1934 (47 U.S.C. 337(e)(1)) is amended by striking ''February 17, 2009.'' and inserting ''June 12, 2009.''.

(c) LICENSE TERMS.—

(1) EXTENSION.—The Federal Communications Commission shall extend the terms of the licenses for the recovered spectrum, including the license period and construction requirements associated with those licenses, for a 116-day period.

(2) DEFINITION.—In this subsection, the term ''recovered spectrum'' means—

(A) the recovered analog spectrum, as such term is defined in section 309(j)(15)(C)(vi) of the Communications Act of 1934; and

(B) the spectrum excluded from the definition of recovered analog spectrum by subclauses (I) and (II) of such section.

SEC. 3. MODIFICATION OF DIGITAL-TO-ANALOG CONVERTER BOX PROGRAM.

(a) EXTENSION OF COUPON PROGRAM.—Section 3005(c)(1)(A) of the Digital Television Transition and Public Safety Act of 2005 (47 U.S.C. 309 note) is amended by striking ''March 31, 2009,'' and inserting ''July 31, 2009,''.

(b) TREATMENT OF EXPIRED COUPONS.—Section 3005(c)(1) of the Digital Television Transition and Public Safety Act of 2005 (47 U.S.C. 309 note) is amended by adding at the end the following:

''(D) EXPIRED COUPONS.—The Assistant Secretary may issue to a household, upon request by the household, one replacement coupon for each coupon that was issued to such household and that expired without being redeemed.''.

(c) CONFORMING AMENDMENT.—Section 3005(c)(1)(A) of the Digital Television Transition and Public Safety Act of 2005 (47 U.S.C. 309 note) is amended by striking ''receives, via the United States Postal Service,'' and inserting ''redeems''.

(d) CONDITION OF MODIFICATIONS.—The amendments made by this section shall not take effect until the enactment of additional budget authority after the date of enactment of this Act to carry out the analog-to-digital converter box program under section 3005 of the Digital Television Transition and Public Safety Act of 2005.

SEC. 4. IMPLEMENTATION.

(a) PERMISSIVE EARLY TERMINATION UNDER EXISTING REQUIREMENTS.—Nothing in this Act is intended to prevent a licensee of a television broadcast station from terminating the broadcasting of such station's analog television signal (and continuing to broadcast exclusively in the digital television service) prior to the date established by law under section 3002(b) of the Digital Television Transition and Public Safety Act of 2005 for termination of all licenses for full-power television stations in the analog television service (as amended by section 2 of this Act) so long as such prior termination is conducted in accordance with the Federal Communications Commission's requirements in effect on the date of enactment of this Act, including the flexible procedures established in the Matter of Third Periodic Review of the Commission's Rules and Policies Affecting the Conversion to Digital Television (FCC 07–228, MB Docket No. 07–91, released December 31, 2007).

(b) PUBLIC SAFETY RADIO SERVICES.—Nothing in this Act, or the amendments made by this Act, shall prevent a public safety service licensee from commencing operations consistent with the terms of its license on spectrum recovered as a result of the voluntary cessation of broadcasting in the analog or digital television service pursuant to subsection (a). Any such public safety use shall be subject to the relevant Federal Communications Commission rules and regulations in effect on the date of enactment of this Act, including section 90.545 of the Commission's rules (47 C.F.R. § 90.545).

(c) EXPEDITED RULEMAKING.—Notwithstanding any other provision of law, the Federal Communications Commission and the National Telecommunications and Information Administration shall, not later than 30 days after the date of enactment of this Act, each adopt or revise its rules, regulations, or orders or take such other actions as may be necessary or appropriate to implement the provisions, and carry out the purposes, of this Act and the amendments made by this Act.

SEC. 5. EXTENSION OF COMMISSION AUCTION AUTHORITY.

Section 309(j)(11) of the Communications Act of 1934 (47 U.S.C. 309(j)(11)) is amended by striking ''2011.'' and inserting ''2012.''.

The SPEAKER pro tempore. Pursuant to the rule, the gentleman from Virginia (Mr. BOUCHER) and the gentleman from Texas (Mr. BARTON) each will control 20 minutes.

The Chair recognizes the gentleman from Virginia.

GENERAL LEAVE

Mr. BOUCHER. Madam Speaker, I ask unanimous consent that all Members have 5 legislative days in which to revise and extend their remarks on the legislation now pending.

The SPEAKER pro tempore. Is there objection to the request of the gentleman from Virginia?

There was no objection.

Mr. BOUCHER. Madam Speaker, I yield myself such time as I may consume.

Madam Speaker, today we take a highly regrettable, but necessary, step and delay the date for the digital television transition from the currently scheduled February 17 until June 12. With this delay, and the additional funding for the program which the stimulus measure will provide, we can assure a smooth transition and avoid the disruption and the loss of television service by millions of American homes that otherwise would occur.

Yesterday, the Nielsen service that surveys and reports on television viewing in America reported that more than 6 million American households that have over-the-air dependent analog television sets are completely unprepared for the transition. Those homes will lose service if analog broadcast ends on February 17. These 6 million homes do not have cable or satellite subscriptions, they depend on the use of rabbit ears or outdoor antennas in order to receive television service delivered over the air.

More than 3 million applications for converter box coupons are currently pending at the NTIA, and the program is currently out of funds. These 3 million pending coupons, therefore, cannot be honored.

It's truly unfortunate that the situation that we now confront was completely avoidable, but previous action to avoid it simply was not taken. Many of us warned years ago, when the legislation setting the February 17 DTV transition date passed, that the $1.34 billion set aside for the coupon program for converter boxes was not sufficient. We pointed out that there are 70 million analog television sets in service in the U.S. that are over-the-air dependent. These television sets receive their television signals through the use of rabbit ears or outdoor antennas. The $1.34 billion finances converter boxes for less than one half that number. It simply was not realistic to assume that more than one-half of these 70 million sets would simply be discarded.

The decision was consciously made at the outset that only $1.34 billion in revenues from the 700 megahertz auction—which itself derived more than $20 billion in revenues—would be expended in order to ease this transition and assure

that people do have over-the-air dependent analog sets could get some assistance in purchasing converter boxes. At the time, we were requesting a higher number. We suggested that approximately $2.3 billion was what was needed. And we now know that that number is closer to the mark of what the actual need is.

Beyond the problem of converter boxes and inadequate funding to finance the coupons for them, the call centers that the Federal Communications Commission is charged with operating under the statute in order to answer inquiries from people who have problems with the transition—connecting their converter boxes, or doing other things like adjusting their antenna in order to receive a digital signal—are today understaffed. These call centers do not have enough personnel to answer the many calls that are coming into the centers at the present time. And that call volume will only increase as the transition date approaches and occurs. They are understaffed today. They will be more understaffed unless additional resources are provided and time is provided for appropriate staffing.

And so today we have no alternative but to delay the transition date and provide in the stimulus measure the funding that should have been allocated for this program years ago. I regret the disadvantage that this delay will cause for the first responders and the public service agencies across the country that are awaiting access to portions of the 700 megahertz spectrum now occupied by analog broadcasting which will be vacated when analog broadcasting ends. These first responders have been counting on receiving that spectrum in order to have fully interoperable national communications first responder agency to first responder agency, and that is a clear need. Their portion of the spectrum now will not become available until June 12 under the terms of this bill.

But I would suggest, Mr. Speaker, that a far greater public service concern is allowing this transition to go forward at a time when 6 million households will be completely unprepared for it. People rely upon over-the-air television in order to receive vital safety information, information about natural disasters that can affect that individual in that home; and that information is vital to enable people to prepare. Yes, we are going to delay the arrival of this spectrum by 4 months for public safety agencies. But the far greater public safety concern lies in not taking this step.

And I would note that the legislation we are proposing tonight has been endorsed by a variety of public service agencies that are saying today that it is important that this delay occur, and specifically, that is the International Association of Chiefs of Police, the Association of Public Safety Communications Officials—and these are the individuals directly responsible within these first responder agencies for their communications equipment—and also the International Association of Fire Chiefs.

I also, Mr. Speaker, regret the disadvantage of this delay for the commercial wireless service providers who bought their portion of the analog spectrum for approximately $20 billion. But I would note, Mr. Speaker, that AT&T and Verizon, the companies that purchased most of the spectrum and contributed most of that $20 billion, have endorsed the legislation that is pending tonight and have said that this delay is appropriate.

I also regret the added cost that will be imposed on the TV broadcasters who had planned to turn off their analog transmitters on February 17 and now will incur higher than expected electricity and transmitter maintenance costs until June of this year, but at this juncture we simply have no choice.

I rise in support of the bill before the House tonight and ask Members to give their approval. The measure before us was approved last night in the Senate, and that vote was unanimous. It actually passed by unanimous consent, meaning that every Member of the Senate had an opportunity to object, and not one Senator raised an objection to this measure.

In addition to changing the transition date to June 12, the bill directs that coupons for converter boxes be sent by first class mail rather than the third class mail currently used by NTIA for delivery. The bill makes eligible for new coupons households whose previously issued coupons have expired. That's an important new provision. Many homes requested coupons some time ago and did not redeem them within their stated life.

The bill allows television stations to turn off analog broadcasts before June 12 in markets deemed by the FCC to be transition ready. And we fully anticipate that the FCC will be very flexible in applying this provision and will actually allow the transition to occur in markets prior to the 30-day period that current FCC regulations suggest the applications must pend before they're acted upon. We think a shorter time period for this would be appropriate.

□ 2030

The bill also requires NTIA to provide a monthly report to the Congress from this time forward on the progress with the coupon program.

One final word, Mr. Speaker, before I reserve the balance of my time. Another delay in the digital transition beyond the one contained in this bill tonight will simply not occur. I will strongly oppose any effort to delay the transition beyond June 12, and I strongly discourage anyone from requesting that another delay be provided. This delay is a one-time occurrence taking place for predictable but extraordinary reasons, and no additional delay will be considered in our committee.

Mr. Speaker, I reserve the balance of my time.

Mr. BARTON of Texas. Mr. Speaker, I yield myself 4 minutes.

Mr. Speaker, before I begin my remarks on the issue, I want to extend my personal heartfelt condolences to my good friend Mr. BOUCHER, the passing of his mother.

We feel strongly for you in your loss, and our prayers are with you as you undergo that transition.

Mr. Speaker, I rise in strong opposition to Senate 328. It's a solution looking for a problem.

We have had on the books since 1996 a requirement that at some point in time, the United States telecommunication network in terms of television broadcast transits from analog to digital. Under the old law, that transition was supposed to occur when 85 percent of the households in America had the ability to receive a digital signal.

Three years ago in the Budget Reconciliation Act, we changed that to give a hard date of February 17, 2009. If we had not had changed the law, we would have already undergone the transition because 95 percent of America's households now can receive a digital television signal. But the legislation that we passed three years ago put a hard date to create certainty of February 17, 2009.

Now, we know that there are some problems in the transition. Until several weeks ago, we were working collectively, collaboratively with our friends in the majority to move a bill that would tweak the accounting or provide an additional $250 million not in appropriations but in authorization for the coupon program that Mr. BOUCHER has spoken about. Then the Obama transition team, in their infinite wisdom, decided that they wanted a delay, and as far as I can tell, and I could be corrected on this, they didn't consult with any of our legislative experts on either side of the aisle in either body, the House or the Senate. They just sent up a letter or a message to the majority side that they wanted this delay, and those discussions that we had on a bipartisan basis broke down.

We could do nothing worse than to delay this date. Now, I will admit that I am pleased to note that we now know that the perfect date is June 12. I wish I had known that 3 years ago when I was chairman of the committee working on this. If I had known that June 12 was the perfect date, we might have agreed with it. But we didn't know that. So we chose February 17, which was after the Super Bowl but before the Masters and before March Madness in NCAA. That's kind of where we picked this February 17 date.

I respect totally my friend from Virginia and his facts and figures. He's one of the most well-informed Members of this body. But on the number of households that are not yet ready, the number of over-the-air households who don't have satellite and don't have

cable is less than 1 million. We think it's about 800,000. And all the other households are ready to go.

And if you're a true conservative, you could argue that there shouldn't be any coupon redemption program, that people should pay out of their pockets.

Now, I have a confession to make, Mr. Speaker. I'm one of those consumers who's not yet ready. It's not because I don't know the transition's not upon us. It's not because I don't want to be ready. It's because I just haven't got around to it. And I, quite frankly, have the means that if I need to, I can pay $40 out of my own pocket to buy a converter box.

The SPEAKER pro tempore (Mr. PERRIELLO). The time of the gentleman has expired.

Mr. BARTON of Texas. Mr. Speaker, I yield myself 1 additional minute.

But when we were negotiating this with our friends that were then in the minority, now in the majority 3 years ago, they felt like we should defray the cost of these converter boxes. They also felt like we shouldn't means test it so that a billionaire, if they wanted to, could get a coupon. So we've actually sent out 13½ million coupons for 14 million over-the-air households that don't have satellite or cable. My guess is that most of the households that don't have these coupons are households like me, that for whatever reason they have chosen, they don't want to burden the government, they just don't feel like they want the hassle of asking for the coupon, whatever. I guarantee you no matter when you set the date, February 17, June 12, July the 4th, Valentine's Day, there are going to be some people that aren't ready.

We need to keep this hard date. We need to defeat this bill under suspension. We need to let the February 17 date go forward, Mr. Speaker.

Mr. BOUCHER. Mr. Speaker, I yield myself 1 minute.

Mr. Speaker, I want to thank my good friend from Texas, the ranking member of our Energy and Commerce Committee (Mr. BARTON) for his kind remarks acknowledging the loss that my family has recently suffered. I've been away for 3 weeks. This is actually my first day back, and his kind remarks both here and in the markup session before our Energy and Commerce Committee are deeply appreciated.

I would say, in response to the gentleman's suggestion, that the real number of households that would lose television service completely if this transition occurs on February 17 is 6 million. It is not the lower number that the gentleman suggested of somewhere between, I think he said, 750,000 and 1 million. And that 6 million number is not mine. That number comes from the Nielsen service. And the Nielsen company is perhaps, well, I don't want to say the most widely respected. I don't know that for a fact. But it is a widely respected national reporting service.

The SPEAKER pro tempore. The time of the gentleman has expired.

Mr. BOUCHER. Mr. Speaker, I yield myself 1 additional minute.

It is a widely respected national reporting service that surveys television viewing habits in America. And it is based on the surveys done by the Nielsen service that, for example, television commercial rates can be set. There's that level of confidence in the reporting that Nielsen does. And Nielsen has just reported that the number of homes that are unprepared constitute fully 5.7 percent of all U.S. households; yet the actual number is 6.5 million homes, and these are homes that do not have cable or satellite connections. These homes are completely dependent on rabbit ears or outdoor antennas and receive over the air only television. These are the number of families that would lose reception if the transition takes place as scheduled in 3 weeks' time.

I don't want to delay this transition any more than the gentleman from Texas, and the last thing I wanted to be doing this week was to be here on the floor advocating a delay, but we simply have no choice. We can't permit the level of dislocation that otherwise would occur to take place.

So I do support the legislation. I think it is necessary. I think these are the best numbers that we're going to have available to us in determining how many households are truly unprepared.

Mr. Speaker, I reserve the balance of my time.

Mr. BARTON of Texas. Mr. Speaker, I would like to yield 3 minutes to the ranking member of the Telecommunications Subcommittee of the Energy and Commerce Committee, the gentleman from Florida (Mr. STEARNS).

Mr. STEARNS. I thank my distinguished chairman, and I also give Mr. BOUCHER my condolences and sympathy on the death of his mother.

I rise in strong opposition to this bill. And I want to tell my colleagues that I had the opportunity to ask President Barack Obama a question 3 hours ago on this very debate. And I asked him, I said, Mr. President, in light of the fact that you have a stimulus package that you're pushing and you want to create more jobs, then certainly broadband and digital television and third and fourth generation wireless will do just that. And he agreed. And I said, Then why would you want to delay the transition when we have spent all this money, billions of dollars, to publicize the date? We're going to waste all this time and money, and it's going to create a hardship for the broadcasters and so many other people. We should go ahead with this transition.

He said, Well, well.

I said, Now, if it's a question of money, Secretary Gutierrez sent a letter last year indicating $250 million would take care of anything; so it's not a question of money.

So the President said, Well, I agree with you, it's not a question of money, but it appears to be some kind of administrative or accounting problem that we need to fix.

Well, I said to the President, I said, Mr. President, we had a demonstration project in Wilmington, North Carolina, in which we had a transition, and it turns out almost 99 percent of the people were satisfied. So the demonstration project in Wilmington, North Carolina, showed that we could transition back in September in Wilmington. Surely, we can transition February 17 in the United States.

I liken this to a football stadium. Just bear we with me for this metaphor, this example. Let's say you have a large stadium with 90,000 people in it, and it actually takes 92,000 people. Well, it turns out at the front door, the door is locked. By chance a nail is caught in the door, and there are 2,000 people, just 2,000 people out there that can't get into this championship game. And the coin is tossed, they're ready to go, the lights are there, the televisions are going, everybody's roaring, they're waiting for the kickoff; and suddenly they say we've got to stop the game because these very few people, maybe 1 percent, maybe 1½ percent, can't get in the stadium; so we're going to stop the whole game because of those people. And that's what we have here. That is the analogy. We're delaying legislation on a very, very small amount. And, frankly, the demonstration in Wilmington, North Carolina, showed that we are ready to go.

Mr. Obama has made it a priority to make the government work for the people. So now in his first decision in his administration and this Congress, we're saying delay, delay, delay. We're going to delay and put a placeholder on this, and then the consumer is going to have to hold off. And by delaying 115 days, we are sending, I think, the wrong message to the people who are trying to put this in place.

So if you look at the players on the field, they're ready to go. All the stakeholders are ready to go. I urge you to defeat this.

Mr. BOUCHER. Mr. Speaker, I reserve the balance of my time.

Mr. BARTON of Texas. Mr. Speaker, I yield 2 minutes to a distinguished member of the full committee and the subcommittee, the gentleman from Illinois (Mr. SHIMKUS).

(Mr. SHIMKUS asked and was given permission to revise and extend his remarks.)

□ 2045

Mr. SHIMKUS. Mr. Speaker, I too want to congratulate Chairman Boucher on his ascension to the Telecommunications Subcommittee. We have had a great working relationship, I look forward to doing it again.

But this is bad policy, and I am sad that you are the one who has to come and try to pawn it off on the American people.

Chairman DINGELL always used to talk about the takings clause, passing litigation and then the aspect of litigation. We have auctioned spectrum off. We have got small broadcasters who have people lined up to climb the towers, to do the transition, and we are saying, stop.

I know what I have done in my district. I have been working for 8 months with public service announcements, going to senior centers, newsletters, I have done about everything a Member can do to educate my individuals.

What I did today was I asked when was income tax day enacted into law, 1955. Everyone knows April 15 is the day you pay your taxes. Guess how many people we had not pay their taxes on April 15 last year, 12 million people, advertised, historic, annual.

The reason why we have this provision is because of the 9/11 Commission, the ability for the spectrum to be released for first-line responders to develop interoperability. Woe be it to us, Mr. BARTON, woe be it to us, Chairman BOUCHER, and we have another national catastrophe in these next months and we have failed to enact interoperability and released the spectrum to first-line responders so they can communicate with each other.

Mr. BOUCHER. Mr. Speaker, I yield to myself 2 minutes.

I appreciate very much the always eloquently expressed thoughts of my friend from Illinois.

Let me say in response that this legislation has been endorsed by some of the same groups that I have concern about and that the gentleman has also expressed concern about. Yes, it is true that the 700 megahertz spectrum, large portions of it, were auctioned for commercial services and purchased. The two largest purchasers of that spectrum were AT&T and Verizon, and we have endorsements from both AT&T and Verizon for the legislation delaying this transition.

It is true that other portions of the spectrum will eventually go to the first-responder community. And I am concerned about that community. We have a clear need to deploy fully interoperable telecommunications on a nationwide basis so that a fire department from one community can talk to a fire department or rescue squad or law enforcement agency from another community when they all converge on an event somewhere. Today we sadly don't have that capability, at least not fully deployed, and making the spectrum available will enable that to happen, and I am concerned about the delay.

But I would note that this delay has been endorsed for necessary and sufficient reason by the International Association of Chiefs of Police, by the Association of Public-Safety Communications Officials, who are responsible for their telecommunications equipment, and by the International Association of Fire Chiefs. And so the very people about whom we are concerned have said this delay is okay.

It is the last thing that I wanted to have to do, but we literally, at this point, have no choice.

The SPEAKER pro tempore. The time of the gentleman has expired.

Mr. BOUCHER. Mr. Speaker, I yield myself an additional 30 seconds.

I would like to include this report from the Nielsen Company indicating that 6.5 million American households will lose television service completely because they don't have cable or satellite service and are simply not ready if the transition occurs on February 17.

[From nielsenmedia.com, Jan. 22, 2009]

5.7% OF U.S. HOUSEHOLDS STILL UNPREPARED FOR THE SWITCH TO DIGITAL TELEVISION

NEW YORK, NY.—More than 6.5 million U.S. households—or 5.7 percent of all homes—are not ready for the upcoming transition to all-digital broadcasting and would be unable to receive any television programming at all if the transition occurred today, The Nielsen Company reported today. This is an improvement of more than 1.3 million homes since Nielsen reported readiness status at the end of December.

TABLE 1.—PERCENTAGE OF HOUSEHOLDS THAT ARE COMPLETELY UNREADY FOR THE DIGITAL TRANSITION

Preparedness as of:	Overall	White	African-American	Hispanic	Asian	Under age 35	Over age 55
Jan. 18, 2009	5.7	4.6	9.9	9.7	6.9	8.8	4.0
Dec. 21, 2008	6.8	5.6	10.8	11.5	8.1	9.9	5.2

Source: The Nielsen Company.

Under government-mandated action, all television stations are required to switch to digital programming by February 17, 2009, which will leave viewers without a television signal unless they purchase digital television sets, connect to cable, satellite, and alternate delivery systems or purchase a converter box.

Nielsen is making these estimates available as a public service to the television industry, government policy-makers and local communities. This information is based on the same national and local television ratings samples that are used to generate national and local television ratings. To conduct the survey, Nielsen representatives observed and tabulated the actual televisions used in its samples. Because Nielsen has developed samples that reflect the total U.S. population including African American and Hispanic populations, these household characteristics in the samples can be projected to the whole country.

''Nielsen has been preparing for the transition to digital television for more than two years,'' said Nielsen Vice Chair Susan Whiting. ''Because we recognize that accurate and reliable information on consumer behavior is essential to this transition, we've been sharing our data with clients, government leaders and the public so they could track progress to digital readiness.''

''There are still millions of people who will be adversely affected because they are not ready for the digital transition. So it's critical that we provide them with the information and resources they need to stay connected with the world,'' said Ernest W. Bromley, Nielsen Hispanic/Latino Advisory Council (HLAC).

''Nielsen has played a key role in reaching out to our underserved communities and helping them understand what needs to be done,'' said Nita Song, Nielsen Asian Pacific American Advisory Council (APAAC).

''It is imperative that we operate at an accelerated pace to educate those who are at the greatest risk of losing their television service—low-income households, large numbers of senior, minority and disabled viewers. These viewers rely on traditional television the most and can least afford to lose their television lifelines. We have a responsibility to make sure that these groups whether in our families, churches or communities are equipped and ready for this transition,'' said Cynthia Perkins-Roberts, Nielsen African American Advisory Council (AAAC).

LOCAL MARKET RANKINGS

Among the 56 local markets that Nielsen measures with electronic meters, the one that is least ready is Albuquerque-Santa Fe, with 12.4% of the households completely unready. The most prepared market is Hartford & New Haven, with only 1.8% of homes unready.

TABLE 2.—LEAST PREPARED LOCAL METERED MARKETS BASED ON PERCENTAGE OF HOUSEHOLDS CURRENTLY UNPREPARED FOR DIGITAL CONVERSION

	Percent		
	Completely ready	Partially ready	Completely unready
National people meter sample	85.08	9.24	5.68

TABLE 2.—LEAST PREPARED LOCAL METERED MARKETS BASED ON PERCENTAGE OF HOUSEHOLDS CURRENTLY UNPREPARED FOR DIGITAL CONVERSION—Continued

	Percent		
	Completely ready	Partially ready	Completely unready
Local metered samples	82.31	12.36	5.33
Albuquerque-Santa Fe	81.29	6.47	12.24
Dallas-Ft. Worth	77.39	12.40	10.21
Houston	72.63	17.42	9.95
Tulsa	76.50	13.97	9.53
Portland, OR	80.85	10.08	9.08
Salt Lake City	81.58	9.85	8.58
Memphis	73.31	18.16	8.53
Austin	80.73	10.82	8.45
Los Angeles	82.54	9.80	7.66
Sacramento-Stkton-Modesto	77.04	15.63	7.33
Phoenix (Prescott)	77.82	14.87	7.31
Jacksonville	80.89	12.09	7.02
Dayton	75.14	17.98	6.88
Greenvll-Spart-Ashevll-And	84.94	8.37	6.69
Indianapolis	72.71	20.76	6.53
Milwaukee	73.94	19.63	6.43
San Antonio	77.19	16.61	6.20
Richmond-Petersburg	77.04	16.83	6.13
San Diego	84.42	9.64	5.94
Cleveland-Akron (Canton)	81.86	12.22	5.91
Minneapolis-St. Paul	78.21	15.94	5.85
Kansas City	75.88	18.37	5.75
Seattle-Tacoma	85.18	9.16	5.67
Miami-Ft. Lauderdale	83.11	11.41	5.47
St. Louis	79.72	15.02	5.26
Cincinnati	72.62	22.17	5.21
San Francisco-Oak-San Jose	89.45	5.35	5.20
Chicago	82.00	12.82	5.18
Las Vegas	81.79	13.04	5.17
Birmingham (Ann and Tusc)	82.91	12.23	4.86
Charlotte	85.50	9.72	4.79
Denver	81.24	14.01	4.75
Louisville	80.66	14.75	4.59
Nashville	81.58	14.01	4.41
Detroit	83.18	12.42	4.40
Raleigh-Durham (Fayetvlle)	80.47	15.15	4.38
New Orleans	84.14	11.51	4.35
Columbus, OH	79.64	16.08	4.29
Buffalo	86.04	9.69	4.27
Tampa-St. Pete (Sarasota)	89.47	6.39	4.14

TABLE 2.—LEAST PREPARED LOCAL METERED MARKETS BASED ON PERCENTAGE OF HOUSEHOLDS CURRENTLY UNPREPARED FOR DIGITAL CONVERSION—Continued

	Percent		
	Completely ready	Partially ready	Completely unready
Washington, DC (Hagrstwn)	81.76	14.16	4.08
Orlando-Daytona Bch-Melbrn	86.30	9.79	3.91
Norfolk-Portsmth-Newpt Nws	79.97	16.25	3.78
Baltimore	79.91	16.34	3.75
Greensboro-H.Point-W.Salem	85.20	11.38	3.42
Knoxville	84.78	12.02	3.20
Providence-New Bedford	83.25	13.56	3.20
Oklahoma City	85.62	11.31	3.07
Pittsburgh	88.89	8.07	3.05
Ft. Myers-Naples	89.55	7.48	2.98
West Palm Beach-Ft. Pierce	90.86	6.47	2.67
New York	92.51	4.93	2.57
Boston (Manchester)	84.05	13.70	2.25
Philadelphia	87.37	10.53	2.10
Atlanta	89.66	8.31	2.02
Hartford & New Haven	87.91	10.34	1.76

Source: The Nielsen Company.

Mr. SHIMKUS. Would the gentleman yield?

Mr. BOUCHER. I will be happy to yield. But to keep this absolutely proper, let me yield to myself an additional minute, and I am happy to yield to the gentleman from Illinois.

Mr. SHIMKUS. Thank you for yielding the time. I appreciate that.

You know, I chair the E–911 Caucus, and I have worked across in a bipartisan basis with now Secretary of State Hillary Clinton, who was on the Senate side.

I would ask if the National Emergency Number Association, NENA, which is the premier association that supports first-time responders, if they provided a recommendation on this legislation—I see staff saying yes.

Mr. BOUCHER. Will the gentleman permit me just one moment, please. The answer is the association the gentleman identified has sent a communication to us endorsing this delay.

Mr. SHIMKUS. Would the gentleman include that for the record?

Mr. BOUCHER. I will be happy to include that for the record. We will collect whatever is appropriate and be happy to do so.

Mr. Speaker, at this time I reserve the balance of my time.

Mr. BARTON of Texas. Mr. Speaker, I would like to include for the RECORD a letter from the Fraternal Order of Police opposing this legislation.

NATIONAL
FRATERNAL ORDER OF POLICE,
Washington, DC, January 23, 2009

Hon. NANCY P. PELOSI,
Speaker of the House, House of Representatives, Washington, DC.

Hon. JOHN A. BOEHNER,
Minority Leader, House of Representatives, Washington, DC.

DEAR SPEAKER PELOSI AND REPRESENTATIVE BOEHNER, I am writing on behalf of the members of the Fraternal Order of Police to express our concerns regarding S. 328, the ''DTV Delay Act,'' as it relates to public safety access to spectrum.

Many of the arguments being made in favor of delaying this transition were made during the consideration of the Digital Transition and Public Safety Act in 2005. This is not a new issue, and was first recognized in a public safety report issued in September 1996. In 1997, Congress granted public safety access to this portion of spectrum under Title III, Section 3004 of the Balanced Budget Act of 1997, which directed the Federal Communications Commission (FCC) to authorize broadcasters currently occupying the spectrum to remain there until 2006. Public safety access to this area of spectrum was repeatedly pushed back until the enactment of the Digital Transition and Public Safety Act in 2005, which set a hard deadline of 17 February for analog broadcasters to allow public safety access to 24 MHZ of spectrum on the 700MHz band. We are concerned that the staggered transition which would result if S. 328 is signed into law may jeopardize the channels that Congress promised to law enforcement and other public safety officers more than a decade ago.

For public safety to use the spectrum they have been promised, broadcast stations must stop analog broadcasts on those channels. Broadcast stations on the adjacent channels must also stop analog broadcasts to avoid interfering with the public safety communications we are trying to enable. For all those broadcast stations to have somewhere to go, additional broadcast stations must stop their analog transmission. It is this chain of events that makes the hard deadline of 17 February 2009 the most realistic and responsible option for clearing the spectrum for public safety's use.

While S. 328 would still allow broadcasters to voluntarily transition by 17 February, subject to current FCC regulations, and allow public safety to occupy this vacated spectrum, unless all the surrounding broadcast stations also voluntarily transition, it is unlikely anyone can move. Moreover, under current FCC regulations, broadcasters generally would not be permitted to transition even voluntarily until three months before the delayed transition date, and even then the FCC has the discretion to refuse them authorization.

The American public has asked broadcasters to take difficult, time consuming, and costly steps to enable better public safety communications. These broadcasters have admirably risen to the call and say they are ready for 17 February. If this delay goes into effect, it opens the door for future delays. More than a decade of work has gone by since Congress authorized public safety communications to expand on the spectrum, and we are very close to achieving our goal. I urge you not to bring all of this progress to a halt less than thirty days from the finish line.

Thank you in advance for your consideration of the views of the more than 327,000 members of the Fraternal Order of Police. Our communications are our lifeline and we need to know that they will function properly at all times. If I can provide any additional information on this matter, please do not hesitate to contact me or Executive Director Jim Pasco in my Washington office.

Sincerely,

CHUCK CANTERBURY,
National President.

I want to yield 2 minutes to the distinguished former chairman of the Agriculture Committee and the current ranking member, Mr. GOODLATTE.

Mr. GOODLATTE. Thank you, Mr. Chairman.

Mr. Speaker, I want to welcome my good friend and neighbor back to the House and offer my condolences as well regarding the passing of his mother, who I never had the opportunity to meet, but who I heard much about from my good friend, who is rightfully proud of her record as an attorney and a public office holder in his hometown of Abingdon, Virginia.

I rise, however, in opposition to the legislation that is offered today. This is of great concern to me and to the television broadcasters and emergency services personnel and others in my district. Since the decision to switch from analog to digital television, there has been a massive public awareness campaign that has been very successful in identifying February 17 as the day of transition.

This legislation, S. 328, will delay the switch, would undermine this transition and require another massive public outreach campaign to make the public aware. The American public has had almost 3 years to prepare for this transition for which entire industries have had to adapt, and the American public is ready. Forcing them to do so for what will essentially prove to be an arbitrary deadline will set a dangerous precedent that could easily lead to more delays and would likely result in an onslaught of lawsuits.

Delaying access to the 700 megahertz spectrum will unfairly prevent those entities that have been awarded access to this bandwidth from having immediate access, again, something that has been planned for several years. This is particularly troubling when considering our first responders, the very individuals that we sought to aid with this initiative in response to the communications blunder that occurred during the terrorist attacks of September 11, 2001.

Some claim that this delay will not prevent first responders from accessing this bandwidth, but that is simply not true. Television stations will have to stop broadcasting on channels that are sought for communications.

The SPEAKER pro tempore. The time of the gentleman has expired.

Mr. BARTON of Texas. I yield the gentleman an additional 15 seconds.

Mr. GOODLATTE. I would simply ask that the remainder of my statement be made a part of the RECORD and urge my colleagues to oppose this legislation.

Since the decision to switch from analog to digital television, there has been a massive public awareness campaign that has been very successful in identifying February 17 as the day of transition. This legislation, S. 328 will delay the switch, would undermine this recognition and require another massive outreach campaign to make the public aware.

The American public has had almost 3 years to prepare for this transition, for which entire industries have had to adapt. Forcing them to do so for what will essentially prove to be an arbitrary deadline will set a dangerous precedent that could easily lead to more delays, and will likely result in an onslaught of lawsuits.

Delaying access to the 700 MHz spectrum will unfairly prevent those entities that have been awarded access to this bandwidth from having immediate access—again something that has been planned for several years. This is particularly troubling when considering our first responders, the very individuals that we sought to aid with this initiative in response to the communications blunder that occurred during the terrorist attacks of September 11,

2001. Some claim that this delay will not prevent first responders from accessing this bandwidth, but that is simply not true. Television stations will have to stop broadcasting on channels that are sought for communications and neighboring channels will also have to be cleared to avoid interference.

Delaying the transition will also hinder the deployment of broadband, something that has also been planned for years, and will unfairly limit the companies and consumers that plan on utilizing this type of broadband access.

Furthermore, this proposed delay is being used to justify $650 million in new spending in the proposed new economic stimulus bill. In a time of economic distress and budgetary disarray, increasing the debt to American taxpayers by hundreds of millions of dollars hardly seems prudent. In fact, this legislation will work against any effort to stimulate the economy because the economic activity and growth that comes with deploying new broadband technology and new emergency communication will be delayed.

There are some reports that nearly 93 percent of households affected by this switch are already prepared, deeming this legislation excessive and overly burdensome.

I urge my colleagues to oppose this legislation.

Mr. BARTON of Texas. I would like to yield 2 minutes to the gentleman from Oregon (Mr. WALDEN).

Mr. WALDEN. I thank my ranking subcommittee chairman for the time.

Let me get right at it. The 1996 law that this law replaced said that when the marketplace had 85 percent of households with one television that could receive digital, this transition could occur.

The law that we passed a couple of years ago said, no, we are going to work this a little differently. We will set a hard date, we will make coupons available to do all of this. Currently, 94.3 percent of American households have a television that receives digital or that has the ability to receive digital signal.

So remember the old law that we updated said 85 percent could make this change today, or 94 percent. Only exclusively over-the-air homes without a digital division or converter box are at risk of losing all television service. Now, again, Nielsen, the rating service, says there are 3.4 million exclusively over-the-air homes, and already we have sent 13.5 million coupons to 13.5 million of those homes, leaving 800,000 exclusively over-the-air households that have not yet received the coupons.

Approximately 600,000 of them, however, are on the waiting list. This all gets down to a couple hundred thousand people. This could simple easily be solved by simply changing the accounting rules and allowing NTIA to go ahead and send out those coupons.

Mr. Speaker, I would also like to include for the RECORD letters from television stations in Oregon who point out that this delay will cost them upwards of $1 million in added energy costs at a time when they are having to lay off staff who do news coverage and other things because now they are going to get saddled with this burden, $500,000 to $1 million.

JANUARY 8, 2009.

Hon. GREG WALDEN,
Longworth House Office Building,
Washington, DC.

DEAR GREG, I hope this note finds you well. This letter is in reference to the possible delay of the DTV transition date for broadcasters from the scheduled date of February 17, 2009. Changing the date at this time would unravel a tremendous amount of work done by broadcasters to educate consumers about DTV, and most likely do more harm than good.

Attached find a list of issues from our Director of Engineering, Karl Sargent, related to the possible change of dates.

We hope you have success in keeping the date we have all been working towards, and please do not hesitate to let me know if you have any questions.

Sincerely,

BOB WISE,
Vice President/General Manager,
KOBI–TV/KOTI–TV.

DELAY OF DIGITAL TRANSITION

We feel the delay of the digital transition is not in the best interests of the viewer, broadcaster, or country in general.

Delaying the transition will place doubt and uncertainty in the mind of the public. We have been diligently informing them of the positive benefits of the transition and it will now place doubt in their mind that technologically, it is not ready or up to its promises of improved TV performance.

Stations have spent a lot of money in their digital facilities, allowing the analog facilities to deteriorate. It would be more cost to the broadcasters to now have to invest money into keeping the analog transmitters operating in parallel with the digital transmitters or they have to invest in short-term capital to keep the transmitters running (i.e. KOTI driver tube failure).

Delaying the transition for months will not rectify the public not being ready for the transition. In fact, it may make it worse. The public will feel that they now have time to back off their efforts to prepare. No matter when the transition takes place there are going to be viewers who are not prepared.

We need to make this transition now and get on to other critical items the stations have to do. In our case it is the capital improvement we still need to do to our station infrastructure to convert it to full digital and HD and to complete the Sprint-Nextel project.

We don't see any positives to the transition being delayed. We have been preparing for it for 5 years.

We are very concerned that the incoming administration will change the baseline rules and specifications of the digital transition. That would be a disaster in both money and time for both the viewers and broadcasters.

JANUARY 9, 2009.

To: Congressman Greg Walden, Second District, Oregon.

Fr: Jerry Upham, General Manager, KOHD Bend.

DEAR CONGRESSMAN, I was both shocked and disappointed to hear that Congress is considering delaying the implementation of the digital transition for television stations. With so much publicity and planning for this ''hard date,'' any change would result in huge consumer confusion, and give the indication that there really is no hard deadline. In addition, millions of consumers will feel like they were incorrectly advised—in a tough economic time—to spend money now to be able to receive their television signals.

At Chambers Communications, we've spent millions of dollars for this digital transition, and, in the case of KOHD, launched the station in 2006 with an exclusively digital signal. The decision to launch without a full power analog signal was made due to this upcoming deadline. KOHD has gone without an analog signal, and has sacrificed analog viewers during this time. If the deadline is pushed back, this will only extend the station's analog deficiency. Had we had an indication that this deadline would be extended, the company may have made a different decision with regard to an analog signal.

Please urge Congress not to extend this deadline, as both the private television sector and the public will be severely negatively affected by this decision.

Sincerely,

JERRY UPHAM,
KOHD General Manager.

JANUARY 9, 2009.

CONGRESSMAN WALDEN, thanks for including local broadcasters.

(1.) Tower lease agreements will have to be extended to continue to provide some outlying areas with analog.

(2.) We'll have to continue to operate two transmitters. (a.) Increase cost (b.) More energy consumption.

(3.) February ratings moved to March, making March non-useable.

(4.) People not ready today won't be ready in 3, 6 or 9 months unless forced to change because of the end of analog service.

(5.) All our efforts to inform the public for nothing and more confusion. If we change the date once, what's to say we don't change it again?

(6.) No credibility with the public.

(7.) Angry people who have already purchased new TVs, converter boxes or subscribed to cable or satellite adding extra expense.

I get the political road the new administration is following, but to change would only prolong the pain.

Thank you,

CHRISTOPHER T. GALLU,
General Manager,
NPG of Oregon, Inc.

JANUARY 9, 2009.

Hon. GREG WALDEN,
House of Representatives,
Washington, DC.

DEAR CONGRESSMAN WALDEN: I strongly urge Congress to resist changing the digital transition date of February 17, 2009. Broadcasters around the country have been mandated by the FCC to provide unprecedented promotion and news coverage of this important date. Millions of Americans have responded with obtaining coupons, calling broadcasters for information and preparing for this important milestone in the broadcasting industry. To delay implementation at this late juncture will most certainly confuse the American public even further. In addition, millions of consumers will feel they were misled and incorrectly advised, during these tough economic times, to spend money now to be able to receive their television signals. In addition, this will put an extra burden on broadcasters in the form of additional power usage for transmitters and man power.

Chambers Communications has invested millions of dollars for the digital transition and countless man-hours in its implementation and preparation for the Feb. 17 cut-off. I urge you to rebuff attempts to extend the deadline at this late date.

Sincerely,

RENARD N. MAIURI,
General Manager,
KDRV/KDKF TV.

JANUARY 8, 2009.

Congressman GREG WALDEN,
Washington, DC.

DEAR CONGRESSMAN WALDEN, I am writing to implore you to retain the digital transition date of February 17, 2009, for which we have been planning and preparing.

At the beginning of the transition, I was not in favor of a hard shut-off deadline, preferring that the market decide when analog was no longer needed. However, now that we have committed hundreds of hours of time to prepare for this change, invested hundreds of thousands of dollars to enable us to change, and literally broadcast thousands of announcements, all focused on this date, I believe that changing would be a mistake.

The key to successful implementation of any change, including a historic change such as this one, is communication. The efforts of local broadcasters to inform the viewers have reached beyond news stories, announcements, and crawls over programming, to in-person demonstrations, community talks, and talking to callers to walk through the unique needs for their location in their individual situation.

Broadcast television is my livelihood, so I don't take this position lightly. If this transition fails, and viewers lose access to free-over-the-air-TV, it will damage our ability to broadcast to the communities we are licensed to serve. Our best chance to succeed is to stick with this heavily promoted date, and trust that we will do whatever it takes to insure that all of our viewers are not left behind in the digital age.

Sincerely,

KINGSLEY KELLEY,
General Manager,
KTLV–TV.

FEBRUARY 8, 2009.

Hon. GREG WALDEN,
House of Representatives,
Washington, DC.

DEAR CONGRESSMAN WALDEN: I am deeply concerned and shocked that some in the Congress are considering delaying the nationwide DTV transition that is scheduled for February 17, 2009. I understand the concern given that the distribution of coupons has been suspended and those still wishing to receive a coupon have been put on a waiting list pending the authorization of additional funds. I urge you and other members of Congress to push for legislation that would immediately provide the necessary funds to fulfill the additional requested coupons.

This station has been planning for this DTV transition for over a year and along with my fellow broadcasters has been educating the public on this transition. Collectively the Medford market broadcast stations have run thousands of announcements regarding the transition and have also engaged in educating the public through numerous outreach activities. There will always be people that wait to the last moment or have not prepared themselves for the transition even though they know it is coming, and no delay is going to mitigate that problem.

Procedures are in place for helping the public with any problems they may incur during this transition and our engineers are ready to make the transition on February 17, 2009.

Given the amount of time we have spent educating the public that February 17, 2009 is the firm date, I believe that changing that date will cause an enormous amount of confusion and do great harm to an orderly transition.

Even if the date was changed for the transition we will not change our plans to transition on February 17, 2009.

Sincerely,

GARY D. JONES,
General Manager,
KMVU–TV.

Some of these stations, one of them is brand new, KOHD in Bend, went on air as digital only in anticipation of this date. And now this Congress apparently is going to move the date.

And then in the so-called stimulus bill we are going to borrow maybe $600 million, maybe from the Chinese, I don't know, that the next generation will get to pay back whenever that occurs so we can send out more coupons. This is a solution looking for a problem.

Mr. STEARNS. Mr. Speaker, can I ask how much time is left on both sides?

The SPEAKER pro tempore. The gentleman from Florida has 6 minutes and the gentleman from Virginia has 5½ minutes.

Mr. BOUCHER. Well, I would like to yield myself 30 seconds, Mr. Speaker.

I will submit for the RECORD a letter from the National Emergency Number Association, which I believe is the association that the gentleman from Illinois was referring to, and the chief executive officer of this association indicates support for the delay that is proposed in the legislation tonight.

Mr. STEARNS. Mr. Speaker, I am pleased to give time to the gentleman from Nebraska (Mr. TERRY) 2 minutes.

Mr. TERRY. Thank you. The ostensible goal of this legislation is to give consumers more time to prepare for the transition. But, unfortunately, this bill will only confuse customers by changing the date, cost more money and hurt public safety.

It will not give a single television viewer the coupon off the coupon waiting list. It will jeopardize the spectrum that police and firefighters say they need. Since 9/11 we have been hearing this, as our good friend from Virginia (Mr. BOUCHER) has already stated. And I don't know under what circumstances the national police chiefs and fire chiefs have written, but my local people are saying exactly the opposite.

And, also, this will jeopardize the spectrum that the original DTV legislation clears for advance wireless services, perhaps our Nation's quickest and most realistic way to improve broadband deployment, stimulate the economy and create jobs.

Now, if we are going to move this date to tornado season in Nebraska, let me use this Nebraska analogy about waiting so that we are at 100 percent of people already hooked up, which seems to be our new standard here.

Let me give you this story about Tom Osborne, three-time national championship coach of the Huskers. When he decided to run for Congress after being coach for, I think, almost 30 years, and three national championships, he polled and found out that he had name ID in Nebraska of 95 percent, meaning 5 percent of the Nebraskans had never heard of Tom Osborne. Yet, we are holding up this legislation here today because 5 percent of our Nation, although they may have the coupons in hand, have not hooked up yet.

If we are going to wait till 100 percent, we are going to come back and delay this again.

Mr. Speaker, we are ready. Nebraska is ready because of broadcasters and community groups in my district who have been preparing the population with educational efforts about this transition to digital television that have been on going for over a year now. They have worked very hard and I would like to recognize them for their efforts here on the floor.

The Nebraska Digital Television Conversion Coalition is comprised of not-for-profit organizations that have recognized the digital television conversion could be problematic for some in our society, including elderly and low income individuals. Members of this coalition include: Nebraska Educational Television, United Way of the Midlands, Nebraska Broadcasters Association, Little Brothers & Friends of the Elderly, the Nebraska Retail Federation, the Nebraska Office on Aging and my congressional office.

Mr. Speaker, please allow me to briefly describe one example of the problems my constituents will encounter if this bill becomes law. Nebraska Educational Television tells me that they will suffer both financially and technically because they will not be allowed to increase power at the six sites they have already converted to digital. At these six sites they have decommissioned the analog service and are digital only, this was done with permission from the FCC, which results in many of their viewers unable to receive the NETV signal until the power is strengthened.

My Nebraska Broadcasters Association is also opposed and I quote, "We plead with you Congressman Terry to oppose any effort to extend this date. Any change now would create an urgent need for a campaign far greater than the first to reverse the message indelibly affixed in the minds of Americans."

Lastly, Mr. Speaker, the ostensible goal of the legislation is to give consumers more time to prepare for the transition, but unfortunately, this bill will confuse consumers, cost more money, and hurt public safety:

It will not move a single television viewer off the coupon waiting list.

It will jeopardize the spectrum that police and firefighters said they needed 5 years to the day before September 11, 2001. The most important telecommunications-related recommendation of the 9/11 Commission was to make spectrum available for public safety by completing the digital television transition.

And it will jeopardize the spectrum that the original DTV legislation clears for advanced wireless services, perhaps our Nation's quickest and most realistic way to improve broadband deployment, stimulate the economy, and create jobs.

The DTV coupon program is not out of money; only half of the $1.5 billion in the coupon program has been spent on redeemed coupons. Instead of delaying the transition and spending hundreds of millions of dollars more, Congress has the opportunity to simple do what former Commerce Secretary Gutierrez suggested and modify the coupon program to allow all of those who have requested a coupon to get one.

I urge a "no" vote.

□ 2100

Mr. BARTON of Texas. Mr. Speaker, does the gentleman continue to reserve his time?

Mr. BOUCHER. I continue to reserve.

Mr. BARTON of Texas. I yield 2 minutes to one of our new members of the Energy and Commerce Committee, the gentleman from Georgia (Mr. GINGREY).

Mr. GINGREY of Georgia. Mr. Speaker, I rise in strong opposition to Senate bill 328, the DTV Delay Act. Due to the very rushed nature by which the legislation is being considered this evening, I have a number of concerns about both the policy and procedure represented within S. 328.

Basically, we are asked to vote on legislation that will have a significant impact on the telecommunications industry and our first responders without giving it proper consideration.

Mr. Speaker, the Nielsen Company estimated this past November that 93 percent of homes in the United States already had one or more TVs ready for the digital television transition. This same study indicates that 83 percent of households across the country are completely prepared for this transition.

Despite the fact that the vast majority of households across the country have taken the necessary steps to be ready for DTV transition, the DTV Delay Act would sacrifice the preparation of the masses as a means to assist the very few. Delay in this transition will only cost the taxpayers, needlessly, $750 million, at a time when we are facing a $1.2 trillion budget.

Mr. Speaker, the 9/11 Commission stated in its report that this transition should have occurred years ago to free up the lower frequency analog signals for police, firefighters, emergency personnel, and public officials. Because this transition has been years in the making, for the benefit of our brave first responders, I believe that we need to move forward in this transition as scheduled, instead of delaying it until June.

Mr. Speaker, delaying the digital television will only create more of a financial burden for American taxpayers and create further confusion among the public. For these reasons, I urge all my colleagues oppose the DTV Delay Act.

Mr. BARTON of Texas. I yield 1 minute to our very newest member of the Energy and Commerce Committee on the Republican side, the gentleman from Louisiana (Mr. SCALISE).

Mr. SCALISE. I'd like to thank the gentleman from Texas for yielding, and I rise in opposition to this bill to delay the transfer to digital. I think if we look at what this could do for our economy, number one, we are talking about the problems that we are having in our economy right now, and we want to create good jobs. There are billions of dollars of investment that are sitting on the sidelines right now, waiting to move, waiting to create new technologies, and create good new jobs in our economy, that this delay will further hamper.

In addition to that, I think we need to be very concerned about what this means to our first responders. It was just read into the RECORD from the president of the National Fraternal Order of Police, but also what this would mean for our firefighters as they try to implement interoperable capabilities, something that we experienced after Katrina, we saw after September 11, something we need to get to. Something, again, this delay will only hurt their ability to make those changes that they want so desperately to make for the safety of our people all throughout the country.

So there are many strong reasons why we are ready to get this implementation to take place and why we should oppose any delay.

Mr. BARTON of Texas. Mr. Speaker, I yield myself the balance of my time.

(Mr. BARTON of Texas asked and was given permission to revise and extend his remarks.)

Mr. BARTON of Texas. Mr. Speaker, I want the American people to know that the Republicans want to solve this problem. If we defeat this bill tomorrow under suspension, then hopefully we can reach across the aisle and work with our friends in the new Democrat majority to do things that actually solve the problem.

We can actually say that money that is in the Treasury that hasn't been spent on redemptions of coupons can be used to issue new coupons. We could even eliminate the coupon requirement. We could provide a small amount of additional funding.

I have a bill that I introduced this week that does most of those things. But if we need to do something differently, I pledge to the American people and my friends on the majority side that once we defeat this delay bill tomorrow, we still have time to work together on a bipartisan basis to put together a bill that does solve the problem, without delaying the hard date of February 17.

So, with all due respect, I would ask that we defeat S. 328, vote tomorrow not to suspend the rules, and then let's work together the rest of this week and next week to solve the problem. Vote "no" on S. 328.

I yield back the balance of my time.

Mr. BOUCHER. Mr. Speaker, I yield myself the balance of my time.

I want to compliment my friend from Texas, the ranking Republican member of our Commerce Committee, Mr. BARTON; Mr. STEARNS, the ranking member on our Subcommittee on Communications, Technology and the Internet, with whom I very much look forward to working over the course of the coming 2 years, for the very cordial way in which they have handled their opposition to this measure here today. That reflects the best traditions of our committee. We sometimes disagree, but we always do so in a very agreeable manner.

That certainly has been the situation here tonight. We all have the same objective, and that is to make sure that we have a smooth digital television transition and that American households are not dislocated when the analog television broadcast ends and all of the broadcasting from that time forward is in digital.

We have one formula for doing that and my friends on the other side of the aisle have another formula for doing that. I respectfully suggest that our formula is the better way.

I did not want to be here tonight advocating a delay in this transition. The gentleman from Texas is right. That date for the transition has been a feature of our law now for a number of years. A lot of advertising has gone behind publicizing that date. Many people have been relying on that date as the date upon which the 700 megahertz spectrum that analog broadcasting will, when it stops, will make available and be delivered. There have been plans made on this. And so this is not a step we take lightly or frivolously, but when in which we think we have no choice.

There are 6.5 million households in the United States, as revealed by the best numbers we have available coming from a highly reputable and well-regarded television reporting service, that will completely lose television coverage if this transition happens on February 17. These households are unprepared. They do not have a cable or satellite connection. They rely on over-the-air television reception only.

That dislocation simply must be avoided. These homes depend upon television service for vital information. Not just entertainment, but news and information about community emergencies that typically would only reach the home by means of the broadcast media.

We have talked about the public safety community and the fact that we do not want to see a delay in their receipt of the spectrum that they intend to use for fully interoperable communication equipment. But the greater public safety concern is turning off that analog broadcast at a time when 6.5 million homes are not prepared for the transition. Denying vital public safety information to those 6.5 million homes is the greater threat.

And so the delay for that reason is necessary. That has been acknowledged by the leading associations representing the public safety community. The National Association of Chiefs of Police, the Association of Public Safety Communications officials, the International Association of Fire Chiefs, all of whom have endorsed this delay. It has been endorsed by the major recipients on the commercial side of the 700 megahertz spectrum; by AT&T, by Verizon. It has been endorsed by the networks; by ABC, NBC, and CBS.

And so among all of those who will be disadvantaged by this delay, there is a recognition that the delay is unfortunately and regrettably necessary.

Mr. Speaker, I also want to emphasize that this is a one-time delay, and our committee simply will not entertain requests that a delay beyond the June 12 date be adopted. I would strongly oppose any further delay. The Chairman of our Energy and Commerce Committee, the gentleman from California (Mr. WAXMAN), has indicated his strong opposition to any delay beyond June 12, and we would strongly discourage anyone from suggesting that a delay beyond that date take place.

So the step we take tonight is necessary. None of us want to take it. I think it is the only approach we have before us at this moment that truly will assure that when this digital transition occurs, and that it occurs in a way that does not result in disruption for television viewing in America. I urge the passage of the measure.

Mr. ENGEL. Mr. Speaker, I rise today to support S. 328, delaying the digital television transition. It has become clear in recent days and weeks that the country simply is not ready for the transition.

For years, I have been saying that we are not providing enough resources or enough education for the public. That is why for the past two Congresses, I have introduced my Digital Television Consumer Education Act. This legislation would provide far more education about the transition, and would add $200 million to the converter box coupon program to get coupons to the 2 million people on the waiting list.

I do want to ensure that this delay is only a one-time event. If we keep delaying and delaying, we will never see the benefit of the transition. Television viewers will not get to see crystal clear images of their favorite programs, we will not enjoy the technological advances that will be rolled out by wireless companies, and most importantly, our first responders will not get the interoperable communication devices they so desperately need. But with the condition that this will be a one-time delay, I will support S. 328.

Mr. WAXMAN. Mr. Speaker, I rise in support of S. 328, the DTV Delay Act, which passed the Senate yesterday by unanimous consent. This legislation extends the digital television transition date and makes improvements to the converter box coupon program.

In 2005, Congress mandated that as of February 17, 2009, all television stations shut off their analog broadcasts and transmit in digital only. The transition from analog to digital will offer better pictures and sound, more programming choices, and interactive capabilities. It will also serve an important public safety purpose by freeing up spectrum for first responders for nationwide interoperable communications. Finally, it will provide consumers with new and innovative commercial wireless services.

Unfortunately, we are not prepared for this transition. The prior administration assured the Committee on Energy and Commerce repeatedly that the transition effort was on track. But on December 24, 2008, the National Telecommunications and Information Administration, NTIA, notified Congress that the converter box coupon program would run out of funding the first week of January and that it would need an additional $250 to $350 million to meet projected demand.

The President's Transition Team asked Congress to extend the deadline for a brief period. This is not a step that anyone wants to take. But we have no good alternative. Without a short, one-time extension, millions of households will lose all television reception.

The DTV converter box coupon program is supposed to ease the financial burden of the transition. But it has ground to a halt. There are currently over 1.7 million households on the waiting list. In addition, the FCC has not adequately planned for call centers and other assistance for consumers who will face technical problems after the transition has occurred.

The measure before us extends the date of the transition to June 12 and extends the coupon program date until July 31, 2009. It will also allow those who hold expired coupons—or never received their coupons because of problems with third class mail—to reapply.

Moreover, the economic recovery package that the House is considering includes $650 million to fix the coupon program and intensify consumer education and support.

S. 328 also takes steps to lessen the impact on other affected parties, including public safety, broadcasters, and wireless licensees.

I am pleased that this bill now has broad support in the public safety community, including the Association of Public-Safety Communications Officials-International, APCO, the International Association of Chiefs of Police, IACP, the International Association of Fire Chiefs of Police, IAFC, and the National Emergency Number Association, NENA. It has the support of the two biggest winners of spectrum that will be vacated as a result of the DTV transition—AT&T and Verizon. And, it has the support of a number of public interest groups.

S. 328 gives the new administration the resources it has told us it needs to fix the coupon program and better prepare consumers for the transition.

Unfortunately, our time to act on the legislation is short. If we do not pass this measure, it is likely that there will be no extension of the February 17 transition. Time will have run out for the administration to implement the changes necessary to fix the problems.

I urge Members to support this bill.

Mr. GENE GREEN of Texas. Mr. Speaker, I rise today in support of this legislation to address the urgent problems occurring with the digital television transition.

After participating in numerous oversight hearings by the Telecommunications and Internet Subcommittee on the DTV transition in the 110th Congress, and seeing the mismanagement of the transition by the previous administration, we need time to get this right and correct the problems left for the Obama administration.

I am supporting this legislation, not because I think moving the transition date back is a good idea, but because when the National Telecommunications and Information Administration notified the Committee late last year that they would run out of money in the coupon program, postponing the date to get every household the coupons they need became necessary.

Our office sent out the coupon application in our constituent newsletters, handed them out at our townhall meetings, and took them to other events in our district to distribute. For their part, broadcasters, cable, and satellite television spent millions in advertising to educate the public about the upcoming transition.

The primary reason we have to delay this transition is due to the mismanagement of the program by the NTIA—after months of asking questions in hearings and letters to the Administration, members of the Telcom Subcommittee were assured there was plenty of money to finance the program and provide every household that needed one a converter box coupon. On December 24, however, the Energy and Commerce Committee finally received word from NTIA that the program would run out of money, much too late for Congress to address the problem, and now there are over 2 million households on the coupon waiting list.

As expected, more problems are also surfacing as we have gotten closer to the transition. Last week the Washington Post ran an article about problems people are experiencing with their antennas, and in my hometown of Houston, we have continually raised the issue of there being limited options and availability of battery-powered converter boxes for households to purchase in the event of a hurricane like we experienced last September with Hurricane Ike. Currently, households must buy a separate battery-pack for a converter, and the coupon program does not cover the battery-pack.

I understand getting the coupon program rolling again is the most pressing matter, but I hope between now and June 13 we can address these other issues and create a program that will assist households who need to do more than just hook up a converter box to acquire the equipment they need to make the transition.

Again, I urge my colleagues to join me in supporting this legislation so we can get the households the coupons they need to purchase converter boxes to keep their analog televisions from going black, and to address other issues that are arising with the digital transition.

Mrs. CHRISTENSEN. Mr. Speaker, I rise today in support of S. 328, DTV Delay Act. With the deadline of February 17, 2009 for DTV transition quickly approaching, it is very important that we recognize and address the reality that consumers are still confused by this transition and in many jurisdictions are not prepared for the transition to digital television. Unfortunately, the number of people who stand to lose their access to TV programming in the DTV transition is considerable. Approximately 30 to 40 million people still rely on over-the-air television, most of who are senior citizens, poor or non-English speakers and underserved communities. Although there has been a considerable amount of outreach, it has still been haphazard. There are still issues that may make the impending deadline unrealistic.

For example, in my district—the U.S. Virgin Islands—I have heard numerous complaints about the receipt of the vouchers via U.S. Postal Service, which in my district takes much longer than most areas in the U.S. mainland. Unfortunately, S. 328 did not include the House provision to require first class mail service for the delivery of coupons via the U.S. Postal Service. This provision would have made a big a difference in expediting the mail delivery time to the U.S. territories. I hope that NTIA will work on resolving this issue, although it is not a provision in the bill.

There are other components of the bill that can potentially make it a smooth transition. Although an extension will cause delays, it is important that we protect our Nation's consumers and ensure that no one is left behind in this transition. The DTV transition is not something that is easily understood by all consumers and it has become evident that it will take more time to bring everyone on board. We must work to ensure that this important transition does not leave millions of consumers in the dark.

In the interest of time, I urge passage of this legislation but encourage the NTIA to continue work with Congress on resolving the program's deficiencies.

Ms. JACKSON-LEE of Texas. Mr. Speaker, today I speak in strong support of S. 328, and I also want to thank my colleague Senator JAY ROCKEFELLER for authoring this insightful resolution.

The digital television transition is an unnecessary burden to be passed onto the American people at a time when the pressures of day to day life are heavy and growing.

To assist consumers through the conversion, the Department of Commerce through its National Telecommunications and Information Administration, NTIA, division handled requests from households for up to two $40 coupons for digital-to-analog converter boxes beginning January 1, 2008 via a toll free number or a Web site.

However, the Commerce Department has run out of funds to cover the cost of coupons and there are millions of Americans who have yet to receive the boxes. These Americans should not be expected to purchase the converter box without the aid of the government, seeing as the entire Nation is under extraordinary economic pressure caused by the recession.

Last week, President Obama's team joined a chorus of concerned voices requesting a delay because the National Telecommunications and Information Administration, NTIA, which is to provide education and $40 vouchers for people to buy digital TV converter boxes, ran out of money on January 4. There is also concern that many people, especially poorer and more rural areas, have not yet heard that they will need a converter and a larger antenna.

Older homes can not be easily wired for cable. The house walls might be made of concrete, brick, or stone that is difficult to wire through. This has caused some local residents to opt for analog over-the-air TV instead of cable or FIOS. Other people have decided to only wire their living room, and still use analog over-the-air in other rooms. The old construction can also cause problems running an antenna to a window, roof, or attic. These older homes are generally owned by lower income families that are being hit particularly hard by the current economic recession.

On January 22, the Nielsen Company said 6.5 million Americans had not prepared for the switch, a startling number considering the Commerce Department's inability to assist these Americans in the purchase of the converter boxes. TV stations would face extra expenses, which is a burden that they also cannot be expected to take on in times like these.

Mr. Speaker, I understand that the long-term effects of this transition will benefit the American people and support the eventual transition. Mr. Speaker we are in a recession at best. Our seniors can barely afford their prescriptions and we are asking them to pay another 40–50 dollars for a convertor box? To some of us that may not seem like much but for many it is a small fortune. Especially for our senior population who may have only the television as company.

I ask that my colleagues support this legislation and give Americans more time to properly prepare for the conversion.

Mr. DINGELL. Mr. Speaker, it infuriates me that thanks largely to the incompetence of the Bush Administration during the past three years, we are presently confronted by the need to delay the transition from analog to digital television. That we are today voting on DTV delay legislation underscores the utter folly of the National Telecommunications and Information Administration's arrogant confidence in its management of programs to carry out the mandates of the Digital Transition and Public Safety Act of 2005.

As the Obama-Biden Transition Team highlighted in its January 8, 2009, letter to the Committee on Energy and Commerce, the inadequacy of the existing converter box coupon program and other federal programs meant to support consumers necessitates a delay in the date of transition to digital television. During numerous hearings in the 110th Congress, I asked representatives of NTIA whether they had sufficient funding for the DTV converter box coupon program. These representatives consistently responded that they did, even in light of a GAO report last year that NTIA would be unprepared to cope with a surge in consumer demand for converter coupons. We now know that there are some 1.5 million households on a waiting list to receive converter coupons and moreover that consumers, who apply for a coupon today, may not actually receive the coupon until after the DTV transition, as it is presently scheduled. I can only stress that had NTIA been more forthright with the Congress about the perilous reality of the coupon program, we would have been able to agree upon a solution well in advance of the consumer crisis that now looms before us.

While I intend to vote in favor of S. 328, I wish to take this opportunity to mention three brief, but important, points. First, I am troubled that S. 328 does not contain a provision to require monthly reports by NTIA concerning its administration of the DTV converter box coupon program. Given NTIA's poor administration of this program in the past, I feel it only prudent that NTIA be subject to more rigorous oversight in the future. I would add that the House version of this bill, which was to have been considered today by the Committee on Energy and Commerce, included such a reporting requirement.

Second, I would caution my colleagues that this bill's extension of the Federal Communications Commission's ability to auction spectrum gives rise to the possibility of waste, fraud, and abuse in those proceedings. I intend to work with the Chairman of the Committee on Energy and Commerce to see that oversight hearings are held following the enactment of this bill to ensure that the FCC is adhering to the statutory requirements of section 309 of the Communications Act of 1934, which specifies how the FCC shall grant licenses for the use of spectrum.

Finally, I am concerned about the DTV transition's effect on the natural environment, specifically as millions of analog television sets are disposed of by consumers. These old television sets contain such hazardous materials as mercury, chromium, cadmium, and beryllium, which could leach into the ground after these sets are deposited in landfills. I hope also to work with the Chairman of the Committee on Energy and Commerce to examine the environmental repercussions of the DTV transition and take such steps as necessary to mitigate them.

In closing, I remain committed to working with my colleagues in reaching a consensus-based solution to the problems associated with the DTV transition, especially to mitigate its impact on low-income, rural, and elderly Americans.

Mr. BOUCHER. Mr. Speaker, I yield back the balance of my time.

The SPEAKER pro tempore. The question is on the motion offered by the gentleman from Virginia (Mr. BOUCHER) that the House suspend the rules and pass the Senate bill, S. 328, as amended.

The question was taken.

The SPEAKER pro tempore. In the opinion of the Chair, two-thirds being in the affirmative, the ayes have it.

Mr. BARTON of Texas. Mr. Speaker, on that I demand the yeas and nays.

The yeas and nays were ordered.

The SPEAKER pro tempore. Pursuant to clause 8 of rule XX and the Chair's prior announcement, further proceedings on this motion will be postponed.

REPORT ON RESOLUTION PROVIDING FOR FURTHER CONSIDERATION OF H.R. 1, AMERICAN RECOVERY AND REINVESTMENT ACT OF 2009

Mr. POLIS of Colorado (during debate on S. 328), from the Committee on Rules, submitted a privileged report (Rept. No. 111–9) on the resolution (H. Res. 92) providing for further consideration of the bill (H.R. 1) making supplemental appropriations for job preservation and creation, infrastructure investment, energy efficiency and science, assistance to the unemployed, and State and local fiscal stabilization, for fiscal year ending September 30, 2009, and for other purposes, which was referred to the House Calendar and ordered to be printed.

SPECIAL ORDERS

The SPEAKER pro tempore. Under the Speaker's announced policy of January 6, 2009, and under a previous order of the House, the following Members will be recognized for 5 minutes each.

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

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

The SPEAKER pro tempore. Under a previous order of the House, the gentlewoman from California (Ms. WOOLSEY) is recognized for 5 minutes.

(Ms. WOOLSEY addressed the House. Her remarks will appear hereafter in the Extensions of Remarks.)

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

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

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

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

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

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

The SPEAKER pro tempore. Under a previous order of the House, the gentlewoman from Ohio (Ms. KAPTUR) is recognized for 5 minutes.

(Ms. KAPTUR addressed the House. Her remarks will appear hereafter in the Extensions of Remarks.)

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

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

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

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

The SPEAKER pro tempore. Under a previous order of the House, the gentlewoman from North Carolina (Ms. FOXX) is recognized for 5 minutes.

(Ms. FOXX addressed the House. Her remarks will appear hereafter in the Extensions of Remarks.)

ECONOMIC STIMULUS PLAN

The SPEAKER pro tempore. Under the Speaker's announced policy of January 6, 2006, the gentleman from Georgia (Mr. GINGREY) is recognized for 60 minutes as the designee of the minority leader.

Mr. GINGREY. It is my privilege this evening to have the opportunity on behalf of our leadership to take this hour and talk about a number of things, particularly to discuss this economic stimulus package that we are going to be voting on very soon, probably tomorrow. And we will get into that, and hopefully some of my colleagues will join me on the floor.

But, before I begin that discussion, Mr. Speaker, I wanted to take an opportunity to rise and to recognize a great woman who I am blessed to call Aunt Eleanor on her 95th birthday. Eleanor Gingrey Murphy turned 95 years old today, Tuesday, January 27, 2009.

Unfortunately, I will not be able to attend her birthday celebration, but I wanted to take this opportunity, Mr. Speaker, to honor Aunt Eleanor and wish her a happy and a healthy birthday. Eleanor Gingrey Murphy has lived a great life and has been a blessing to both her family and to her community.

□ 2115

She was born on January 27, 1914, to Charlie and Effie Eubanks Gingrey, my grandparents, in Warrenville, South Carolina, just outside of my hometown of Augusta, Georgia. At the time of her birth, she had two older brothers, Bill and my father James Gingrey. About 2 years after her birth, her youngest brother Charles was born.

Just before Aunt Eleanor's fourth birthday, her mom died in childbirth at age 26. My grandfather, Charlie, worked hard as a mail carrier and later as a carpenter to provide for his four children. But times were tough, Mr. Speaker, and the children often had to take care of each other when aunts and uncles were not available. After school, they often roamed the woods, learning the names of wild berries and fruits that were edible, and they would collect them and bring them home for food. Eleanor was left to do all the cooking for the family at an early age; and she must have learned well, for she is a wonderful cook today.

After high school, Eleanor followed her brothers to New York, where they had hitchhiked in their mid teens to search for work. While in the Big Apple, she met Bill Murphy. Bill Murphy, an Irish immigrant who immigrated legally to the United States with his family from Limerick, Ireland. Eleanor and Bill fell in love and were married in 1937 at the St. Rose of Lima Catholic Church in New York City. They had both been working at a little restaurant, Mr. Speaker. Some of my New York colleagues may remember it; I think it was called the Horn and Heart, where you put a little coin in a slot and you could see your food and you pull out a sandwich or a salad or a bowl of soup.

Well, they were blessed with five sons, my cousins, Larry, Billy, Charles, Tom, and Kenneth. Shortly after the birth of their second son, Billy, Eleanor and Bill left New York City, and they settled their family in a little town called Edgefield, South Carolina.

Tragically, my Uncle Bill left this world at the age of 44 after suffering a heart attack while supervising a sandlot baseball game that he had organized among his own sons and the African American neighbors. Once again, Aunt Eleanor was left to care for her family. Her boys were now becoming teenagers. At the time of my uncle's death their ages, Mr. Speaker, were 12, 13, 16, 17, and 19. And, believe me, times were not easy. Eleanor enrolled in nursing school, and she earned her LPN in order to support her family. Her oldest son Larry had to cut short his Navy enlistment to help out at home.

Through the years, Eleanor's family has continued to grow with her love and her support. She now has 12 grandchildren, and 20, and I understand soon to be 21, great grandchildren. Aunt Eleanor is a devout Christian woman who has a deep love for her family. She often remarks how blessed she has been to be able to watch her children become old men. Fortunately, that includes her nephews and niece, of which I am a proud member.

Eleanor Murphy is a remarkable, remarkable woman with a generous and a loving spirit, and I ask all my colleagues on both sides of the aisle to join with me tonight in wishing my aunt, Eleanor Margarite Gingrey Murphy, a happy and a blessed 95th birthday. And I thank you, Mr. Speaker, for allowing me to take the first part of this hour to discuss this wonderful, wonderful woman and to pay my respects to her.

Mr. Speaker, this is quite a week. We are going to be voting tomorrow on a bill that would spend $825 billion to stimulate our economy. I know that we all agree, both Republicans and Democrats, in this body and 100 Senators in the other body, that these are dire economic times. This country is in a deep recession, and something truly needs to be done about it. We need to stimulate the economy, we need to grow jobs, we need to free up credit markets, and we need to do it quickly.

My concern, Mr. Speaker, is that this package is not the right package. Sure, there are some tax cuts in the package and there are some spending programs; but when this was first described, the idea was there would be monies spent for infrastructure projects all across this country, restoration of roads and bridges, money spent on rapid transit and repairing decaying infrastructure. And each State was asked to prepare a list of projects, and States including my own of Georgia laboriously went through this process to find projects, so-called spade or shovel ready projects that we could immediately get started or purchasing right away and getting these projects underway and putting people back to work. And it was an estimate that several hundred billion dollars would be spent on the these projects.

But as this program has developed, and we now today at the 11th hour looking at this bill as it has been marked up on the House side, what we see is far different from what was originally projected. It is not unlike what

happened before the first of the year back at the end of the 110th Congress when Secretary Treasury Paulson came to the Congress, to both the House and the Senate, and said: Look, the sky is falling; we are in dire economic straits. And I have a plan; it is just three pages long, but I have a plan. And I am going to ask you to authorize me to spend $800 billion to purchase something that was referred to, Mr. Speaker, as troubled assets, so the program became known as the TARP program, Troubled Asset Relief Program.

And I am not going to try to get too deep into the weeds of all of this, but the bottom line is that many financial institutions across the country were holding literally 50, 75, in some cases hundreds of billions of dollars worth of these collateralized, securitized mortgages, many of which contained subprime loans that had questionable value, particularly with the value of homes going down, and sometimes the mortgage alone on these homes was worth far more than the value of the home that they represented. But in any regard, that is what the Secretary of the Treasury and the Chairman of the Federal Reserve Board said to us, and that we needed to give them that authority to do it, and to do it quickly.

So, basically, over my vote and many on my side of the aisle, this bill did pass, and $350 billion was spent and spent quickly. But, Mr. Speaker, to this day I don't believe one thin dime has been used to purchase a troubled asset. No. The Secretary of the Treasury, former Secretary of the Treasury made a decision that maybe the British had a better plan, one that was not discussed with us at any time, at any time, as we deliberated and debated that bill. And we finally made some changes to it, and it went from a three-page bill to a 110-page bill, and at no time was there any discussion though of taking that money and literally giving it to the large national banks and regional banks to restore their capital and to purchase stock in these banks, preferred stock, and so the government would literally take an ownership interest in our banking system.

So that is basically what happened. No troubled assets were purchased. And what happened to the credit markets and the ability for a small business man or woman to get a loan from a bank, or indeed a person to get an automobile loan or someone to borrow a little money to send their child to college or get them through that last semester? That money was frozen. There was nothing available. And so this program, to my way of thinking, Mr. Speaker, hasn't worked at all. And it is pretty depressing when it was not even something that we in this Congress had talked about. This was just a decision that was made because the Secretary of the Treasury said: Well, there is some fine print or a section in the bill that says I have the authority to do this. And he did it.

And so now as we come back for the 111th, and just before President Obama was sworn in for his inauguration on January 20th, former President Bush asked for the rest of the money, so to speak, another $350 billion; and yet, again, no real restrictions on how that money was going to be spent, and no accountability, no transparency. And so we on this side of the aisle, Mr. Speaker, have some real concerns about what we are doing to this country and the amount of money we are spending.

Now, talking about the TARP program, that is a total of $800 billion. And now we are on the eve, literally, of passing another piece of legislation where we spend $825 billion, but some say it will end up being $1.5 trillion, or possibly even more, on a massive spending program that is a far cry from what we were originally told; that is, most of this money would be put immediately to work on spade ready or shovel ready infrastructure projects across this country repairing roads and bridges and some for mass transit. And when we look at the content of the bill and we see things like hundreds of millions of dollars to resod the National Mall and several hundred million dollars for a contraception program, to me, that has very, very little, if anything, Mr. Speaker, to do with stimulating the economy. It just simply does not.

Fortunately, and I commend President Obama for this, there are some tax cuts in this economic stimulus package. But some $80 billion of $250 billion of tax cuts are literally going to people, Mr. Speaker, who currently are not paying any Federal withholding tax. They have no obligation to, because with their income and the amount of deductions, then they don't owe any Federal income tax but they do pay a payroll tax. So this is a refundable tax credit for those individuals, and it amounts to, as I say, approaching $70 billion. And it is really taking money out of the Social Security system and the Medicare system that benefits that group of people more than any other in our population.

A little lesson on Social Security, Mr. Speaker, is that individuals who are eligible for Social Security, who are in the lower income levels, their monthly check on Social Security replaces far more of their income than the monthly check to someone who is a higher income earner. Someone at a higher income level may get 15 percent or less of their income replaced by Social Security; but individuals at that lower income level who pay no withholding tax, their income replacement by Social Security is up to 40 or 45 percent.

□ 2130

And so to literally take that money and take it out of the Social Security system, to me it seems like it penalizes them more than it helps them. That is something that hasn't really been discussed. I haven't heard others discuss it, Mr. Speaker. But maybe we will hear more about that tonight from some of my other colleagues.

There is one most important point that I would like to make. And of course, President Obama very respectfully came to the Republican Conference today. I think he was very forthright with us. I think most, all of my colleagues on the Republican side would agree that the exchange was respectful, sincere and honest. There were honest differences of opinion in regard to what kind of taxes we really feel like we need to stimulate this economy. We Republicans feel very strongly that the tax breaks need to be across the board, that everybody that pays taxes needs to have a tax cut, not have a preponderance of the tax break going to those who currently don't pay any taxes. But most importantly, even more importantly than individual lowering of marginal rates, is to help our corporate men and women, small businesses. I'm not talking about IBM or General Motors or Apple Computer or anybody in that category. I'm talking about small businessmen and women, the ones that, quite honestly, because we goofed up the TARP program, are having such a desperate time getting a loan, a bridge loan to keep those businesses going and to keep the employment rate up in this country. They're not getting what they need. So we feel very strongly that there should be a significant lowering of the corporate income tax rate, maybe from 35 current down to 25 percent.

We feel like that a person who has a 401(k) or an IRA plan, Mr. Speaker, who is under age 59½ and normally would be penalized and have to pay a tax burden for taking money out prematurely from one of those plans, in this desperate year or two, there should be no penalty for withdrawing money out of a 401(k) or an IRA to possibly pay the heating bill or pay for a child's surgery or to ward off foreclosure when they are a couple of months behind on a mortgage payment.

Those are the kind of things that we, on the Republican side, have tried to bring to the committees of jurisdiction that marked up this bill last week, the Appropriations Committee, the Ways and Means Committee and the committee on which I now serve proudly, the Energy and Commerce Committee. And every little amendment, there weren't many, Mr. Speaker, that we got approved in Energy and Commerce last week, lo and behold, when it was all said and done, those amendments were pulled out of the final bill. And so the bill that we are seeing today, which is kind of an amalgam of those three bills sort of put together, maybe rewritten by the majority leader and the Speaker of the House, none of those Republican amendments, those well-thought-out amendments, after a 12½ hour markup, a lot of hard work went into that, and all of a sudden, poof, they are gone.

And so when President Obama was at our conference today, Mr. Speaker, we

talked to him about that. And he listened. I think he sincerely listened. He made no promises. But I thought it was a very good opportunity, a very good exchange and a good start. And as he pointed out, we would love to be able to have a bill that we could agree on that had a good chance of stimulating this economy and stimulating it quickly and that we could do it in a bipartisan way.

But for that to happen, Mr. Speaker, he is going to have to make some changes that we Republicans can believe in. Let me repeat that. That has been the motto, ''change you can believe in.'' He, in this bill, to get Republican support, is going to have to make some changes that we Republicans and the people that we represent, literally 48 percent of the population of this country, that they, too, can believe in. And so we can only hope that as this bill is marked up in the Senate, and clearly, the two will not be the same, and ultimately there will be a conference report and some changes will be made. And I hope that President Obama, in working with Speaker PELOSI and Majority Leader REID, Mr. Speaker, we can work with the Republican minority with our Leader BOEHNER, JOHN BOEHNER, a gentleman from Ohio, and the Senate minority leader, MITCH MCCONNELL, a gentleman from Kentucky, that we can get together and this can be a work that we can be proud of that has a good chance of success, that truly we will be pouring water on a fire and not gasoline on a fire.

So with that, Mr. Speaker, I see that I have been joined by one of my colleagues, indeed one of my classmates from New Jersey, a gentleman that has served on the Financial Services Committee, he served on the Budget Committee, and I think he has an understanding of this whole process far deeper than most Members. Let me just put it that way.

And so I'm pleased to have with us tonight my good friend from New Jersey, SCOTT GARRETT. And Mr. GARRETT, I will yield some time to you.

Mr. GARRETT of New Jersey. Well, I thank you for the introduction and thank you for yielding as well. I don't know if I can live up to the level as being more informed and better versed than many of my colleagues, but let me just try to make a couple of points here in the next couple of minutes.

You are right when you begin by laying out a little bit of a history. And when you do so, what it points out is that really we have been down this road before. Several months ago, we were right here on this floor debating a similar issue, when then Speaker PELOSI said that the sky would fall if we did not take immediate action in the stock market and the credit market and the rest. And of course, at that time we were talking about TARP 1, TARP 1, a spending of $350 billion, because we were in the midst of a crisis, we were told, a crisis that required that there be absolutely no alternatives considered. In fact, the Treasury Department said they looked at other ideas and immediately dismissed them. In fact, when we were not even allowed to have a markup or a hearing on it to consider alternatives, no, they had picked the right solution to the problem that we were facing in the fall and winter of last year, and that was their TARP 1 piece of legislation, and we had to rush it through this body, pass it and have the President sign it. And we did that over my objection, and I believe your objection, as well.

At that time we said it was going to solve the problem. But what was the end result? Of course, well, they said if we didn't do it, the stock market would drop about 1,000 points. But by gosh, look where it is now, several thousand points down. And the credit markets, I was just in my office earlier today, credit markets, securitization of housing in the commercial markets, are still equally tight as they were then.

That was followed by TARP 2. It was just a week ago Wednesday of last week. We were again on this floor, and again we were told that we were in a panic phase, a crisis phase, if you will, and we had to vote on TARP 2. And what was TARP 2? TARP 2 was an additional $350 billion that would again go to now the new administration with no strings attached. And this is the rub that so many of my constituents are so angry about that basically we are just writing a proverbial blank check here, passing it off to the administration, they can use it for whatever they want, buy toxic assets, buy banks, nationalize the banks. If you saw Speaker PELOSI on TV the other day, she refused to use the words ''nationalization of the banks.'' But in essence she said that is exactly what they were doing, buying up the auto companies.

We could have our new Treasury secretary, if he wanted to, he could go out and buy a TurboTax for every American in this country so those people would be able to figure out how their taxes are done and make sure that they pay their right taxes. That is what we basically granted when we passed last Wednesday an additional $350 billion, again, over my objection, and I believe over your objection as well, when that TARP bill went through. And now here less than a week later, we are on the floor discussing an additional $800 plus billion, again because we are in a crisis, we are told, and if we don't move now, it will get even worse. And we were told, again, just as in TARP 1, as in TARP 2, no opportunity for hearing, no opportunity really for input, no opportunity for amendments and the like, so that we were in panic phase.

And with that, I would just like to refer you over to an article that was actually in today's ''Weekly Standard'' written by John Stossel, who I'm sure you're familiar with. The headline of that is, ''This Is No Time to Panic.'' And I think that is extremely important to consider. And it lays it out pretty well. The subheadline is, ''our economy has recovered before and we can do so again.'' And what he basically lays out here is just take your time, move in a careful and cautious manner, consider all the alternatives which you were not allowed to do in 1 and 2, and move appropriately and the economy will work its way through with appropriate action in Washington that takes all considerations and input to mind. We didn't do that in 1. We didn't do it in 2. And I think obviously we are not going to do it with the expenditure of $800 billion now.

So going forward, we should consider a couple of points. What do the economists say about this? What do some of their own members say about what is about to go on here? Well, the economists, let's talk about that. We had the President come and speak to us today in the Republican Conference, as you said, and I appreciate the fact that the new President came and said he would reach across the aisle and talk to us about these issues. Although I will add the caveat, each time we threw out some alternatives to him and said, well, we might want to improve the bill in this manner or in that manner, I believe for as long as I was in the conference, each time one of those alternatives was suggested to him, he said, well, I would disagree with you on those points, and I really can't accept that amendment or that suggestion as a change.

But I do still appreciate the fact that he would come and listen to our talks. While he was there, and other times as well, he said that all the economists side with them on the need for a spending plan right now as they have laid out. And in essence, it is sort of the same argument we have heard before where it says there is no economist on the other side. Well, there are economists on the other side. As a matter of fact, there are pages of economists on the other side of this issue who say that the right action is not the one that is being laid out in this stimulus package. The right action is not to put us deeper in debt. And it is not just economists outside of the mainstream. I can refer you, as well, to economists right in the Obama administration.

If you look to an article in the February 9 edition of National Review by Alan Reynolds, he quotes two economists. One is Peter Orszag, who of course is the new administration's head of the Office of Management and Budget. And also he makes reference to Douglas Elmendorf, who is the new Democrat head of CBO. So these are people within the Obama administration who, previous to coming into their administration, or the Democrat side of the aisle, I should say, disagreed with this approach to stimulus with regard to fiscal spending.

Let me just quote from the article with regard to Peter Orszag.

''Former Treasury Secretary Robert Rubin co-authored a 2004 paper with forecaster Peter Orszag of the Brookings Institute at that time, who has

now been tapped by the Obama administration to lead the Office of Management and Budget. In that report they argued that 'budget deficits which will occur with this bill, decrease national savings which will reduce domestic investment and increase borrowing abroad.'''

Big budget deficits, warned Rubin and Orszag, would ''reduce future national income,'' and this is the important part as well, risk a ''decline in confidence which can reduce stock prices.'' So that is his new OMB director raising those red flags. Democrats' CBO director said the following, and they warn that ''it is critical that efforts to fight a recession'' such as we are doing now ''do not end up increasing the long-run budget deficit and thus harming long-run growth.''

Elmendorf rightly noted that ''the idea that Congress should make legislative changes to tax and spending policies in order to counter the business cycle has fallen into disfavor among economists.'' So there it is right there.

Mr. GINGREY of Georgia. If I reclaim my time just for a second, I hope you will stick with me, I want to hear more from you. But you mentioned the majority CBO, Congressional Budget Office, they came out with a report that said that 7 percent, Mr. Speaker, 7 percent of this money would be spent in 2009 and up to 38 percent by the end of 2010.

□ 2145

So we have this dire emergency and we need spending and we need it right now, and yet only 7 percent of all of these projects are getting into the hands of the people, into the economy, to help grow jobs. Where is the emergency?

Well, I quite honestly, Mr. Speaker, feel there is an emergency. But that is why we take exception to this program and the many things that are in it that really have nothing to do with emergency spending. I mentioned a few of them at the outset. There are others. There are quite a few others.

In fact, Mr. GARRETT, I know you would agree with me, Mr. Speaker, I think he would, that when President Obama came to the conference today, he admitted the same thing. He said look, there is stuff in there if I had my complete way, and I am not sure why he doesn't, but he does have to deal, of course, with the legislative branch, that being Speaker PELOSI and Majority Leader HARRY REID on the Senate side, but there are things that I think clearly should be, and I bet my colleague from New Jersey would agree with me, it is just regular spending. Whether we are talking about some of the trillions of dollars on education spending, IDEA, increasing Pell Grants, that is part of a regular process that ought to work its way through the authorizing committee, Education and the Workforce, and let the appropriators appropriate money under regular order. That is not emergency spending. So we have turned this $825 billion emergency spending package literally into a Christmas tree, and it is not going to help, it is not going to get us out of this deep recession. And we need something that is going to work.

I yield to my friend.

Mr. GARRETT of New Jersey. I appreciate the gentleman yielding and I think when you said I would probably agree with you, I do agree with you.

Before I describe the types of jobs that they may be creating with this so-called bailout of the economy, you have to ask yourself: what is the definition of a job? We have an idea when somebody says I just got a new job, they have a job, employment, a career that they will be starting next Monday and it will last not just through Monday afternoon but through the next year and as long as they perform their duties and services appropriately as to the requirements of their employer, that they will have a job.

Mr. GINGREY of Georgia. At least to work long enough to make them eligible for Social Security, 10 quarters worth of work.

Mr. GARRETT of New Jersey. There you go. But what the government means when they say they are creating jobs, and the Obama administration has given us different numbers as to how many jobs, 2 or 3 or 4 million jobs, we don't know how many jobs that they are creating, but a job is when an individual works at least one hour during the course of one week, and that means that they have created a job. So I could pay you to paint my fence in front of my house for an hour, and I just created a job. So we could be creating 2 or 3 million of these jobs under this proposal. But is that the type of job and the type of recovery that Americans are truly looking for?

As to what the nature of some of these jobs are, let's look at a couple of them. In Anchorage, Alaska, we have talked about building the bridge to nowhere in Alaska. Here is street lighting. I guess that is putting in light bulbs. That is one job.

Intercom upgrades, someone is rewiring intercoms in buildings.

Bus replacement. I am not sure how that is getting a job.

Also in Anchorage, Alaska, and Alaska does pretty well under this bill, potentially. These are proposals coming from mayors across the country as far as job-ready projects that they can submit to the administration and say let's roll with these programs, Greenbelt Trail resurfacing. I guess that is a job that we are looking to spend money on.

Again street light retrofitting.

Landfill methane recovery project.

In Huntsville, Alabama, they are looking for money to replace bathroom fixtures, software purchases, and replace trolley buses.

Down in Pines Bluff, Arkansas, they are looking to buy a fire department ladder. I am not sure how that creates a job, but that is what the mayors are submitting to say they are ready to go, dollar ready, and spend this money getting it out the door.

With regard to that, I think the point should be driven home as far as when the money would be spent. The original CBO budget said that only a small percentage of the money will actually go out during the course of this year.

Mr. GINGREY of Georgia. Absolutely. Again, that was a CBO report and it was 7 percent in 2009.

Mr. GARRETT of New Jersey. Yes, 7 percent.

Now the number on top of that that the majority has just come out with says actually, we are going to get around two-thirds of the money out in 18 months. Think for a second what that actually means. So 18 months from now will be July 2010. By July, we will be having our summer barbecue, and that is when the bulk of this money will be spent. That is not when we need to get the economy going, that is not when small businesses should be hiring new people, not a year or more from this summer, we should be hiring people today, we should be putting people back to work today. So the idea that the majority is saying is okay is favorable, spending money a year and a half from now as the best-case scenario is one that I think most Americans would have a problem with.

Mr. GINGREY of Georgia. Indeed, Mr. Speaker, and I would say to my colleague that the jobs are being lost today. They are not being lost 18 months from now. God help us if we are losing these kinds of job 6, 12, 18 months from now. We better be growing jobs and not losing 15,000, and I think Pfizer Pharmaceutical announced they were going to cut 15,000 jobs out of their workforce. Apple for the first time in its history I think recently announced a significant job loss. The big three automobile manufacturers, despite the fact that they got what, at least $5 billion, including GMAC, another billion in the first tranche of the TARP money, so these jobs are being lost and lost now. And as my colleague from New Jersey points out, we need to save these jobs, save the ones that we can and grow new jobs, but not 6, 12, 18 months from now but right now.

I wanted to just mention for my colleagues' sake on both sides of the aisle, sometimes it is a little difficult to know what is exactly in these massive bills, particularly one that has been brought to the floor in such rapid-fire fashion without any input really from the minority side, but maybe without much input, if any, from the rank and file of the Democratic majority. But, Mr. Speaker, and my colleagues, including Mr. GARRETT from New Jersey, just listen to a few of the things that are in this economic stimulus package: $650 million for digital TV coupons; $650 million for new cars for the Federal Government; $6 billion for colleges and universities, many of which have

billion dollar endowments; $50 million in funding for the National Endowment for the Arts. That is a perfect example of something, Mr. Speaker, that should be funded under regular order. It should be debated and a case made whether or not that needs to be increased or decreased, not thrown in here in the dark of night and said we are going to spend $50 million because it is part of an economic stimulus package. It is not.

There is $44 million for repairs to the United States Department of Agriculture headquarters. What do they need new carpet, retrofitting of their bathroom fixtures? Can't that wait? Is that going to create new jobs? I don't think so.

There is $200 million as we said earlier for The National Mall, including $21 million for sod. I could go on and on. Some might say you are nitpicking, you are just going in there and picking out things that sound and look bad. Believe me, there are others that sound and look a whole lot worse. It is just a recurring theme. So we feel very strongly, and I want to spend some time talking about this because my colleague on the floor with me tonight, Representative GARRETT from New Jersey, he and I are both members of the Republican Study Committee, the more conservative 108 Republican Members out of about 175 of us now, in the minority, who have a better plan, we think, for stimulating this economy. We call it the Economic Recovery and Middle Class Tax Relief Act of 2009.

I want to bring out just a few of the things that are in that bill. We have submitted it. I am a proud cosponsor of this bill. I think the original cosponsors, the chairman of the Republican Study Committee, Mr. Speaker, and that would be Dr. TOM PRICE of my great home State of Georgia, and JIM JORDAN, the gentleman from Ohio, and a couple of other members of the Republican Study Committee, but here are some of the provisions.

We would provide an across-the-board tax cut of 5 percent for everybody who pays taxes. Every marginal rate, we would cut 5 percent. If you are paying 10 percent, it is 5. If you are paying in the 15 percent bracket, it is 10. If you are paying in the 28 percent bracket, it is 23. And we feel very strongly about that.

We would increase the child tax credit from $1,000 to $5,000.

We would repeal the AMT. Very quickly, I think the general public has heard enough about this to understand it. I know my colleagues understand it. AMT, alternative minimum tax, which was put in place 25 or 30 years ago to make sure that maybe 125 ultra-rich people had to pay some taxes, they couldn't use legal loopholes with very smart Philadelphia tax lawyers to get out of paying any taxes, and so it had to be calculated in two ways and they had to pay an alternative minimum tax. Well, it was not indexed for inflation and this year come April 15, 25 million middle income taxpayers are getting caught by the AMT, and that should be repealed. It should not have any kind of a PAYGO provision. It is a wrong tax. It was never meant to apply to these 24 million, and it should be repealed and repealed permanently.

We want to make the capital gains tax lower and we want to make the dividends tax rate 15 percent and permanent. We want to increase by 50 percent the value of the tax deduction for interest on student loans and the tax deduction for qualified higher education expenses.

We want to make all withdrawals from retirement accounts tax free, as I said earlier, during the year 2009.

There are a number of other provisions in the bill. I know that my colleague from New Jersey is very familiar with that. I would love to yield to him at this time and we will further discuss the RSC stimulus bill which is called the Economic Recovery and Middle Class Tax Relief Act of 2009 which we firmly believe will get us out of this recession because people will have money in their hands that they will spend and we will not have to worry about this massive bureaucracy throwing $825 billion out the window and hoping that it sticks somewhere.

I yield to my friend.

Mr. GARRETT of New Jersey. Mr. Speaker, before I speak to the many merits of that piece of legislation, I just want to reiterate another point as to how we got here and what we are getting from the other side.

As I mentioned before, the proponents of the bailout bill that we are about to vote on tomorrow would say that the economists are on their side and there are no economists on the other side, and I made the argument that there are a number of economists who support our view, that the way to go is just what you were laying out in the Economic Recovery and Middle Class Tax Relief Act.

I should also point out that even within their own conference, there is growing realization that the way to get job creation going in this country is not by rushing a bill through this House without due deliberations, rushing a piece of legislation that is going to put our children and grandchildren in debt.

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And so I just wanted to point out that our friend from the other side of the aisle and the chairman of the Capital Markets Committee in Financial Services, Representative PAUL KANJORSKI—who, by the way, just an hour or so ago was trying to make a positive amendment to the underlying bill and was rebuffed in the Rules Committee—this is what he had to say on C–SPAN with regard to his own party. He said, the Democrats, ''have lost our way, and that we shouldn't be pressed by any silly deadlines.'' He went on to say further, ''We need to take our time. And I guarantee you we're going to come back and we're going to have to have another stimulus on top of this. We're going to have another bailout for Wall Street because we are not doing things properly.'' He says, again, ''I think we lost our way in a way. We shouldn't be pressed by these deadlines. You know, what makes the President's Day holiday''—which is where they were initially aiming for—''so important for us to get out of town to get these things done?'' Which just goes to show that there are individuals from both sides of the aisle who realize that when you're talking about such sums of money and when you're talking about such a situation that we're in right now, that a solution is not to be found by rushing to judgment, nor is a solution to be found by putting all consideration to alternatives aside.

That's why I commend the gentleman from Georgia to making reference to the RSC, the Republican Study Committee, proposal. Because what this does is to make a realization that the failed policies of the past, as far as economic policy of saying that we can spend our way into a new paradise of the economic situation, history does not prove that. If you think about the Great Depression—which a lot of people are now referencing right now—some of them from the other side of the aisle will make that argument and say, well, what pulled us out of the Depression they'll say was FDR. And I know our new President makes reference to himself with regard to FDR, besides Lincoln. But the other side of the aisle will say that the way to get out of this doldrums is do additional spending such as the New Deal, and that's what they're talking about today is another New Deal.

But if you actually study the history of the Great Depression—and I know there is much dispute as to how we got into the Depression in the first place, but I will commend the gentleman from Georgia to an article written by Robert Higgs which makes the case very well that going into the Depression, there is question as to how we got into it, not so much into question is how we got out of it. And how we got out of it was an opportunity by the private sector to make decisions on their own to invest as they wanted to invest, hire people how they want to be hired, and to do so without excessive control by the Federal Government.

And I'll bring this all around to your point of why the RSC's bill is so important. During the Great Depression you had the FDR, the Roosevelt administration, setting up a whole alphabet soup of new agencies to regulate the economy. During the Depression, you had excessive government expenditures in various sectors of the economy, all of which made the private sector basically say, we're going to sit back for a little while. We're not going to invest anything because tomorrow, where I invest over here, the government may start regulating in such a way that I can't make a profit; or tomorrow, if I

decide to invest over here, the government may decide to subsidize my competitor, so I will not be able to make a profit.

So during that time, during the Depression, the investor groups or individuals stayed on the sideline. And it wasn't until the Great Escape, when the Roosevelt administration began to back off, that investors began to get into the market again. The legislation you refer to, the RSC bill, would go in the direction of what came after FDR and during what we call ''the Great Escape,'' allowing for the investor class to say I'm going to invest again. And why are they going to do so? Just because of all those great things that you listed right there. Section 179 expensing. An investor is going to say, I can start investing tomorrow. I can buy this new machine, this new factory, this new truck, or what have you, to hire new people because I can expense it today.

I will yield to the gentleman.

Mr. GINGREY of Georgia. This is without a doubt. And I'm glad you mentioned section 179. I think under current law, section 179, Mr. Speaker, of course is that section of the Internal Revenue Code which does allow a small business to expense a certain amount of capital improvement or equipment purchase in the very first year. But it's limited under current law, I believe—Mr. GARRETT, correct me if I'm wrong—to about $125,000.

We say, in the Economic Recovery and Middle Class Relief Act of 2009, the RSC stimulus package, that that ought to be expanded. And not only that, but also to immediately cut the top corporate income tax rate from 35 percent down to 25 percent. And my colleagues and my friends, that would just align us with the average rate in the European Union. We're all talking about the European Union and what they're doing on cap and trade and global warming and how we ought to get in line with that—even though it will probably break our economy at a time that we can ill afford to do so—but yet we let them rob our bank, literally, with a more attractive corporate tax rate, and we drive our corporations offshore. That makes absolutely no sense. So there are so many things that we could do with the tax code.

And I want to say one other thing before yielding back to my colleague. You know, I've heard the majority side talk about the tax portion of this stimulus bill, the $250 billion or so worth of tax incentives, and this business of refundability of a tax credit to people for their payroll taxes, people that don't even pay taxes. And the attitude is that, well, the RSC is wrong; you shouldn't cut taxes across the board because people at a higher income level—let's say $40,000, $50,000, $60,000 a year—they won't have to spend that money and they will just hold onto it and it won't get flowing in the economy, it won't stimulate the economy. But these nearly poor and poor people have no choice but to spend that money because they're desperate, they have to spend the money. They can't save it, they can't pay down their debt, they can't put it in a college fund for their child. To me, Mr. Speaker, that is insulting to these people—good, hard-working salt-of-the-earth people—who I truly believe know how to control their money and know when to spend and know when to save and know when to pay down debt and know when to tear up their credit cards. But no, we have this attitude that only uncle knows, only uncle knows and has to make the decision for us.

And I'm just afraid, Mr. Speaker—and that's why I'm opposed to this bill in its present form—I just feel that we're only going to get one shot at this. We are losing too many jobs, the economy is in a severe downturn—I think it's fair to say a deep recession—and we need to give it our best shot. And we certainly don't need to be throwing gasoline on the fire.

And so I yield back to my colleague for some additional comments and then we'll move to close.

Mr. GARRETT of New Jersey. It looks like the time is coming to a close. And it just makes me think, as someone else said earlier today, there is a culture of arrogance, I believe, in the Nation's Capitol when the thought is that the bureaucrats and the Representatives here in this House know how to spend the money better than the people back at home. There is an arrogance to think that there is elitist—whether it's here or some administrative agency—that they are somehow imbued with special qualities, that their action of spending a dollar will generate more wealth for this country than if you and I or our constituents spend a dollar.

And of course we're not really only spending a dollar, are we? We're talking about billions and trillions of dollars. And if this $5 bill was actually a $1,000 bill and I put it right here, how many would I need of those to have a million dollars? Well, I would need four inches of these stacked up here to give to you and then say that you would be a millionaire. And how many of these, if these were $1,000, would I have to have stacked up here in order to say go out tomorrow and spend a trillion dollars—which is just about what the other side wants to do? I would need to have this stack go 63 miles into the air, into the space. That's how much money we're talking about spending. And the arrogance is that we somehow think that we know how to spend it better.

How much money are we talking about here? And I will close on this. If you took all the money that Congress or that Washington ever spent on the Marshall plan to rebuild Europe and added that to all the money that this country used to buy the Louisiana Purchase some time ago, and you added that to all the money that we spent in this country to the race to the moon, and you added that to all the money that we had to spend to get us out of the savings and loan crisis, and then you added to that all the money that we spent on the Korean War, and then you added that to all the money that FDR spent on the New Deal, and then you added that to all the money that we spent on the invasion of Iraq, and finally, if you added all the money that we spent on the entire Vietnam War, all those things together would not equal what the other side of the aisle thinks that they know how to spend better than the American taxpayer. And I think the American taxpayer knows how to spend it far better.

With that, I yield back to you for closing comments.

Mr. GINGREY of Georgia. My colleague from New Jersey, I appreciate those figures. And boy, if that doesn't put it into perspective for all of us, Mr. Speaker.

Let me just say this, and then I want to recognize my colleague from Minnesota, possibly, for a minute. But at the end of our conference today, Mr. Speaker, with President Obama, our conference chairman, MIKE PENCE, the gentleman from Indiana, said to the President, one thing is for sure, you have our prayers. And you have our prayers on both sides of the aisle. We'll be praying for the administration, we'll be praying for the leadership. We'll be praying for the majority and the minority that we can do the right thing for the American people.

I see that my colleagues are leaving. So as I finish up, again, I just want to say, Mr. Speaker, that this issue is much too important for partisan politics, but it is about policy. And if we're going to be—we, the Republican minority—are going to be the loyal opposition, then it is our duty, it's our responsibility to express our concern in a respectful way to the President of the United States, to President Obama, and to Majority Leader REID in the Senate and the Speaker of the House, Ms. PELOSI, here in this great body, that we have some concerns. We want you to listen to us. We want to work with you. We want to save this economy so that we can help all the American people.

LEAVE OF ABSENCE

By unanimous consent, leave of absence was granted to:

Ms. GINNY BROWN-WAITE of Florida (at the request of Mr. BOEHNER) for today and the balance of the week on account of a family emergency.

SPECIAL ORDERS GRANTED

By unanimous consent, permission to address the House, following the legislative program and any special orders heretofore entered, was granted to:

(The following Members (at the request of Mr. BOUCHER) to revise and extend their remarks and include extraneous material:)

Ms. WOOLSEY, for 5 minutes, today.

Mr. DEFAZIO, for 5 minutes, today.

Ms. KAPTUR, for 5 minutes, today.

(The following Members (at the request of Mr. SCALISE) to revise and extend their remarks and include extraneous material:)

Mr. JONES, for 5 minutes, February 3.

Mr. POE of Texas, for 5 minutes, February 3.

Mrs. BIGGERT, for 5 minutes, January 28.

Mr. DUNCAN, for 5 minutes, today.

Ms. FOXX, for 5 minutes, today and January 28.

ADJOURNMENT

Mr. GINGREY of Georgia. Mr. Speaker, I move that the House do now adjourn.

The motion was agreed to; accordingly (at 10 o'clock and 13 minutes p.m.), the House adjourned until tomorrow, Wednesday, January 28, 2009, at 10 a.m.

EXECUTIVE COMMUNICATIONS, ETC.

Under clause 8 of rule XII, executive communications were taken from the Speaker's table and referred as follows:

270. A letter from the Chief, Congressional Review Coordinator, Department of Agriculture, transmitting the Department's final rule — Revision of the Hawaiian and Territorial Fruits and Vegetables Regulations [Docket No.: APHIS-2007-0052] (RIN: 0579-AC70) received January 21, 2009, pursuant to 5 U.S.C. 801(a)(1)(A); to the Committee on Agriculture.

271. A letter from the Assistant Secretary, Installations and Environment, Department of the Navy, transmitting notification of the decision to conduct a streamlined A-76 competition of aircraft maintenance functions being performed by one hundred nine (109) military personnel in various locations; to the Committee on Armed Services.

272. A letter from the General Counsel, Federal Housing Finance Agency, transmitting the Agency's final rule — Golden Parachute Payments (RIN: 2590-AA08) received January 22, 2009, pursuant to 5 U.S.C. 801(a)(1)(A); to the Committee on Financial Services.

273. A letter from the Secretary, Department of Health and Human Services, transmitting the Department's report entitled, ''Report to Congress on Head Start Monitoring for Fiscal Year 2007,'' pursuant to Section 641(e) of the Head Start Act; to the Committee on Education and Labor.

274. A letter from the Chief of Staff, Media Bureau, Federal Communications Commission, transmitting the Commission's final rule — In the Matter of Amendment of Section 73.622(i), Final DTV Table of Allotments, Television Broadcast Stations. (Casper, Wyoming) [MB Docket No.: 08-108 RM-11451] received January 7, 2009, pursuant to 5 U.S.C. 801(a)(1)(A); to the Committee on Energy and Commerce.

275. A letter from the Chief of Staff, Media Bureau, Federal Communications Commission, transmitting the Commission's final rule — In the Matter of Amendment of Section 73.622(i), Final DTV Table of Allotments, Television Broadcast Stations. (Kansas City, Missouri) [MB Docket No.: 08-111 RM-11454] received January 7, 2009, pursuant to 5 U.S.C. 801(a)(1)(A); to the Committee on Energy and Commerce.

276. A letter from the Chief of Staff, Media Bureau, Federal Communications Commission, transmitting the Commission's final rule — In the Matter of Amendment of Section 73.622(i), Final DTV Table of Allotments, Television Broadcast Stations. (Kearney, Nebraska) [MB Docket No.: 08-199 RM-11486] received January 7, 2009, pursuant to 5 U.S.C. 801(a)(1)(A); to the Committee on Energy and Commerce.

277. A letter from the Chief of Staff, Media Bureau, Federal Communications Commission, transmitting the Commission's final rule — In the Matter of Amendment of Section 73.622(i), Final DTV Table of Allotments, Television Broadcast Stations. (Omaha, Nebraska) [MB Docket No.: 08-115 RM-11445] received January 7, 2009, pursuant to 5 U.S.C. 801(a)(1)(A); to the Committee on Energy and Commerce.

278. A letter from the Chief of Staff, Media Bureau, Federal Communications Commission, transmitting the Commission's final rule — In the Matter of Amendment of Section 73.622(i), Final DTV Table of Allotments, Television Broadcast Stations. (Superior, Nebraska) [MB Docket No.: 08-209 RM-11496] received January 7, 2009, pursuant to 5 U.S.C. 801(a)(1)(A); to the Committee on Energy and Commerce.

279. A letter from the Chief of Staff, Media Bureau, Federal Communications Commission, transmitting the Commission's final rule — In the Matter of Amendment of Section 73.622(i), Final DTV Table of Allotments, Television Broadcast Stations. (Huntsville, Alabama) [MB Docket No.: 08-194 RM-11488] received January 7, 2009, pursuant to 5 U.S.C. 801(a)(1)(A); to the Committee on Energy and Commerce.

280. A letter from the Chief of Staff, Media Bureau, Federal Communications Commission, transmitting the Commission's final rule — In the Matter of Amendment of Section 73.622(i), Final DTV Table of Allotments, Television Broadcast Stations. (Superior, Nebraska) [MB Docket No.: 08-209 RM-11496] received January 9, 2009, pursuant to 5 U.S.C. 801(a)(1)(A); to the Committee on Energy and Commerce.

281. A letter from the Chief of Staff, Wireline Competition Bureau, Federal Communications Commission, transmitting the Commission's final rule — In the Matter of Telecommunications Relay Services and Speech-to-Speech Services for Individuals with Hearing and Speech Disabilities; E911 Requirements for IP-Enabled Service Providers [CG Docket No.: 03-123; CC Docket No.: 98-67; WC Docket No.: 05-196] received January 7, 2009, pursuant to 5 U.S.C. 801(a)(1)(A); to the Committee on Energy and Commerce.

282. A letter from the Assistant Legal Adviser for Treaty Affairs, Department of State, transmitting Copies of international agreements, other than treaties, entered into by the United States, pursuant to 1 U.S.C. 112b; to the Committee on Foreign Affairs.

283. A letter from the Acting Assistant Secretary Legislative Affairs, Department of State, transmitting a report in accordance with Section 3 of the Arms Export Control Act; to the Committee on Foreign Affairs.

284. A letter from the Attorney — DOT Office of General Counsel, Department of Transportation, transmitting the Department's final rule — Railroad Saftey Enforcement Procedures; Enforcement, Appeal and Hearing Procedures for Rail Routing Decisions [FRA-2007-28573] (RIN: 2130-AB87) received January 21, 2009, pursuant to 5 U.S.C. 801(a)(1)(A); to the Committee on Transportation and Infrastructure.

285. A letter from the Assistant Secretary of the Army (Civil Works), Department of the Army, transmitting the Department's report on a June 2008 limited reevaluation study conducted to review previous reports prepared for the Modified Water Deliveries to Everglades National Park (Mod Waters) project; (H. Doc. No. 111-11); to the Committee on Transportation and Infrastructure and ordered to be printed.

286. A letter from the Assistant Secretary of the Army (Civil Works), Department of the Army, transmitting an interim response to conduct a feasibility study to evaluate problems and opportunities associated with ecosystem restoration and protection for the New York and New Jersey Port District; (H. Doc. No. 111-12); to the Committee on Transportation and Infrastructure and ordered to be printed.

287. A letter from the Assistant Secretary of the Army (Civil Works), Department of the Army, transmitting a study on the Santa Cruz River, Paseo de las Iglesias, Pima County, Arizona, pursuant to Public Law 75-761; (H. Doc. No. 111-13); to the Committee on Transportation and Infrastructure and ordered to be printed.

288. A letter from the Director of Civil Works, Department of the Army, transmitting a study that recommends authorization of an ecosystem restoration and recreation project for an eight-mile reach of the Salt River between 19th Avenue and 83rd Avenue in Phoenix, Arizona; (H. Doc. No. 111-14); to the Committee on Transportation and Infrastructure and ordered to be printed.

289. A letter from the Assistant Secretary of the Army (Civil Works), Department of the Army, transmitting a report on the budgeting for the Island Creek Local Protection Project, Logan, West Virginia; (H. Doc. No. 111-15); to the Committee on Transportation and Infrastructure and ordered to be printed.

290. A letter from the Deputy Associate Director Energy, Science and Water, Department of the Army, transmitting a study for the ecosystem restoration and recreation for the Salt River (Va Shly'ay Akimel), Maricopa County, Arizona; (H. Doc. No. 111-16); to the Committee on Transportation and Infrastructure and ordered to be printed.

291. A letter from the Assistant Secretary of the Army (Civil Works), Department of the Army, transmitting a feasibility study to evaluate problems and opportunities for East St. Louis, Illinois; (H. Doc. No. 111-17); to the Committee on Transportation and Infrastructure and ordered to be printed.

292. A letter from the Secretary, Department of Health and Human Services, transmitting a report of the Department of Health and Human Services entitled, ''Geographic Variation in Drug Prices and Spending in the Part D Program,'' pursuant to Section 107 of the Medicare Prescription Drug, Improvement, and Modernization Act of 2003; jointly to the Committees on Energy and Commerce and Ways and Means.

REPORTS OF COMMITTEES ON PUBLIC BILLS AND RESOLUTIONS

Under clause 2 of rule XIII, reports of committees were delivered to the clerk for printing and reference to the proper calendar, as follows:

Mr. RANGEL: Committee on Ways and Means. H.R. 598. A bill to provide for a portion of the economic recovery package relating to revenue measures, unemployment, and health; with an amendment (Rept. 111–8, Pt. 1).

Ms. SLAUGHTER: Committee on Rules. House Resolution 92. Resolution providing for further consideration of the bill (H.R. 1) making supplemental appropriations for job preservation and creation, infrastructure investment, energy efficiency and science, assistance to the unemployed, and State and

local fiscal stabilization, for the fiscal year ending September 30, 2009, and for other purposes (Rept. 111–9). Referred to the House Calendar.

DISCHARGE OF COMMITTEE

Pursuant to clause 2 of rule XII the Committees on Energy and Commerce, Science and Technology, Education and Labor, and Financial Services discharged from further consideration. H.R. 598 referred to the Committee of the Whole House on the State of the Union and ordered to be printed.

PUBLIC BILLS AND RESOLUTIONS

Under clause 2 of rule XII, public bills and resolutions of the following titles were introduced and severally referred, as follows:

By Mr. RAHALL (for himself, Mr. GEORGE MILLER of California, Mr. WAXMAN, Mr. MARKEY of Massachusetts, Mr. BERMAN, Mr. GRIJALVA, Mr. COSTA, Mrs. CHRISTENSEN, Mr. HOLT, Mr. STARK, Mr. KILDEE, Mr. HINCHEY, Ms. ESHOO, Mr. BLUMENAUER, Mr. KENNEDY, Mr. KIND, Mrs. CAPPS, Mr. SCHIFF, Mr. HONDA, Mr. SALAZAR, and Ms. TSONGAS):

H.R. 699. A bill to modify the requirements applicable to locatable minerals on public domain lands, consistent with the principles of self-initiation of mining claims, and for other purposes; to the Committee on Natural Resources.

By Mr. MCNERNEY (for himself and Mrs. TAUSCHER):

H.R. 700. A bill to amend the Federal Water Pollution Control Act to extend the pilot program for alternative water source projects; to the Committee on Transportation and Infrastructure.

By Ms. FALLIN (for herself, Mr. COLE, Mr. LUCAS, Mr. BOREN, and Mr. SULLIVAN):

H.R. 701. A bill to prohibit the use of funds to transfer enemy combatants detained by the United States at Naval Station, Guantanamo Bay, Cuba, to any facility in Oklahoma, or to construct any facility for such enemy combatants in Oklahoma; to the Committee on Armed Services.

By Ms. HIRONO (for herself, Mr. GEORGE MILLER of California, Mr. CASTLE, Mr. ANDREWS, Mrs. DAVIS of California, Mr. TIERNEY, Mr. ABERCROMBIE, Mr. ACKERMAN, Mr. BERMAN, Mr. BISHOP of New York, Ms. BORDALLO, Mr. BRADY of Pennsylvania, Ms. CORRINE BROWN of Florida, Ms. CASTOR of Florida, Mr. CLEAVER, Mr. CONNOLLY of Virginia, Mr. CONYERS, Mr. CROWLEY, Ms. EDWARDS of Maryland, Mr. FARR, Mr. FATTAH, Mr. FILNER, Mr. AL GREEN of Texas, Mr. GRIJALVA, Mr. GUTIERREZ, Mr. HARE, Mr. HASTINGS of Florida, Mr. HINCHEY, Mr. HINOJOSA, Mr. HOLT, Mr. HONDA, Mr. KENNEDY, Ms. KILPATRICK of Michigan, Mr. KUCINICH, Mr. LOEBSACK, Ms. MCCOLLUM, Mr. MCNERNEY, Mrs. MALONEY, Mr. MOORE of Kansas, Mr. PALLONE, Mr. PERLMUTTER, Mr. POLIS of Colorado, Mr. PRICE of North Carolina, Mr. REYES, Mr. RUPPERSBERGER, Ms. LINDA T. SÁNCHEZ of California, Mr. SARBANES, Ms. SCHAKOWSKY, Ms. SCHWARTZ, Ms. SHEA-PORTER, Mr. STARK, Ms. SUTTON, Mr. VAN HOLLEN, Mr. WELCH, Ms. WOOLSEY, Mr. WU, and Mr. YARMUTH):

H.R. 702. A bill to amend the Elementary and Secondary Education Act of 1965 to improve early education; to the Committee on Education and Labor.

By Mr. FRANK of Massachusetts:

H.R. 703. A bill to promote bank liquidity and lending through deposit insurance, the HOPE for Homeowners Program, and other enhancements; to the Committee on Financial Services.

By Mr. KING of New York (for himself and Mr. BILIRAKIS):

H.R. 704. A bill to provide for free mailing privileges for personal correspondence and parcels sent to members of the Armed Forces serving on active duty in Iraq or Afghanistan; to the Committee on Armed Services.

By Mr. EHLERS (for himself, Mr. REYES, Mr. GALLEGLY, Ms. RICHARDSON, Mr. HOLT, Mr. MCGOVERN, Mr. GORDON of Tennessee, Ms. HIRONO, Ms. ROS-LEHTINEN, Mr. OLSON, Mr. CARNAHAN, and Mr. LIPINSKI):

H.R. 705. A bill to amend the Internal Revenue Code of 1986 to encourage teachers to pursue teaching science, technology, engineering, and math subjects at elementary and secondary schools; to the Committee on Ways and Means.

By Mr. COHEN (for himself, Ms. NORTON, and Mr. MARIO DIAZ-BALART of Florida):

H.R. 706. A bill to amend the Robert T. Stafford Disaster Relief and Emergency Assistance Act to direct the Administrator of the Federal Emergency Management Agency to continue to administer the National Urban Search and Rescue Response System, and for other purposes; to the Committee on Transportation and Infrastructure.

By Ms. CASTOR of Florida (for herself, Mr. ABERCROMBIE, Mr. BARROW, Mr. BILIRAKIS, Mr. BISHOP of Georgia, Mrs. BONO MACK, Mr. BOOZMAN, Ms. BORDALLO, Mr. BOSWELL, Ms. CORRINE BROWN of Florida, Ms. GINNY BROWN-WAITE of Florida, Mr. BUCHANAN, Mr. BURTON of Indiana, Mr. BUTTERFIELD, Mr. CARTER, Mr. CHANDLER, Mr. CHILDERS, Ms. CLARKE, Mr. CLAY, Mr. COHEN, Mr. CONYERS, Mr. COURTNEY, Mr. CROWLEY, Mr. CUMMINGS, Mr. DEFAZIO, Mr. DELAHUNT, Mr. EDWARDS of Texas, Mr. ELLISON, Mr. FARR, Mr. FILNER, Mr. FOSTER, Mr. FRANK of Massachusetts, Mr. FRANKS of Arizona, Mr. GONZALEZ, Mr. GORDON of Tennessee, Mr. GRAYSON, Mr. HASTINGS of Florida, Mr. HINCHEY, Mr. HOLDEN, Mr. HOLT, Mr. HONDA, Mr. ISRAEL, Ms. JACKSON-LEE of Texas, Mr. JOHNSON of Georgia, Mr. KAGEN, Mr. KENNEDY, Mr. KILDEE, Mr. KIND, Mrs. KIRKPATRICK of Arizona, Mr. KISSELL, Mr. KLEIN of Florida, Ms. KOSMAS, Mr. LANGEVIN, Mr. LATOURETTE, Ms. LEE of California, Mr. LUJAN, Mr. MASSA, Ms. MATSUI, Mr. MCDERMOTT, Mr. MCMAHON, Mr. MEEK of Florida, Ms. MOORE of Wisconsin, Mr. MOORE of Kansas, Mr. MORAN of Virginia, Mr. PATRICK J. MURPHY of Pennsylvania, Mr. PETRI, Mr. PIERLUISI, Mr. PUTNAM, Mr. RODRIGUEZ, Mr. ROGERS of Alabama, Mr. ROSS, Mr. ROTHMAN of New Jersey, Mr. RUPPERSBERGER, Mr. RYAN of Ohio, Mr. SABLAN, Mr. SCHIFF, Mrs. SCHMIDT, Mr. SESTAK, Mr. SHUSTER, Mr. TANNER, Mrs. TAUSCHER, Mr. TERRY, Mr. THOMPSON of Mississippi, Mr. TIERNEY, Mr. TONKO, Ms. WOOLSEY, Mr. SCHRADER, Mr. DOYLE, Ms. KAPTUR, Ms. SCHWARTZ, Ms. SUTTON, Mr. PLATTS, Mr. MINNICK, Mr. TAYLOR, Mr. BOCCIERI, Ms. PINGREE of Maine, Mr. SCHAUER, Mr. HALL of New York, Mr. BERRY, Mr. CLEAVER, Mr. GUTIERREZ, Mr. HINOJOSA, Mr. BISHOP of New York, Mr. CARNAHAN, and Mr. ARCURI):

H.R. 707. A bill to provide monthly vouchers to members of the Armed Forces serving in overseas operations, or hospitalized due to a disease or injury incurred as a result of service in such operations, that a member may transfer to another person to permit the person to mail, without charge, correspondence and small parcels to members of the Armed Forces; to the Committee on Armed Services.

By Mr. SMITH of New Jersey (for himself, Mr. SENSENBRENNER, Mr. STUPAK, and Ms. ROS-LEHTINEN):

H.R. 708. A bill to restrict assistance to foreign organizations that perform or actively promote abortions; to the Committee on Foreign Affairs.

By Mr. ABERCROMBIE (for himself, Ms. HIRONO, Mr. FRANK of Massachusetts, and Ms. WATERS):

H.R. 709. A bill to reauthorize the programs of the Department of Housing and Urban Development for housing assistance for Native Hawaiians; to the Committee on Financial Services.

By Mr. ACKERMAN:

H.R. 710. A bill to secure additional Tier I capital for the United States banking system from parties other than the Federal Government by providing authority to the Secretary of the Treasury to guaranty certain new preferred stock investments made by public pensions acting in a collective fashion, and for other purposes; to the Committee on Financial Services, and in addition to the Committee on Ways and Means, for a period to be subsequently determined by the Speaker, in each case for consideration of such provisions as fall within the jurisdiction of the committee concerned.

By Mr. CAPUANO (for himself and Mr. CASTLE):

H.R. 711. A bill to amend the Investment Advisers Act of 1940 to remove the registration exception for certain investment advisors with less than 15 clients; to the Committee on Financial Services.

By Mr. CASTLE:

H.R. 712. A bill to amend title I of the Employee Retirement Income Security Act of 1974 to require in the annual report of each defined benefit pension plan disclosure of plan investments in hedge funds; to the Committee on Education and Labor.

By Mr. CASTLE:

H.R. 713. A bill to require the President's Working Group on Financial Markets to conduct a study on the hedge fund industry; to the Committee on Financial Services.

By Mrs. CHRISTENSEN:

H.R. 714. A bill to authorize the Secretary of the Interior to lease certain lands in Virgin Islands National Park, and for other purposes; to the Committee on Natural Resources.

By Mr. GRIJALVA:

H.R. 715. A bill to expand the boundary of Saguaro National Park, to study additional land for future adjustments to the boundary of the Park, and for other purposes; to the Committee on Natural Resources.

By Mr. ISRAEL (for himself, Mrs. MYRICK, and Mrs. CAPPS):

H.R. 716. A bill to amend the Public Health Service Act, the Employee Retirement Income Security Act of 1974, and the Internal Revenue Code of 1986 to require group and individual health insurance coverage and group health plans to provide coverage for individuals participating in approved cancer clinical trials; to the Committee on Energy and Commerce, and in addition to the Committees on Education and Labor, and Ways and Means, for a period to be subsequently determined by the Speaker, in each case for consideration of such provisions as fall within the jurisdiction of the committee concerned.

By Ms. EDDIE BERNICE JOHNSON of Texas (for herself and Mr. MCGOVERN):

H.R. 717. A bill to amend the Internal Revenue Code of 1986 to provide incentives to improve America's research competitiveness, and for other purposes; to the Committee on Ways and Means.

By Mr. JONES:

H.R. 718. A bill to reinstate the Interim Management Strategy governing off-road vehicle use in the Cape Hatteras National Seashore, North Carolina, pending the issuance of a final rule for off-road vehicle use by the National Park Service; to the Committee on Natural Resources, and in addition to the Committee on the Judiciary, for a period to be subsequently determined by the Speaker, in each case for consideration of such provisions as fall within the jurisdiction of the committee concerned.

By Mr. LEE of New York:

H.R. 719. A bill to amend the Internal Revenue Code of 1986 to extend relief from the alternative minimum tax; to the Committee on Ways and Means.

By Mr. LEE of New York:

H.R. 720. A bill to allow seniors to file their Federal income tax on a new Form 1040S; to the Committee on Ways and Means.

By Mr. MEEK of Florida (for himself and Mr. BRADY of Texas):

H.R. 721. A bill to amend the Internal Revenue Code of 1986 to modify the exception from the 10 percent penalty for early withdrawals from governmental plans for qualified public safety employees; to the Committee on Ways and Means.

By Mr. MORAN of Virginia (for himself and Mr. YOUNG of Florida):

H.R. 722. A bill to amend title XIX of the Social Security Act to provide an option of States to cover a children's program of all-inclusive coordinated care (ChiPACC) under the Medicaid Program; to the Committee on Energy and Commerce.

By Mr. NEAL of Massachusetts:

H.R. 723. A bill to amend the Social Security Act to eliminate the 5-month waiting period for Social Security disability and the 24-month waiting period for Medicare benefits in the cases of individuals with disabling burn injuries; to the Committee on Ways and Means.

By Mr. PASTOR of Arizona:

H.R. 724. A bill to amend the Public Health Service Act to authorize grants to increase the number of qualified nursing faculty, and for other purposes; to the Committee on Energy and Commerce.

By Mr. PASTOR of Arizona:

H.R. 725. A bill to protect Indian arts and crafts through the improvement of applicable criminal proceedings, and for other purposes; to the Committee on Natural Resources, and in addition to the Committee on the Judiciary, for a period to be subsequently determined by the Speaker, in each case for consideration of such provisions as fall within the jurisdiction of the committee concerned.

By Mr. PETRI (for himself and Mr. KANJORSKI):

H.R. 726. A bill to amend the Internal Revenue Code of 1986 to provide a credit and a deduction for small political contributions; to the Committee on Ways and Means.

By Mr. POMEROY (for himself and Ms. HERSETH SANDLIN):

H.R. 727. A bill to provide for the issuance of bonds to provide funding for the construction of schools of the Bureau of Indian Affairs, and for other purposes; to the Committee on Ways and Means, and in addition to the Committees on Education and Labor, and Natural Resources, for a period to be subsequently determined by the Speaker, in each case for consideration of such provisions as fall within the jurisdiction of the committee concerned.

By Mr. PUTNAM (for himself and Ms. GINNY BROWN-WAITE of Florida):

H.R. 728. A bill to allow seniors to file their Federal income tax on a new Form 1040S; to the Committee on Ways and Means.

By Mr. ROTHMAN of New Jersey:

H.R. 729. A bill to help keep students safe on school-run, overnight, off-premises field trips; to the Committee on Education and Labor.

By Mr. SCHIFF (for himself, Mr. MCCAUL, and Mr. ISRAEL):

H.R. 730. A bill to strengthen efforts in the Department of Homeland Security to develop nuclear forensics capabilities to permit attribution of the source of nuclear material, and for other purposes; to the Committee on Homeland Security, and in addition to the Committee on Foreign Affairs, for a period to be subsequently determined by the Speaker, in each case for consideration of such provisions as fall within the jurisdiction of the committee concerned.

By Mr. SHADEGG (for himself, Mr. HALL of New York, Mr. BRADY of Pennsylvania, Mr. CHILDERS, Mr. BACHUS, Mr. HELLER, and Mr. LATTA):

H.R. 731. A bill to amend title 38, United States Code, to exclude individuals who have been convicted of committing certain sex offenses from receiving certain burial-related benefits and funeral honors which are otherwise available to certain veterans, members of the Armed Forces, and related individuals, and for other purposes; to the Committee on Veterans' Affairs.

By Mr. WEINER:

H.R. 732. A bill to authorize the grant program under which the Secretary of Homeland Security makes discretionary grants for use in high-threat, high-density urban areas, and for other purposes; to the Committee on Homeland Security.

By Mr. MCGOVERN:

H. Con. Res. 26. Concurrent resolution providing for an adjournment of the House; considered and agreed to.

By Mr. JACKSON of Illinois:

H. Con. Res. 27. Concurrent resolution authorizing the use of the rotunda of the Capitol for a ceremony in honor of the bicentennial of the birth of President Abraham Lincoln; to the Committee on House Administration.

By Ms. HARMAN (for herself and Mr. TURNER):

H. Con. Res. 28. Concurrent resolution expressing the sense of the Congress regarding sexual assaults and rape in the military; to the Committee on Armed Services.

By Mr. EHLERS:

H. Res. 91. A resolution honoring the life and service of Dr. William Spoelhof, president emeritus of Calvin College in Grand Rapids, Michigan; to the Committee on Education and Labor.

By Mr. BACA (for himself, Mr. LEWIS of California, Mr. CALVERT, Mr. FILNER, Mr. ISSA, Mrs. BONO MACK, and Mr. DREIER):

H. Res. 93. A resolution honoring the Armed Forces from the Inland Empire in California and their families for their extraordinary sacrifices serving the United States in Operation Enduring Freedom and Operation Iraqi Freedom; to the Committee on Armed Services.

By Mr. HALL of New York (for himself, Mr. WELCH, Ms. KAPTUR, Mr. ARCURI, Mr. HIGGINS, Mr. ROTHMAN of New Jersey, Mr. BURTON of Indiana, Ms. HIRONO, Ms. LINDA T. SÁNCHEZ of California, Ms. BALDWIN, and Ms. LORETTA SANCHEZ of California):

H. Res. 94. A resolution urging the Secretary of the Treasury to take certain actions under the Emergency Economic Stabilization Act of 2008 to protect the interests of the taxpayer, and for other purposes; to the Committee on Financial Services.

By Mr. SIRES (for himself, Mr. TOWNS, Ms. HIRONO, Mr. MCGOVERN, Ms. KILPATRICK of Michigan, Mr. BACA, Ms. WASSERMAN SCHULTZ, Mr. PASTOR of Arizona, Mr. PASCRELL, Mr. SHULER, Mr. ELLSWORTH, Mr. ELLISON, Ms. HERSETH SANDLIN, Mr. CARDOZA, Mrs. DAHLKEMPER, Mr. DOGGETT, Mr. BRADY of Pennsylvania, Mr. HIGGINS, Mr. ALTMIRE, Mr. CLAY, Mr. CLEAVER, Mr. HARE, Ms. VELÁZQUEZ, Mr. COSTA, Mr. ANDREWS, Mr. CARSON of Indiana, Mr. SESTAK, Mr. FARR, Mrs. CAPPS, Mr. MCKEON, Mr. HALL of New York, Mr. GENE GREEN of Texas, Mr. SALAZAR, Mr. HOLT, Mr. GONZALEZ, Mr. RODRIGUEZ, Mr. ARCURI, Mr. PATRICK J. MURPHY of Pennsylvania, Ms. BALDWIN, Mr. TEAGUE, Mr. WELCH, Mr. BRALEY of Iowa, Mr. REYES, Mr. RYAN of Ohio, Mr. ORTIZ, Mr. GRIJALVA, Mr. WILSON of Ohio, Mr. HINOJOSA, Mrs. NAPOLITANO, Mr. YARMUTH, Mr. DAVIS of Tennessee, and Mr. KENNEDY):

H. Res. 95. A resolution supporting the goals and ideals of ''National Girls and Women in Sports Day''; to the Committee on Oversight and Government Reform.

MEMORIALS

Under clause 3 of rule XII,

2. The SPEAKER presented a memorial of the Senate of the State of Michigan, relative to Senate Resolution No. 232 memorializing the Congress of the United States to assist Michigan in rebuilding the state's economy; to the Committee on Education and Labor.

PRIVATE BILLS AND RESOLUTIONS

Under clause 3 of rule XII,

Mrs. NAPOLITANO introduced a bill (H.R. 733) for the relief of Jayantibhai Desai and Indiraben Patel; which was referred to the Committee on the Judiciary.

ADDITIONAL SPONSORS

Under clause 7 of rule XII, sponsors were added to public bills and resolutions as follows:

H.R. 25: Mr. POSEY and Mr. MILLER of Florida.

H.R. 31: Mr. SESTAK, Mr. ANDREWS, Mr. BERMAN, Mr. BLUMENAUER, Mr. BOYD, Mrs. CAPPS, Mr. COOPER, Mr. HARE, Ms. HARMAN, Mr. HINCHEY, Mr. ISRAEL, Mr. MICHAUD, Mr. OBERSTAR, Mr. ORTIZ, Mrs. TAUSCHER, Ms. WOOLSEY, Ms. LEE of California, Mrs. CAPITO, Mr. SNYDER, Mr. COHEN, and Mr. BAIRD.

H.R. 80: Mr. NADLER of New York, Ms. EDDIE BERNICE JOHNSON of Texas, Mr. LANCE, Mr. STARK, and Mr. PALLONE.

H.R. 85: Mr. OLSON, Mr. MCHUGH, and Mr. NYE.

H.R. 106: Mr. HINOJOSA, Mr. BUTTERFIELD, Mr. FILNER, and Mr. LEWIS of Georgia.

H.R. 147: Mr. TIM MURPHY of Pennsylvania, and Mr. CARNAHAN.

H.R. 153: Mr. YOUNG of Alaska.

H.R. 154: Mr. YOUNG of Alaska.

H.R. 155: Mr. KLINE of Minnesota, Mr. ROGERS of Kentucky, Mr. KING of New York, and Mr. YOUNG of Alaska.

H.R. 156: Mr. OLSON, Mr. SCHAUER, and Mr. KLINE of Minnesota.

H.R. 159: Mr. BROWN of South Carolina, Mr. MCHUGH, Mr. CONNOLLY of Virginia, Mr. MASSA, and Mr. SARBANES.

H.R. 175: Mr. FILNER.
H.R. 179: Mr. BRADY of Pennsylvania and Mr. RYAN of Ohio.
H.R. 181: Mr. MCHUGH and Mr. GONZALEZ.
H.R. 200: Mr. KUCINICH.
H.R. 234: Ms. TITUS and Mr. HELLER.
H.R. 235: Mr. BISHOP of New York, Ms. GINNY BROWN-WAITE of Florida, Ms. ESHOO, Mr. SOUDER, Mr. OBERSTAR, Mrs. SCHMIDT, Mr. ROYCE, Mr. DEAL of Georgia, Mr. SERRANO, Mr. MANZULLO, Mr. KING of New York, Mr. GUTHRIE, Mrs. BONO MACK, and Mr. MORAN of Virginia.
H.R. 240: Mr. SOUDER, Mr. OLSON, and Mr. TERRY.
H.R. 254: Mr. HOLT.
H.R. 294: Mr. LATTA.
H.R. 301: Mrs. MYRICK, Mr. BARRETT of South Carolina, Mr. SMITH of Nebraska, and Mr. MANZULLO.
H.R. 333: Mr. RAHALL, Mr. SCOTT of Georgia, Mr. GONZALEZ, Mr. ABERCROMBIE, and Mr. NYE.
H.R. 347: Mr. WEINER, Mr. BERMAN, Mr. DELAHUNT, Ms. JACKSON-LEE of Texas, Mr. CULBERSON, Mr. WAXMAN, Mr. ROTHMAN of New Jersey, Mr. MCNERNEY, Mr. HOLT, Mr. COURTNEY, Ms. SUTTON, Mr. HARE, Mr. HASTINGS of Florida, Ms. WASSERMAN SCHULTZ, Mr. MILLER of North Carolina, Mr. FILNER, Ms. EDWARDS of Maryland, Ms. MOORE of Wisconsin, Ms. ESHOO, Mr. OLVER, Mr. BRALEY of Iowa, Mr. MORAN of Virginia, Ms. HIRONO, Mr. SPRATT, Mr. DICKS, Mr. MOORE of Kansas, Mr. ISRAEL, Mrs. TAUSCHER, Mr. FLAKE, Mr. KILDEE, Mr. BUTTERFIELD, Mr. BRADY of Texas, Mr. GONZALEZ, Mr. SMITH of Texas, and Mr. GUTIERREZ.
H.R. 361: Mr. NYE.
H.R. 367: Mr. MCINTYRE.
H.R. 377: Mr. WESTMORELAND.
H.R. 378: Mr. WESTMORELAND.
H.R. 379: Mr. PITTS, Mrs. MYRICK, Mr. WITTMAN, and Mr. GALLEGLY.
H.R. 381: Mr. WESTMORELAND.
H.R. 391: Mr. SHADEGG.
H.R. 392: Mr. LATTA, Mr. NEUGEBAUER, Mr. CRENSHAW, Mr. BARTLETT, and Mrs. MYRICK.
H.R. 424: Mr. SMITH of New Jersey, Mr. LINDER, Mrs. MYRICK, Mr. BURTON of Indiana, and Mr. KIRK.
H.R. 426: Mr. RADANOVICH, Mr. CARNEY, Mr. CONNOLLY of Virginia, and Mr. NUNES.
H.R. 460: Ms. SCHAKOWSKY, Mr. YOUNG of Alaska, Mr. SARBANES, Mr. HONDA, and Mr. GORDON of Tennessee.
H.R. 463: Mr. CARSON of Indiana, Mr. COOPER, Mr. JOHNSON of Georgia, Mr. KLEIN of Florida, Mr. MARKEY of Massachusetts, Mr. MASSA, Mr. MILLER of North Carolina, and Mr. TIERNEY.
H.R. 470: Mr. BARRETT of South Carolina, Mr. BROWN of South Carolina, Mr. ROONEY, and Mr. SHADEGG.
H.R. 471: Mr. FORTENBERRY, Mr. SOUDER, Mr. WILSON of Ohio, Ms. SUTTON, Ms. KAPTUR, Mr. JONES, Mr. BRADY of Pennsylvania, and Mr. KILDEE.
H.R. 490: Mr. LANGEVIN.
H.R. 498: Mr. NYE.
H.R. 502: Mr. LAMBORN.
H.R. 503: Mr. ROONEY, Mr. BERMAN, Mr. DICKS, Mr. AL GREEN of Texas, Mr. PETERS, and Mrs. LOWEY.
H.R. 510: Mr. BOUSTANY.
H.R. 515: Ms. DEGETTE, Mr. ROSS, Mr. MURPHY of Connecticut, Ms. SLAUGHTER, and Ms. MATSUI.
H.R. 527: Ms. EDDIE BERNICE JOHNSON of Texas, Mr. HONDA, and Mr. THOMPSON of California.
H.R. 536: Mr. FILNER, Mr. NYE, and Mr. SOUDER.
H.R. 537: Mr. SIRES and Ms. GINNY BROWN-WAITE of Florida.
H.R. 538: Mr. FILNER.
H.R. 578: Mr. STARK.
H.R. 593: Mr. CUMMINGS.
H.R. 610: Mr. DAVIS of Alabama, Ms. KILPATRICK of Michigan, Mr. ROTHMAN of New Jersey, Ms. SCHAKOWSKY, Mr. COHEN, and Ms. HIRONO.
H.R. 614: Mr. SHADEGG, Mr. LUETKEMEYER, Mr. SHIMKUS, Mr. ADERHOLT, Mr. RADANOVICH, Mr. ALEXANDER, Mr. DUNCAN, and Mr. WAMP.
H.R. 620: Mr. MANZULLO.
H.R. 621: Mrs. BIGGERT, Ms. KAPTUR, and Mr. ELLISON.
H.R. 634: Mr. LINCOLN DIAZ-BALART of Florida, Mr. SMITH of Nebraska, Mr. SOUDER, Mr. KING of Iowa, and Mr. WAMP.
H.R. 658: Mr. DINGELL, Mr. HINCHEY, Mr. BISHOP of New York, Mr. HOLT, Mr. LOBIONDO, and Mr. WILSON of Ohio.
H. J. Res. 11: Mr. MCINTYRE and Mr. ROGERS of Kentucky.
H. J. Res. 16: Mr. POSEY.
H. J. Res. 18: Mr. PALLONE, Mrs. MALONEY, and Mr. NADLER of New York.
H. Res. 18: Mr. LARSON of Connecticut and Mr. MURPHY of Connecticut.
H. Res. 22: Mr. FRANK of Massachusetts.
H. Res. 36: Mr. FILNER, Ms. KILPATRICK of Michigan, Mr. HIGGINS, Mr. LARSON of Connecticut Mr. GORDON of Tennessee, and Mr. BISHOP of Georgia.
H. Res. 60: Mr. MILLER of Florida, Mr. KLINE of Minnesota, Mr. CARTER, Mr. HENSARLING, Mr. NEUGEBAUER, Mr. SAM JOHNSON of Texas, Ms. GRANGER, Mr. BARTON of Texas, Mr. SMITH of Nebraska, Mr. GINGREY of Georgia, Mr. WAMP, Mr. DUNCAN, Mr. BROWN of South Carolina, Mr. BLUNT, Mr. CONAWAY, Ms. ROS-LEHTINEN, Mrs. CAPITO, Mr. LATTA, Mr. POE of Texas, Mr. BILIRAKIS, Mr. BUCHANAN, Mr. LINCOLN DIAZ-BALART of Florida, Mr. PETRI, Mr. MANZULLO, and Mr. DANIEL E. LUNGREN of California.
H. Res. 70: Mrs. BACHMANN.
H. Res. 75: Ms. WOOLSEY, Ms. SPEIER, Mr. STARK, Mr. HONDA, Ms. ZOE LOFGREN of California, Mr. COSTA, Mr. SCHIFF, Mr. BECERRA, Ms. SOLIS of California, Ms. WATSON, Ms. ROYBAL-ALLARD, Ms. WATERS, Ms. HARMAN, Ms. RICHARDSON, Mrs. NAPOLITANO, Mr. BACA, Mrs. DAVIS of California, Mr. LATOURETTE, Mr. HIGGINS, Mr. ARCURI, Mr. BISHOP of New York, Mr. WEINER, Mr. CHILDERS, Mr. EHLERS, Mr. WILSON of Ohio, Mr. ALTMIRE, and Mr. BOUSTANY.
H. Res. 77: Mr. WOLF.

AMENDMENTS

Under clause 8 of rule XVIII, proposed amendments were submitted as follows:

H.R. 1

OFFERED BY: MS. JACKSON-LEE OF TEXAS

AMENDMENT NO. 2: At the appropriate place in the bill, insert the following:

LAND AND WATER CONSERVATION FUND STATE ASSISTANCE

For construction, improvements, repair, or replacement of facilities related to the revitalization of state and local parks and recreation facilities, $125,000,000 is made available under the Land and Water Conservation Act Stateside Assistance Program, as amended (16 U.S.C. 4601(4)–(11)), except that such funds shall not be subject to the matching requirements in section 4601–89(c) of that Act:

URBAN PARKS (UPARR)

For construction, improvements, repair, or replacement of facilities related to the revitalization of urban parks and recreation facilities, $100,000,000 is made available under the Urban Park and Recreation Recovery Act of 1978 13 (16 U.S.C. 2501 et seq.), except that such funds shall not be subject to the matching requirements in section 2505 (a) of the Act: Provided, That the amount set aside from this appropriation pursuant to section 1106 of this Act shall be not more than 5 percent instead of the percentage specified in such section and such funds are to remain available until expended: Provided further, That notwithstanding section 2504 of the UPARR Act of 1978 (P.L. 95–625), any local government within a Bureau of the Census defined metropolitan statistical area may apply for assistance under the UPARR program. Cities and counties meeting this criterion, but not among the originally designated eligible units of government, would have to include the required distress factors as part of their applications for funding.

H.R. 1

OFFERED BY: MS. JACKSON-LEE OF TEXAS

AMENDMENT NO. 3: At the appropriate place in title VIII of the bill, insert the following:

Provided further, That no funds shall be precluded from being dispensed for use for the restoration, creation, or maintenance of local and community parks.

H.R. 1

OFFERED BY: MS. JACKSON-LEE OF TEXAS

AMENDMENT NO. 4: Page 175, strike lines 1 through 8.

Page 647, after line 12, insert the following new section and make the necessary conforming change in the table of contents:

SEC. 7008. SPECIAL RULE ON CONTRACTING.

Each local agency receiving a grant or money under this Act shall ensure that, if the agency carries out modernization, renovation, or repair through a contract, the process for any such contract ensures the maximum number of qualified bidders, including local, small, minority, women- and veteran-owned businesses, through full and open competition.

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Congressional Record

PROCEEDINGS AND DEBATES OF THE 111th CONGRESS, FIRST SESSION

Vol. 155 WASHINGTON, TUESDAY, JANUARY 27, 2009 No. 16

Senate

The Senate met at 10 a.m. and was called to order by the Honorable JEANNE SHAHEEN, a Senator from the State of New Hampshire.

PRAYER

The Chaplain, Dr. Barry C. Black, offered the following prayer:

Let us pray.

Eternal God, our helper and friend, guide our Senators this day. Help them to walk the way of surrender to Your will, guided by Your wisdom. Refresh them with Your spirit to quicken their thinking and reinforce their judgment. Show them the spiritual foundations of our heritage that they may conserve and protect them. Draw them close to You and to one another in humility and service. And, Lord, spare them from arrogating to themselves the judgments which belong to You alone.

We pray in Your wonderful Name. Amen.

PLEDGE OF ALLEGIANCE

The Honorable JEANNE SHAHEEN led the Pledge of Allegiance, as follows:

I pledge allegiance to the Flag of the United States of America, and to the Republic for which it stands, one nation under God, indivisible, with liberty and justice for all.

APPOINTMENT OF ACTING PRESIDENT PRO TEMPORE

The PRESIDING OFFICER. The clerk will please read a communication to the Senate from the President pro tempore (Mr. BYRD).

The legislative clerk read the following letter:

U.S. SENATE,
PRESIDENT PRO TEMPORE,
Washington, DC, January 27, 2009.

To the Senate:

Under the provisions of rule I, paragraph 3, of the Standing Rules of the Senate, I hereby appoint the Honorable JEANNE SHAHEEN, a Senator from the State of New Hampshire, to perform the duties of the Chair.

ROBERT C. BYRD,
President pro tempore.

Mrs. SHAHEEN thereupon assumed the chair as Acting President pro tempore.

RECOGNITION OF THE MAJORITY LEADER

The ACTING PRESIDENT pro tempore. The majority leader is recognized.

SCHEDULE

Mr. REID. Madam President, following leader remarks, the Senate will resume consideration of the Children's Health Insurance Program. At about 12:30 p.m. today, KIRSTEN GILLIBRAND will take the oath of office to become a Senator representing the State of New York. Following the swearing in of that Senator, the Senate will recess until 2:15 p.m. to allow for the weekly caucus luncheons to meet.

This week, we are going to legislate. There will be no morning business. We want to have all the time that is necessary to work on this important legislation dealing with children's health. I hope people will be ready to offer amendments. We have worked with staff on the Republican side of the aisle, and we have it set up that we have three amendments that will be laid down very quickly. By that time, we should be able to even schedule some votes for this afternoon.

I want to make sure everyone has the opportunity to offer any amendment they want to offer. What we are going to try to do is not have a bunch of them stacked up. I think that can sometimes be very troublesome. But we will work, as we proceed through the legislation, as to what amendments need to be pending. We are here to legislate. We hope that if people have concerns about this important legislation and they think it can be made better by taking something out or putting something in, that is what they should do. We want everyone, when they offer their amendments, to have ample time to debate them, as we did with the first piece of legislation we dealt with, the Lilly Ledbetter legislation. After there has been ample time for debate, there can be motions to table. There are some Senators who may, for various reasons, agree to have up-or-down votes. We are here to legislate.

This morning is a little difficult because we have the Finance Committee meeting to complete their work on the recovery package. There are 200 amendments that have been filed in the committee, and they have to work their way through those amendments. That should take the better part of the day, at least many hours. It is estimated from 4 to 8 hours to complete the markup.

The Appropriations Committee markup is at 10:30 a.m. also. There are people from the Finance Committee who will be coming here on a rotating hour-by-hour basis so there will be floor coverage. So there is no reason not to be able to legislate and talk about this legislation in any way Senators feel is appropriate. Rollcall votes are expected to occur throughout the day. There will not be any votes before we complete our caucus luncheons.

RECOGNITION OF THE MINORITY LEADER

The ACTING PRESIDENT pro tempore. The Republican leader is recognized.

ORDER OF BUSINESS

Mr. MCCONNELL. Madam President, are we now on the bill?

The ACTING PRESIDENT pro tempore. The bill has not yet been laid down.

Mr. MCCONNELL. Can I suggest we go to the bill? I was going to lay down an amendment, consistent with the majority leader's suggestion that we get started.

● This "bullet" symbol identifies statements or insertions which are not spoken by a Member of the Senate on the floor.

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RESERVATION OF LEADER TIME

The ACTING PRESIDENT pro tempore. Under the previous order, the leadership time is reserved.

CHILDREN'S HEALTH INSURANCE PROGRAM REAUTHORIZATION ACT OF 2009

The ACTING PRESIDENT pro tempore. Under the previous order, the Senate shall resume consideration of H.R. 2, which the clerk will report.

The legislative clerk read as follows:

A bill (H.R. 2) to amend title XXI of the Social Security Act to extend and improve the Children's Health Insurance Program, and for other purposes.

The ACTING PRESIDENT pro tempore. The majority leader.

AMENDMENT NO. 39

(Purpose: In the nature of a substitute)

Mr. REID. Madam President, there is an amendment at the desk that I wish the clerk to report.

The ACTING PRESIDENT pro tempore. The clerk will report.

The legislative clerk read as follows:

The Senator from Nevada [Mr. REID], for Mr. BAUCUS, proposes an amendment numbered 39.

Mr. REID. Madam President, I ask unanimous consent that the reading of the amendment be dispensed with.

The ACTING PRESIDENT pro tempore. Without objection, it is so ordered.

(The amendment is printed in today's RECORD under ''Text of Amendments.'')

The ACTING PRESIDENT pro tempore. The Republican leader.

AMENDMENT NO. 40 TO AMENDMENT NO. 39

(Purpose: In the nature of a substitute)

Mr. MCCONNELL. Madam President, I support the State Children's Health Insurance Program. I think virtually every Member of the Senate does. I voted to create the program and believe we need to responsibly reauthorize it.

In its original form, the State Children's Health Insurance Program was meant to provide insurance to children from families who earn too much to qualify for Medicaid but not enough to afford private insurance.

There is no doubt, as I indicated earlier, we all support providing insurance to low-income children. I am sure that is 100 Members of the Senate. In fact, this program originally passed on a broad bipartisan basis with 43 Republicans and 42 Democrats supporting it. It was enacted by a Republican Congress, signed by a Democratic President, and was a model of bipartisanship. Two of my colleagues, Senator GRASSLEY and Senator HATCH, reached across the aisle to craft a bipartisan compromise in the last Congress. Unfortunately, our Democratic colleagues have gone back on many of the prior agreements that were reached in creating that bill last year, making this issue more contentious than it ought to be and setting a troubling precedent for future discussions on health care reform.

The original purpose of the State Children's Health Insurance Program was to serve low-income, uninsured children. The bill we are being asked to consider sanctions a loophole that allows a few select States, such as New York, to provide insurance to children and families earning more than $80,000 a year—$80,000 a year—instead of insuring low-income children first. This is more than double the median household income in many States, including my State of Kentucky. It is grossly unfair that a family in Kentucky making $40,000 must pay for the health insurance of a family making double that, especially if the Kentuckian cannot afford it for his own family.

The bill before the Senate is not limited to children either. It preserves loopholes that allow adults to enroll in a program that is intended for children.

Earlier estimates of similar legislation found that nearly half of the new children added by this bill already have private health insurance. Let me say that again. Earlier estimates of similar legislation found that nearly half of the new children added by this bill already have private health insurance. Republicans, on the other hand, believe we ought to target scarce resources to uninsured children, not those who already have coverage.

Republicans will offer amendments to fix the shortcomings of this bill and to provide a responsible alternative that will return SCHIP to its intended purpose: serving the kids in struggling families who need the help most. That is whom we ought to be helping.

Our bill, the Kids First Act, will provide funding increases to State SCHIP programs and help them find those eligible children who are not yet enrolled, and our Kids First idea is better because it closes the loophole that allows some States to extend their program to higher income families, even while they have thousands of lower income children who still are not covered. The Kids First Act truly puts kids first, eliminating nearly all adults from a program designed for children so that more children can be covered. Finally, by responsibly allocating scarce resources, our bill increases funding for SCHIP without raising new taxes. We believe Republicans have a better alternative.

Madam President, I now send that alternative to the desk.

The ACTING PRESIDENT pro tempore. The clerk will report.

The legislative clerk read as follows:

The Senator from Kentucky [Mr. MCCONNELL] proposes an amendment numbered 40 to amendment No. 39.

Mr. MCCONNELL. Madam President, I ask unanimous consent that the reading of the amendment be dispensed with.

The ACTING PRESIDENT pro tempore. Without objection, it is so ordered.

(The amendment is printed in today's RECORD under ''Text of Amendments.'')

The ACTING PRESIDENT pro tempore. The Senator from Illinois.

Mr. DURBIN. Madam President, we are now commencing debate on the Children's Health Insurance Program. I wish to speak to the amendment that has been offered by Senator MCCONNELL, as well as the pending legislation.

It is a grim reality in America that each day, 17,000 Americans are losing their jobs. Each day, 9,000 Americans are facing new mortgage foreclosure notices. Madam President, 17,000 lost jobs and 9,000 have lost homes. In the process, some 11,000 Americans are losing their health insurance every single day. So the issue that was before us when we created the Children's Health Insurance Program has become gravely worse, and we are finding more and more Americans who are being squeezed out of health insurance coverage—46 million uninsured Americans today, including 9 million children.

We decided to make children a priority in terms of providing health insurance. What the Federal Government said to the States was: We will come up with a program, but we will give you more than the normal Medicaid share; we are going to give you a share that is enhanced so that you will consider covering these uninsured children. In that situation, many States took advantage of it.

I might just say, Madam President, that I understand Senator GRASSLEY is in the Chamber and has a 10:30 a.m. Finance Committee meeting and I have a 10:30 a.m. Appropriations Committee meeting. Let me do my best to share the time so I can leave him with the remaining 10 minutes or so. Is that fair? I want to make sure Senator GRASSLEY has a chance because we have to go to important meetings.

The difficulty we face today, the reality is we wanted this program primarily to help families making up to 200 percent of what we call median family income. That would basically mean they would be making roughly up to $42,000 a year. So if you are making $42,000 or less, we want those kids covered.

Then we said to the States: You can go as high as 300 percent, and that would take it up to $63,000. You would have to pay more for that out of State funds if you think that group of kids of families making between $42,000 and $63,000 need the help. And some States took advantage of it.

Then there were two exceptions, as I understand it. High cost of living States—New York and New Jersey—asked for permission to go even higher, up to $77,000 to $83,000 I think was the annual income. When many of the critics of this legislation, including the Republican leader, who just spoke, talk about what is wrong with it, they point to New York and New Jersey. I can tell you those are rare exceptions to the rule across America. By and large, this program is geared for people with incomes below $42,000 a year, and in some

cases below $63,000, with only two exceptions that I know, New York and New Jersey. And I will stand corrected if there is another State.

But the point is, to argue that this is a program that is for the wealthiest among us is to ignore the obvious. Those two States notwithstanding, people making $63,000 a year I do not put in the category of wealthy. Certainly, those making $42,000 I wouldn't at all. In fact, they are almost smack dab in the middle of the middle-income families in America. When they face the cost of insurance not covered by their employer, it can be an extraordinarily high expense. That is why many of them opt out of coverage for the family, which means mothers, fathers, and children go without health insurance. Imagine making $42,000 a year and seeing a third or 40 percent of your income going into FICA and taxes. What does that leave you with, about $2,000 a month? And with $2,000 a month, how many families can realistically turn around and buy a health insurance plan on the private market?

I also worry about this argument that we want to trap people into private health insurance that could be a bad policy that is very expensive, instead of giving them an option of coming into the Children's Health Insurance Program. If our goal is to give these families affordable health insurance, then why do we want to trap them in a private plan? Some will stay with the private plan because they are happy with it; others have a plan that, frankly, has a high deductible, high copay, limited coverage, and high cost. We want to trap those families in that plan?

Sadly, the amendment that is offered by Senator MCCONNELL has a mandatory 6-month waiting period between leaving private health insurance and enrolling in CHIP. What kind of benefit is that for the families of Illinois or Kentucky who are in a bad private health insurance plan—the only one they can afford? We want to give them real insurance that can be there when they need it.

We know there are families who desperately will need help. I have here the photograph of a family from Illinois. It is a classic story. This is a family, Steve and Katie Avalos and their son Manolo. In 2005, Katie became pregnant while Steve was still in law school, and because of Federal programs such as CHIP and Medicaid, the State of Illinois was able to provide health coverage for Katie through the All Kids Program. With help from St. Joe's Hospital, Katie was enrolled in the Illinois Moms & Babies Program. She received excellent prenatal care. In February 2006, her beautiful little baby boy Manolo was born with a rare neurologic condition that affects his balance, coordination, and speech. He was living with something called Dandy Walker Syndrome and as a result has had slow motor development and progressive enlargement of his skull.

Because Manolo has a preexisting condition, his options for health insurance are very limited. Yet with All Kids, our version of the Children's Health Insurance Program in Illinois, Katie can give her child the services that are important building blocks for his future success. Katie is grateful for reliable health insurance. Without it, Manolo would not have experienced his many successes. He was able to walk at age 2½, and the family is so happy. Without that helping hand, without the rehab and the special medical care, that might never have happened. Manolo turns 3 in a few days, on February 2, and he has his whole life in front of him.

Was this a bad investment, investing in this family, investing in this child, giving them a chance for the medical care they needed so this little boy has a normal life? When I hear from critics who argue that this is something we can't afford, or unfortunately it is going to crowd out private health insurance, I wonder if they know what a private health insurance plan would have cost this family with a child with a preexisting condition. They would have been lucky to find one they could afford, and it would have had many exclusions and many riders.

Now Senator MCCONNELL says to this poor family, stick with it for 6 months no matter what it is costing, no matter the fact that it doesn't cover what your child needs. I don't think that is the way to go. I think what we have to understand is that many people came together, Democrats and Republicans, to pass this bill initially—to pass it twice, though it ended up with President Bush's veto—and in all of these instances we were affirming the bottom line. And the bottom line, as President Obama and others have said, is health insurance is critically important for all of us.

President Obama said:

> People don't expect government to solve all their problems. But they sense deep in their bones that with just a slight change in priorities, we can make sure that every child in America has a decent shot at life and that the doors of opportunity remain open to all. They know we can do better.

Those are the words of President Obama in his speech to the 2004 Democratic convention. I know deep in our bones the Senate will stand together to give an additional 4 million kids coverage with health insurance. A bill that had been vetoed twice by President Bush can become the law of the land so this family—this loving family with a beautiful little boy—and thousands of others like them have a chance at quality health insurance.

I might conclude by saying that this debate is important for the course of the Senate, because all of us understand we have had some tough times on the Senate floor over the last couple of years—95 filibusters, a record-breaking number. What we want to do this week is to prove, as we did last week, that we can have amendments offered constructively; that we can debate them, deliberate them, and vote on them in an expeditious way. We can have a fair hearing on these amendments and come to a vote and not face a cloture vote and 30 hours of the Senate sitting in quorum calls with nothing happening. But it takes a cooperative effort on both sides. I think we can reach that again, and I hope we will prove it this week and by the end of the week pass this critical legislation to give 4 million kids, such as Manolo here, a chance for a better life.

Madam President, I yield the floor.

The ACTING PRESIDENT pro tempore. The Senator from Iowa.

Mr. GRASSLEY. Madam President, our goal is to cover 4 million kids, as was spoken by the majority whip. Our goal is to do it in a way so that we actually have the resources to cover children who do not have health insurance.

There are some aspects of the underlying bill before us that would lead families to drop private health insurance, and I am cognizant of what Senator DURBIN said, that if you have a bad policy, maybe you ought to be on SCHIP. I don't dispute that. But we have found that when you crowd people out of private health insurance, it is more apt to happen at the highest income levels than at the levels he was talking about, where we ought to be helping people under $42,000.

Then there is another category where they want to help people that sponsors have already assumed the responsibility of making sure their health care would be covered. In that category, we find $1.3 billion being wasted that we can take and use on children who don't have coverage.

So there is no dispute about covering 4 million people. There is a dispute about whether we ought to encourage people who are of higher income to drop out of private policies and to go on the Children's Health Insurance Program. If you talk to people in the Congressional Budget Office—the nonpartisan Congressional Budget Office—you will find that is a fact. Then when we have people sign a contractual relationship with the Federal Government that they are going to provide for the needs of the people they bring into this country, we feel—at least for a period of 5 years, and that is present law—that they should maintain that contractual relationship they have with the government; otherwise, those people would not be here in the first place. So we want to cover 4 million people. We want to cover people who don't have insurance. We don't want to encourage higher income people who do have insurance to go into the State health insurance program, and we want to make sure that people maintain their contractual obligations.

We are going to offer a series of amendments today and tomorrow to bring out these differences between the two approaches, but I am not going to stand by and let anybody on the other side of the aisle say there is a dispute

about covering 4 million people. I will make the point on this side of the aisle that we want to make sure we put emphasis upon covering people who don't have insurance, where they are willing to look at encouraging people to leave private insurance and go into a State-run program or encouraging people to avoid their contractual obligations with the Federal Government. Using our approach, it seems to me, the goal then can be reached so we actually reach more people who don't have insurance.

AMENDMENT NO. 41 TO AMENDMENT NO. 39

Now, the first amendment I am going to offer deals with this issue I referred to as a contractual obligation. The amendment I am offering today is very simple. It increases the coverage of low-income American children currently eligible for Medicaid but who are uninsured relative to the bill before this Senate. My amendment does this by striking the Federal dollars for coverage of legal immigrants and uses those funds to cover more low-income American kids instead.

Let me make it very clear: Whichever bill passes, we are talking about 4 million more kids, but we are still talking about a lot of kids who still aren't going to have coverage that we ought to be concerned about. So this is all about priorities. The Congressional Budget Office has reviewed my amendment and it indeed does the job of covering more low-income American kids. In fact, my amendment will get as many or more low-income American kids health coverage than the majority's bill does with the coverage of legal immigrants.

Does that sound right? It is right. It does not reduce the number of kids covered. It covers as many low-income kids, and maybe even more. The difference is that the additional low-income kids who get health coverage with my amendment are U.S. citizens. It does a better job of enrolling these low-income children than the bill before the Senate. I thought that covering children who were eligible for Medicaid but who were insured was a bipartisan goal shared by my Democratic colleagues. This amendment does exactly that.

I want to get back to the background on the amendment. In other words, there are people who are legally in the country—no dispute about that, legally in the country—who have sponsors. Without the sponsors, they would not be here. Those sponsors have signed an agreement with the Federal Government for these people to come into this country, that they will take care of them for 5 years, that they will not become a public charge. So those sponsors promised for their needs so that they would not be on programs that come out of the Federal Treasury, or else they would not be here. That is a cost of $1.3 billion when you are going to let those people not honor their contractual relationships and allow them to go on the Children's Health Insurance Program. And are they any better off? No, because the people who brought them here promised they were going to fulfill those needs and not become a public charge. But we would take that $1.3 billion and spend it on people who were not promised any coverage but qualify for the Children's Health Insurance Program and cover more kids in the process.

Madam President, I am going to send my amendment to the desk, and I ask that it be read.

Before I do that, I am sorry, I have to ask unanimous consent to set the pending amendment aside.

The ACTING PRESIDENT pro tempore. The amendment is in order at this time, and the clerk will report.

The legislative clerk read as follows:

The Senator from Iowa [Mr. GRASSLEY], for himself, Mr. HATCH, Mr. ROBERTS, and Mr. VITTER, proposes an amendment numbered 41 to amendment No. 39.

Mr. GRASSLEY. Madam President, I ask unanimous consent that the reading thus far constitute the reading.

The ACTING PRESIDENT pro tempore. Without objection, it is so ordered.

The text of the amendment is as follows:

(Purpose: To strike the option to provide coverage to legal immigrants and increase the enrollment of uninsured low income American children)

Strike section 214 and insert the following:

SEC. 214. INCREASED FUNDING FOR ENROLLMENT OF UNINSURED LOW INCOME AMERICAN CHILDREN.

Section 2105(a)(3)(E) (42 U.S.C. 1397ee(a)(3)(E)), as added by section 104, is amended by adding at the end the following:

''(iv) INCREASE IN BONUS PAYMENTS FOR FISCAL YEARS 2012 THROUGH 2019.—With respect to each of fiscal years 2012 through 2019:

''(I) Clause (i) of subparagraph (B) shall be applied by substituting '38 percent' for '15 percent'.

''(II) Clause (ii) of subparagraph (B) shall be applied by substituting '70 percent' for '62.5 percent'.

Mr. GRASSLEY. Madam President, did I make a mistake, that I was not supposed to set the amendment aside? I apologize if I made a mistake.

The ACTING PRESIDENT pro tempore. The Senator can proceed at this time without consent.

Mr. GRASSLEY. I have said all I am going to say, and from that standpoint, we will be debating this amendment throughout the day. We do not object to what the majority leader said, that he would like to vote on these amendments today. I think it is our intention to do that sometime during the day.

I yield the floor.

The ACTING PRESIDENT pro tempore. The Senator from Utah.

Mr. HATCH. Madam President, as someone who considers the creation of the CHIP program one of my happiest legislative accomplishments as a Senator, this is a very difficult and disappointing week for me. Like the rest of the Nation, after this historic election, I was so hopeful we would mark this new era with the passage of bipartisan CHIP legislation. However, the partisan process engineered by the other side of the aisle so far on this issue of great importance, has only reinforced the American people's cynicism about Washington's partisan political games. Americans are tired of this, and I am tired of this. Change is not just a slogan on a campaign poster, it is about real action.

I began this year with great hope that we would all come together to complete our work from 2007 and have a bill signed into law that would have overwhelming support on both sides of the aisle. But that hope has turned quickly into disappointment and the promise of change into a commitment to remain the same.

It appears that decisions were already made without those of us who worked morning, noon and night for several months in 2007 to create a bipartisan CHIP bill not once, but twice at the consternation of many colleagues on my own side. And I want to make one point perfectly clear to my colleagues in this chamber—Senator GRASSLEY and I were willing to roll up our sleeves and do it again this year. That is because we remain committed to those 6 million low-income, uninsured children who are eligible for CHIP and Medicaid coverage.

I am bitterly disappointed by the outcome of this bill. CHIP is a program I deeply love and built with my friends and colleagues who share my concern about the welfare of uninsured children of the working poor—the only ones who were left out of this process.

Again, in the Senate, we could have had a bill that would have brought the vast majority of members together once and for all to help these children. But that was not to be.

When our new President was campaigning across the country, he made a promise to the American people that he would invoke change and end the bitter partisanship on Capitol Hill. I find it ironic that he will be meeting with GOP members to talk about bipartisan efforts in the economic stimulus package the same week that the Senate is about to pass the very first partisan CHIP bill. The other three bills that this body has passed on the CHIP program were approved with overwhelming bipartisan support—69 votes for; both parties.

When President Obama was elected, I truly believed his promise of bipartisan change. And at risk of sounding overly sarcastic, I believe that if this bill and the process so far on the stimulus legislation are any indicator of what the future will bring, the American people will demand to know exactly what kind of change the Democrats pledge to bring to Washington.

I know my colleagues will agree that we put our hearts and souls into negotiating the reauthorization of the CHIP program in 2007. We stuck together through some very tough decisions—whether or not to allow coverage of pregnant women through CHIP, whether or not to continue coverage of childless adults and parents, whether

or not to allow States to expand CHIP income eligibility levels, how to eliminate crowd-out and, most important, how to get more low-income, uninsured children covered through CHIP. We had some tough discussions, but in the end, we ended up with two bills, CHIP I and CHIP II, that covered almost 4 million low-income, uninsured children. Unfortunately, neither version of the bill was signed into law and, in the end, we simply extended the CHIP program through March 2009.

Back then, we knew that we needed to prepare, once again, for another debate on the reauthorization of the CHIP program in early 2009. But we all felt that the outcome would be different and that the legislation that I developed with Senators GRASSLEY, ROCKEFELLER and BAUCUS which I believe greatly improved the CHIP program, would be signed into law.

While the CHIP legislation that we passed in the Senate was not perfect, which we fondly refer to as CHIPRA I and CHIPRA II, it represented a compromise and laid the foundation for bipartisanship and trust that was integral to getting the legislation not once but twice to the President's desk.

The bill being considered this week is not that bill because it includes provisions that I feel were not part of our bipartisan agreement such as the inclusion of a State option to cover legal immigrant children and pregnant women. Amendments will be offered to improve this legislation but if they are not accepted, I will not be able to support this bill. And I deeply regret it.

I started putting together ideas regarding the CHIP program after I met with two Provo, UT, families in which both parents worked. Each family had six children. Neither family, with both incomes, had more than $20,000 a year in total gross income. They clearly could not afford health insurance for their children. CHIP was the only answer to their plight. They were the only people left out of the process. They worked. They did the best they could.

When Senators KENNEDY, ROCKEFELLER, CHAFEE and I wrote this program in 1997, we wrote it with the intent of helping the children of those Provo families and others like them. Our intent was to help the children of the working poor, the only children who did not have access to health coverage back then. These children's families made too much money to qualify for Medicaid and not enough money to buy private health insurance.

In addition, it came to light that both the Clinton and Bush administrations permitted individuals to be covered by CHIP who did not fit the definition that we had in mind for children of the working poor. In fact, they were not even children. They were childless adults and parents of CHIP eligible children. My good friend Senator GRASSLEY likes to remind us that there is no ''A'' in the CHIP program. There is only a ''C'' and we all know what that ''C'' stands for and it is not adults.

I believe that having adults on this program caused the price tag of CHIP to escalate and even led to some States running out of their CHIP allotments prematurely. To add insult to injury, because States receive a higher Federal matching rate for covering individuals in the CHIP program, States were given financial incentives to continue covering adults.

As part of our compromise in 2007, childless adults would have been phased off CHIP and transitioned to their States' Medicaid programs. Parents would have been covered in a capped program and within a set timeframe, States would have either received the Medicaid matching rate or the matching rate half way between the State's Medicaid matching rate and the CHIP matching rate. This was called RE-MAP. States would have only gotten the RE-MAP Federal match if they covered a certain number of low-income children.

Our two bills from 2007, CHIPRA I and CHIPRA II, brought this situation to light and put a stop to covering future adults once and for all. In fact, States will no longer be allowed to submit waivers to cover adults through the CHIP program once the bill before the Senate becomes law. That seems right.

We have also seen some States cover children whose family income is well above 200 percent of the Federal poverty level. Typically, these higher income families have access to private health insurance so they end up having a choice between private health insurance, paid for in part by their employers, or CHIP coverage, almost fully paid for by the Federal and State governments.

Unfortunately, many of these families end up choosing CHIP over private health coverage, thus contributing to higher costs incurred by the CHIP program. Adding higher income families to State CHIP programs also affects the Federal taxpayer who ends up paying for a significant part of the CHIP program.

And, once again, States currently receive the higher CHIP Federal matching rate for covering these higher income children. This is something that really bothers me because it is so contrary to the original goal of the CHIP program.

There are other issues as well—the crowd-out policy that we worked out to address the serious crowd-out concerns raised by Members was not included in this mark.

This policy, section 116 of CHIPRA I and CHIPRA II called for the Government Accountability Office, GAO, to study what States are doing to eliminate crowd-out in the CHIP program. In addition, the Institute of Medicine, the IOM, was directed to come up with the best way for measuring, on a State-by-State basis, the number of low-income children who do not have health coverage and the best way to collect this data in a uniform manner across the country. Today, there is no standard for States to collect data on the uninsured, including uninsured, low-income children.

So right now, it is a guessing game for States to figure out how many low-income, uninsured children reside in their States. To me, it is a no brainer that we should incorporate a standard way to collect this important information to help us figure out how many low-income, uninsured children still need health coverage.

The deleted section also required the Health and Human Services Secretary to develop recommendations on best practices to address CHIP crowd-out. It also directed the Secretary to develop recommendations on how to create uniform standards to measure and report on both CHIP crowd-out and health coverage of children from families below 200 percent of the Federal poverty level.

I simply do not understand why on earth the majority would drop such an important provision. I don't understand that since we worked so hard to solve these problems. Don't we want to eliminate crowd-out to ensure that the children in the most need are the top priority? Don't we want to make sure that the data collected in Utah on uninsured, low-income children is collected the same way across the country? Don't we want to compare apples to apples? Or is it possible that some in this body simply want to continue the guessing game and never truly know how many low-income, uninsured children live in their States?

We will have a vote on this provision during this debate and it is my hope that Senators on both sides of the aisle will want to have answers on crowd-out and appropriate data collection. I cannot believe that Members subscribe to the irresponsible, anything goes policy which is exactly what they are advocating if they vote against the amendment to add this provision back into the bill.

Another issue that is very important to me is the coverage of high-income children through the CHIP program. When we were negotiating CHIPRA I and CHIPRA II in 2007, we agreed 300 percent of the Federal poverty level for CHIP was high enough. CHIPRA I provided States with the lower Medicaid matching rate, FMAP, for covering children over 300 percent of FPL. CHIPRA II, the second bill vetoed by the President, went one step further and stopped all Federal matching rates for CHIP children over 300 percent of FPL. That is the policy that I support—there is no reason on earth that a family making $63,000 per year should be covered by CHIP and that a State should be rewarded with any Federal matching dollars for covering these high-income children.

In fact, there is one State that provides CHIP coverage up to 350 percent of FPL and another State that is trying to cover children up to 400 percent

of FPL. In my opinion, when States start moving in that direction, they are taking a block grant program, one that we felt should be operated by the States to help children of the working poor, to push towards a single payer health system. That is what they are pushing for. That is not what we agreed to in 1997 when we created CHIP.

However, the legislation before us today allows States that had submitted State plan amendments or had their waiver approved to increase their income eligibility levels to over 300 percent of FPL to receive the higher Federal matching rate for the CHIP program. These States are New Jersey, a State that now covers children up to 350 percent of the Federal poverty level and New York, a State that submitted a plan to CMS to cover children up to 400 percent of the Federal poverty level. I do not support this provision and will be supporting an amendment to prevent these two States from receiving the higher CHIP matching rate. that are willing to work within the limits we set and have worked well under the original CHIP bill.

Another issue that deeply troubles me is the insistence to include a State option to cover legal immigrant children and pregnant women, who are not citizens of our country, through the CHIP program.

In 2007, we made agreements that our legislation would not include the coverage of legal immigrant children and pregnant women. I have consistently voted against adding that new category, even if it is at the State option, because I believed then, as I believe now, that before we even consider expanding the CHIP program to legal immigrant children, we need to do the best job we can to cover the children of the working poor who are U.S. citizens.

While we have improved, we still have at least 6 million other children to cover, maybe more, with the dire economic conditions currently facing our country.

Now, before we even started drafting our first CHIP bill in 2007, we agreed that legal immigrant children would not be added to the CHIP program. That agreement was very important to me and to other Republicans who eventually supported the two CHIP bills that we negotiated in 2007.

In addition, we have always struggled to find sufficient dollars to reauthorize the CHIP program. The bill before the Senate is only a 4½ year reauthorization due to limited funds. I understand there is some extra money in the bill for the legal immigrant provision. I believe that we should be using that money to cover low-income uninsured children who are U.S. citizens first. How many children who are U.S. citizens will be without health care because we have decided to cover legal immigrants through CHIP?

I wish to know the answer to that question before this bill becomes law. Now, ordinarily I support helping legal immigrants in almost every way. But we do not have enough money to take care of our own citizens' children. That is a matter of great concern to me and it is of great concern to a significant number of Members of both bodies who probably will vote against this bill because of that provision. In fact, there are plenty of reasons to vote against this bill because it was written in such a partisan fashion.

I might add, the legal immigrant provision is now in this legislation, and, as a result, there are many Members in both Houses of Congress who now oppose the bill. We simply do not understand why we are not taking care of our children who are U.S. citizens first. Once that goal is accomplished, I would be willing to make a commitment to the work on resolving all of the issues regarding legal immigrants once and for all.

But now is not the time. There is not enough money even in this bill to take care of our children who are citizens. This is especially true when our country is in economic crisis and there are more children who are U.S. citizens who need health insurance coverage because their parents may have lost their jobs or may have lower paying jobs. I do not believe this is an unreasonable request. For the life of me, I cannot understand why those who support the coverage of legal immigrant children cannot work with us to resolve this issue, especially if they want a bill that has broad bipartisan support.

But without a doubt, the issue that broke down negotiations between the Senate and House Republicans at the end of 2007 involved Medicaid eligibility. Section 115 of the legislation would allow States to create higher income eligibility levels for Medicaid. When are we going to quit throwing money at programs?

Simply put, a State could establish one income level for Medicaid, a higher income eligibility level for CHIP, and then cover more kids at an even higher income eligibility level through Medicaid. In other words, a State could cover higher income children through Medicaid at an even higher income level than children covered by CHIP.

This provision sets no limits on the income eligibility level for Medicaid. Now, that is ridiculous. It is irresponsible. It is fiscally unsound. Everybody here knows it. In 2007, the House Republicans wanted to put a hard cap of 300 percent of Federal poverty level on State Medicaid programs. I agreed with them, but others did not. I am quite disturbed that the legislation before the Senate still allows States to cover high-income children under their State Medicaid plans. Technically speaking, section 115 of this bill would allow a State to cover children under Medicaid whose family income is over 300 percent, over $63,000 for a family of four.

During this debate, I intend to support and speak in favor of amendments to address this very serious concern of mine. It ought to be a serious concern of everyone here, since there a limited amount of money that may be used.

Additionally, section 104 of the legislation creates a bonus structure for States that enroll Medicaid-eligible children in their State Medicaid programs. The idea is to reward States for covering their poorest children. If a State increases its Medicaid income eligibility levels, using the language in section 115, additional children added to Medicaid would not be eligible for a bonus during the first 3 fiscal years. However, at the beginning of the fourth fiscal year, it is possible that States could receive a bonus for enrolling higher income children in their State Medicaid programs.

Now, this provision simply does not make any sense. I urge my colleagues to drop it once and for all. A State should not be rewarded for covering a high-income child in its State Medicaid program, especially when it is not going to be covering those who need to be covered and should be covered.

Well, I have to admit, Senator GRASSLEY and I went through a lot of pain on this side, and in the House of Representatives, bringing people together for the overwhelming votes that we did have in both the Senate and the House, but especially here in the Senate on both CHIPRA I and CHIPRA II.

Then, all of a sudden we find that since the Democrats have taken over and now have a significant majority, they do not need Senator GRASSLEY and me anymore.

Now, my feelings are not hurt, I want you all to know that. But I am disgusted with this process that is so partisan. I am particularly upset because everybody in this body knows that I fought my guts out to get the original CHIP program through to begin with in 1997. And it would not have happened had I not brought it up in the Finance Committee markup on the Balanced Budget Act. In fact, it became the glue that put the first balanced budget together in over 40 years.

So you can imagine why I feel the way I do. I know how badly Senator GRASSLEY feels. We are both conservatives, but we both worked our guts out trying to bring about an effective approach, and it was effective in CHIPRA I and CHIPRA II.

Unfortunately, in 2007, neither bill did not have enough votes to override a veto. I think our President had very poor advice, and anybody who looks at the mess this legislation is in right now, and the lack of bipartisanship, will have to agree that we should have signed into law either CHIPRA I or CHIPRA II. But then that is the past.

I hope my colleagues on the other side will recognize that some of us worked hard to try and bring about effective legislation, taking on our own administration, taking on wonderful friends on our own side, to bring about legislation that would work a lot better than the bill before us today. This bill, in my opinion, is going to lead to higher costs and less coverage of children.

Why? What is the reasoning behind it? Well, unless there are essential

changes made to this legislation during the floor debate, I will be voting against my own bill, and against the program I helped create in 1997. It is sufficient to say that I am not only disappointed, but I am angry. This entire debate has personally been grievous to me, because it has now become a partisan exercise instead of being about covering low-income, uninsured children, where we could have had a wonderful bipartisan vote. We could have made this third reauthorization bill a tremendous victory for the President.

Well, he may feel tremendous victory anyway, even though it is a partisan one. But I do not look at it that way. To start out the year on this note does not bode well for future health care discussions, including health reform and the Medicare bill that we will be considering this fall. In fact, one of the very first bills that the President, who ran on a platform of bipartisanship and change, will sign into law is going to be a partisan CHIP bill, produced as a result of the same old Washington gamesmanship. That is pathetic when you think about it, because we should be together on this bill, and a large majority would have voted again for legislation similar to either CHIPRA I or CHIPRA II.

I want to encourage the President and his colleagues to seriously consider what they are doing. We were so close to working out a bipartisan CHIP agreement and, in my opinion, I believe they are missing an incredible bipartisan health care victory by making this a partisan product. So I urge the President and my friends on the other side—they are my friends—I urge them to reconsider this strategy. I think we still have time to turn this around and make it the bipartisan bill many of us would like it to be. Ensuring access to quality and affordable care for Americans is not a Republican or Democratic issue, it is an American issue. Our citizens expect nothing less than a bipartisan, open, and inclusive process to address a challenge that makes up 17 percent of our economy and will increase to 20 percent within the next decade. A bipartisan CHIP bill would have been an incredible step in that direction.

However, once again politics has triumphed over policy, Washington over Main Street.

The famous novelist Alphonse Karr once said, ''The more things change, the more they remain the same.'' There is no better proof of this statement than this CHIP legislation. I continue to hope that the change promised in this election did not have an expiration date of January 20, 2009, but rather was a real and accountable promise to our citizens. There is no better place to start this change than on this CHIP bill by making it truly bipartisan.

Mr. President, I send an amendment to the desk.

AMENDMENT NO. 45 TO AMENDMENT NO. 39

The PRESIDING OFFICER. Without objection, the pending amendment is set aside. The clerk will report.

The legislative clerk read as follows:

The Senator from Utah [Mr. HATCH], for himself and Mr. GRASSLEY, proposes an amendment numbered 45 to amendment No. 39.

Mr. HATCH. Mr. President, I ask unanimous consent that the reading of the amendment be dispensed with.

The PRESIDING OFFICER. Without objection, it is so ordered.

The amendment is as follows:

(Purpose: To prohibit any Federal matching payment for Medicaid or CHIP coverage of noncitizen children or pregnant women until a State demonstrates that it has enrolled 95 percent of the children eligible for Medicaid or CHIP who reside in the State and whose family income does not exceed 200 percent of the poverty line)

On page 136, between lines 15 and 16, insert the following:

(c) CONDITION FOR FEDERAL MATCHING PAYMENTS.—

(1) IN GENERAL.—Section 1903(i) (42 U.S.C. 1396b(i)) is amended—

(A) in paragraph (23), by striking ''or'' after the semicolon;

(B) in paragraph (24)(C), by striking the period and inserting ''; or''; and

(C) by inserting after paragraph (24)(C), the following:

''(25) with respect to amounts expended for medical assistance for an immigrant child or pregnant woman under an election made pursuant to paragraph (4) of subsection (v) for any fiscal year quarter occurring before the first fiscal year quarter for which the State demonstrates to the Secretary (on the basis of the best data reasonably available to the Secretary and in accordance with such techniques for sampling and estimating as the Secretary determines appropriate) that the State has enrolled in the State plan under this title, the State child health plan under title XXI, or under a waiver of either such plan, at least 95 percent of the children who reside in the State, whose family income (as determined without regard to the application of any general exclusion or disregard of a block of income that is not determined by type of expense or type of income (regardless of whether such an exclusion or disregard is permitted under section 1902(r))) does not exceed 200 percent of the poverty line (as defined in section 2110(c)(5)), and who are eligible for medical assistance under the State plan under this title or child health assistance or health benefits coverage under the State child health plan under title XXI.''.

(2) APPLICATION TO CHIP.—Section 2107(e)(1)(E) (42 U.S.C. 1397gg(e)(1)(E)) (as amended by section 503(a)(1)) is amended by striking ''and (17)'' and inserting ''(17), and (25)''.

Mr. HATCH. My amendment simply says that before a State may exercise an option to provide CHIP and Medicare to legal immigrant children and pregnant women, that State must demonstrate to the Secretary of Health and Human Services that 95 percent of its children under 200 percent of the Federal poverty level have been enrolled in either the State's Medicaid program or the CHIP program.

The Secretary may make this determination based on the best data available, and may use any technique necessary for sampling and estimating the number of low-income, uninsured children in that State.

When legal immigrants enter this country, their sponsors agree, the people who bring them in agree, to be responsible for their expenses for the first 5 years they live in the United States.

The CHIP bill contains a provision which was added during the Finance Committee consideration of the bill that negates that agreement by allowing immediate health coverage of legal children and pregnant women. This is the first reason I am offering this amendment.

The second reason is that there are U.S. children who are citizens of this country who are low income and uninsured. They do not have health insurance coverage. They qualify for Medicaid and CHIP too. I believe these children should be our first priority as far as CHIP and Medicaid coverage is concerned. They should be the priority. Once these children have health coverage, then we can talk about expansions to other populations.

I worked very closely with my Democratic colleagues on creating not one but two bipartisan CHIP bills in 2007, CHIPRA I and CHIPRA II.

As I have explained, I voted against my President because I wanted the CHIP program to be reauthorized in the bill we wrote. One of the first agreements that Senator GRASSLEY and I made with Senators BAUCUS and ROCKEFELLER was that legal immigrant children would not be covered under the CHIP program because their sponsors made a commitment to be financially responsible for them for 5 years. That was even before we started drafting CHIPRA I.

I simply cannot support a CHIP bill that allows States to cover legal immigrant children while there are at least 6 million low-income uninsured children, 200 percent of poverty and below, who do not have health coverage and are eligible for CHIP and Medicare.

These children ought to be our first priority. My amendment ensures the majority of these children have health coverage before we expand CHIP and Medicaid eligibility to legal immigrants. I urge my colleagues to support this amendment. It is a reasonable approach. It might have the capacity of helping to bring some of us together in a more bipartisan manner. I hope our colleagues will pay strict attention to some of the things I have said because I believe I have earned the right to be listened to on all aspects of the CHIP bill.

I yield the floor.

The PRESIDING OFFICER (Mr. UDALL of New Mexico). The Senator from Maryland.

Mr. CARDIN. Mr. President, let me compliment my friend, Senator HATCH, for his longstanding work on behalf of the Children's Health Insurance Program. He points out—and rightly so—that this legislation was developed in a bipartisan manner, where Democrats and Republicans worked together to establish a Federal program that allowed our States to use their mechanism to cover children. That is where our difference might be now. We are looking

at reauthorization legislation. We are looking at how we can make this program more effective, covering more children, giving States the tools they need so children can be covered under the CHIP program. The concerns my friend from Utah raises basically would impede on State discretion. We have a national program that is built upon allowing the States to implement and cover children. Each State is different. The priorities among States are certainly different. We need to give the States the tools they need so children actually are covered effectively by this program.

The amendment my friend from Utah has offered would prohibit States from covering legal immigrants and pregnant women. These are, in many cases, people who have been here for a long time, hard-working, tax-paying families, and they are playing according to the rules.

This restriction was imposed in 1996 by Congress. Since that time, many of the restrictions that have been placed upon legal immigrants have been removed. In this instance, what the committee is recommending is to give the States the option of covering legal immigrants without the 5-year wait period. It is not mandating it. It gives all States the option, if they so desire, to cover. Currently, 23 States want to cover these children.

The last time an amendment was offered and we tried to do away with the prohibition on States, our Republican colleagues said: This shouldn't be done as an independent issue. Why don't we take it up when we reauthorize the Children's Health Insurance Program. That is where it should come up. It should not come up on an unrelated bill. That is exactly what we are doing.

This is the reauthorization bill for the Children's Health Insurance Program. This is the time to correct what was done in 1996, in haste, that in many other Federal programs we have already changed. This allows the States to do it.

Many other issues my friend from Utah raised, I assume, will have individual amendments to deal with them. But in most cases, it is the issue of whether we are going to trust our States to run the program. That was the compromise reached between Democrats and Republicans. Quite frankly, there are more people on the Democratic side of the aisle who wanted a stronger Federal presence. But our Republican colleagues said: Let's build upon the State programs. That is what we did in the compromise. That is why the Children's Health Insurance Program has truly been a bipartisan bill.

The bill reported out by the committee is a bipartisan bill. So let me talk for a few minutes about the importance of S. 275, the Children's Health Insurance Program Reauthorization Act of 2009. For millions of children across America who are waiting for the comprehensive health care coverage they need, this week could not have come soon enough. There is a crisis in health care in this country. The United States spends far more per capita than any other nation on health care services. Yet our health status lags in many areas, especially in preventable diseases. This is primarily because we have so many Americans who lack coverage and a fragmented, inefficient health care system that shifts costs onto those who are covered. This is no longer a matter of whether we take action to achieve universal health insurance but how.

We can begin, in the 111th Congress, by guaranteeing children access to the care they need to grow into healthy adults. We can make great strides by reauthorizing CHIP and covering millions of uninsured children now.

Most uninsured Americans belong to working families. It is the CHIP program, first established 12 years ago, that can provide children in these families with affordable health insurance. As a Member of the House, I voted for the bill that created CHIP. At the time, 37 million Americans were uninsured. At the time, I did so with the hope that CHIP would be the first step toward universal health coverage. Although we did not reach the goal then, I believe we are on track to achieve it this year. In the years since, more employers have dropped their coverage. The number of uninsured has increased. Today the number stands at 46 million and growing. I say ''growing'' because today's headlines contain more grim news for our workforce. The New York Times reported a staggering list of companies that announced job cuts on Monday: Caterpillar, 20,000 jobs; Sprint-Nextel, 8,000 jobs; Home Depot, 7,000 jobs; General Motors, 2,000 jobs; Texas Instruments, 3,400 jobs; Philips Electronics, 6,000 jobs.

Over the past year, more than 12.5 million Americans have lost their jobs. Our unemployment rate is now 7.2 percent, the highest in 16 years. As President Obama said yesterday:

> These are not just numbers. These are working men and women whose families have been disrupted and whose dreams have been put on hold.

Whenever we have a family who loses their job, in many cases, they lose their health insurance. If they lose their health insurance, in many cases, they lose their access to quality health care. The numbers are increasing. In many cases, we have two working families. One person loses their job which may cover the family, the other spouse has only single coverage and can't get family coverage or doesn't have the money to afford family coverage. This disrupts a family's ability to take care of their own health care needs. We know CHIP works. Studies have shown and proved that enrollment in CHIP improves the health care of children. When previously uninsured children sign up for CHIP, they are far more likely to get regular primary medical and dental care. They are less likely to visit the emergency room for services that could be rendered in a doctor's office. That saves us health care dollars. They are more likely to receive immunizations and other services they need to stay healthy and lead to healthier schools and communities. They are more likely to get the prescription drugs they need to recover from illness.

The best evidence of the program's success doesn't rest in studies or surveys. It rests in the families themselves. The Bedford family from Baltimore is a success story, one of millions of families in CHIP. Craig and Kim Lee Bedford and their five children have testified on Capitol Hill about the difference the Maryland CHIP program has made in their lives. Mrs. Bedford said:

> Perhaps the greatest impact the Maryland Children's Health Insurance Program has had on our family is that we no longer have to make impossible health choices based on a financial perspective. We no longer have to decide whether a child is really sick enough to warrant a doctor's visit. We no longer have to decide whether a child really needs a certain medication prescribed by his pediatrician.

Mr. Bedford said:

> The face of CHIP is families such as ours, families that work hard, play by the rules, trying to live the American dream.

So for the Bedford family and millions more, CHIP has been a success. But there are still millions of children who have not enrolled in the program offered by their States. Our State is making progress, simplifying their enrollment procedures, expanding outreach efforts and using joint applications for Medicaid and CHIP so families can enroll together. The States are making progress, but as we reauthorize the Children's Health Insurance Program, let's make sure we make real progress.

Our bill will extend the program for 4.5 years and allow an additional 4.1 million children nationwide to enroll. We have to get this bill done.

I wish to talk about the MCHIP program, the Maryland State program. It has one of the highest income eligibility thresholds in the Nation. I know my colleagues have talked about this. This is needed because of the high cost of living in our State. Eligibility is 300 percent of the Federal poverty level, not because our Governor wants to move people from private insurance to public insurance plans. It is at 300 percent because working families at this income level do not have access to affordable health insurance. That is the statistics in my State. Those families need CHIP. This is a State option.

As to one point my friend from Utah mentioned, I don't think the Federal Government should be prescriptive. Allow the States to figure out what program works best. There are incentives to cover low-income families. There are higher matches from the Federal Government, as it should be. We should make sure the lower income families are covered first, and we do under CHIP. Children under the age of 19 may be eligible for MCHIP, if their

family income is at or below 200 percent of the Federal poverty level or up to $34,000 for a family of three. Our program has been a true success. Enrollment has grown from about 38,000 enrollees in 1999 to more than 100,000 today. In Maryland, the need has always exceeded available funds. We actually spend more money than the Federal Government will give us. The Federal match through the CHIP formula established in 1997 is not enough to meet all the costs of the MCHIP program. Some States do not use their entire allotment, while other States, such as Maryland, have expenditures that exceed their allotment. Congress has addressed this problem by redistributing the excesses of the States that have them to States that have shortfalls. Now we must move forward for future years.

This is what we are doing on the floor of the Senate today. I thank Chairman BAUCUS and Senator ROCKEFELLER for their efforts on this bill. This bill will allow us to continue to cover children and families with incomes up to 300 percent of poverty. Maryland would also have access to contingent funds, if a shortfall arises, and additional funds based on enrollment gains. With this new money, Maryland can cover an estimated 42,800 children who are currently uninsured over the next 5 years.

There is another important part of this bill I wish to talk about for a moment, section 501. It hasn't gotten much attention, but it certainly has received a lot of attention around the country. Section 501 ensures that dental care is a guaranteed benefit under CHIP. I agree with my friend from Utah, we need to set standards at the national level. Dental benefits must be included. According to the American Academy of Pediatric Dentistry, dental decay is the most common chronic childhood disease among children. It affects 1 in 5 children between the ages of 2 and 4 and half of those between the ages of 6 and 8. Children living in poverty suffer twice as much tooth decay as middle- and upper-income children. Nearly 40 percent of Black children have untreated tooth decay in their permanent teeth. More than 10 percent of the Nation's rural population has never visited a dentist. More than 25 million people live in areas that lack adequate dental services.

Next month will mark 2 years since a young man from suburban Maryland named Deamonte Driver passed away. He was 12 years old, when he died in February of 2007 from an untreated tooth abscess. His mother tried to access the system, tried to get him to a dentist. What was needed was an $80 tooth extraction. Because of the failure of the system to cover his services, an inability to get to a dentist, Deamonte ended up in an emergency room. A quarter of a million dollars was spent in emergency surgeries. He lost his life in the United States in 2007.

This bill will do something about it by covering oral health care, as it should. Deamonte's death has shown us that, as C. Everett Koop once said, ''There is no health without oral health.'' No children should ever go without dental care. I have said before, I hoped that Deamonte Driver's death will serve as a wake-up call for Congress. Section 501 of this bill shows that it has. We must never forget that behind all the data about enrollment and behind every CBO estimate, there are real children who need care.

When I spoke about Deamonte Driver after his death, I urged my colleagues to ensure that the CHIP reauthorization bill we send to the President includes guaranteed dental coverage. This bill does include guaranteed dental coverage. It also provides ways in which families will have a better understanding of the need for oral health care. It also provides ways in which families can access dentists who will treat them under either the CHIP program or the Medicaid Program.

This legislation is a major step forward on dental care. We need to do more. I want to acknowledge the work particularly of Senators BINGAMAN and SNOWE on oral health care. They have been real champions in this body in moving forward on these types of legislation.

This bill will also require GAO to study and report on access to dental services by children in underserved areas, access to oral health care through Medicaid and CHIP, and how we can use midlevel dental health providers in coordination with dentists to improve access to dental care for children. The results of this study will give us the information we need to further improve coverage.

We still have to raise reimbursement for dental providers, and send grants to the States to allow them to offer wraparound coverage for those who have basic health insurance but no dental insurance. But these provisions are an excellent start.

After two vetoes of a bipartisan CHIP bill by the former President, I am so pleased to stand here today on the floor of the Senate and express my strong support for S. 275. This is the week in which we can make progress in covering people in this country, particularly our children, with health insurance. One week after the inauguration of President Obama, we are poised to move this bill through the Congress and to his desk so it can finally become law.

I urge all my colleagues to vote in favor of this legislation, as we start down the path to universal health coverage for all Americans.

With that, Mr. President, I yield the floor.

The PRESIDING OFFICER. The Senator from South Carolina.

AMENDMENT NO. 43 TO AMENDMENT NO. 39

Mr. DEMINT. Mr. President, I ask unanimous consent that the pending amendment be set aside, and I call up amendments Nos. 42, 43, and 44, and ask for their immediate consideration.

The PRESIDING OFFICER. Is there objection?

Mr. CARDIN. Mr. President, I do object. The reason, quite frankly, is that we have worked out with the Republican leader that we would have three amendments pending. We have those three amendments pending. I think it is important we have an opportunity to act on those three amendments. We certainly look forward to other opportunities where my colleague will be able to offer the amendment, but at this point I object.

The PRESIDING OFFICER. Objection is heard.

The Senator from South Carolina retains the floor.

Mr. DEMINT. Thank you, Mr. President. I do not intend to speak on them, so we would not use any time. I think it is important we have amendments pending so our colleagues will have ample time to review them.

I would ask the Senator to reconsider. Again, I am not going to speak on them. I only want them pending so we can distribute them and people can begin to see what is in them.

Mr. CARDIN. Mr. President, if my colleague will yield?

Mr. DEMINT. Yes.

Mr. CARDIN. We would be pleased to allow the Senator to call up amendment No. 43 but not the entire list of amendments the Senator sought.

Mr. DEMINT. I appreciate the benevolence, and I would hope the Senator would agree that all of these amendments at some point can be made pending in the debate.

But I will call up only amendment No. 43 right now.

Mr. CARDIN. To point out to my friend, we already have three amendments that are pending, and we are hoping to make progress, and we want to get votes on these amendments. I will not raise an objection to setting aside the amendment for the sole purpose of offering amendment No. 43.

The PRESIDING OFFICER. Without objection, it is so ordered.

The clerk will report the amendment.

The assistant legislative clerk read as follows:

The Senator from South Carolina [Mr. DEMINT] proposes an amendment numbered 43 to amendment No. 39.

Mr. DEMINT. Mr. President, I ask unanimous consent that further reading of the amendment be dispensed with.

The PRESIDING OFFICER. Without objection, it is so ordered.

The amendment is as follows:

(Purpose: To require States to impose cost-sharing for any individual enrolled in a State child health plan whose income exceeds 200 percent of the poverty line)

At the appropriate place, add the following:

SEC. ___. REQUIRED COST-SHARING FOR HIGHER INCOME INDIVIDUALS.

Section 2103(e) (42 U.S.C. 1397cc(e)) is amended—

(1) in paragraph (3)(B), by striking ''and (2)'' and inserting '', (2), and (5)'';

(2) in paragraph (4), by striking ''Nothing'' and inserting ''Except as provided in paragraph (5), nothing''; and

(3) by adding at the end the following new paragraph:

''(5) REQUIRED COST-SHARING FOR HIGHER INCOME INDIVIDUALS.—Subject to paragraphs (1)(B) and (2), a State child health plan shall impose premiums, deductibles, coinsurance, and other cost-sharing (regardless of whether such plan is implemented under this title, title XIX, or both) for any targeted low-income child or other individual enrolled in the plan whose family income exceeds 200 percent of the poverty line in a manner that is consistent with the authority and limitations for imposing cost-sharing under section 1916A.''.

The PRESIDING OFFICER. The Senator from South Carolina is recognized.

Mr. DEMINT. Thank you, Mr. President.

Obviously, I am disappointed in the process. It is important we let our colleagues know what amendments will be offered so we can begin to discuss them; and many times we have the opportunity to work these things out, improve them before debate. Unfortunately, many times in the past we have seen where the majority pushes the bringing up of these amendments to the very end and then says we do not have time to debate them. I hope that will not occur this time.

I have three good amendments. The one I just brought up I will not speak on at this point but will mention the subject of that amendment. It is a cost-sharing arrangement with the States that for all recipients of SCHIP over 200 percent of poverty the States are required to ask for some small cost-sharing with people who use this insurance. It is important that we look at this as a program that, hopefully, will move people from a Government-sponsored plan to eventually a private plan, with our goal being every American is eventually insured with a policy they can own and afford and keep.

So this would work with the States to require a small cost-sharing arrangement with the beneficiaries who are 200 percent of poverty or more, and it would not be more than 5 percent of income, and States can charge as little as they would like. But the whole point is to begin to encourage personal responsibility and to let people know this is not a permanent giveaway but something they need to participate in.

I look forward to discussing this amendment in more detail along with my other amendments sometime in the future. But right now, Mr. President, I yield the floor.

The PRESIDING OFFICER. The Senator from Pennsylvania is recognized.

Mr. CASEY. Mr. President, I rise at this moment to review, in a summary form, pertinent aspects of the legislation. I know we are going to be having a debate on various parts of this bill that have been the subject of a lot of conflict in the last couple of days. But I think it is very important we kind of get back to the basics to talk about why we are here.

We are not here to only debate several provisions of this legislation. We are here to debate, in a larger sense, whether we are going to pass a children's health insurance bill this year, this month, or not. That is the fundamental debate we are having. We had the opportunity, in 2007, in a bipartisan way, here in the Senate to achieve a rare and, frankly, unprecedented bipartisan agreement on a significant piece of legislation, the result of which would have been, over a 5-year period of time, to insure 10 million American children.

I am not sure any other generation of Americans has had that opportunity. We had a bipartisan consensus in the Senate. It approached 70 votes—in the high sixties—every time it was voted on; a veto-proof number of votes, a majority. It went to the House, of course. The House debated it, and they had an overwhelming bipartisan vote in the House. It went to President Bush, and he vetoed it twice. Then it came back for an override, and we were able to override it in the Senate, but in the House they fell short. That is where we are. So because of the actions of President Bush, that bill never became law.

Now we are back to debating whether this Congress is going to provide health insurance to not just 10 million—it is now 10.6 million—American children. We are either going to do it or we are not. All this other stuff is interesting to debate, and we will continue to debate it, but we are either going to do it or we are not.

Let me give you one example of what this means. Forget all the numbers for a second and all the programs and all the quibbling about some point of conflict. We will address those issues today, and I will as well. But let's get back to the basics: what this legislation means to a family.

For example, as a result of this legislation, if we do our job here and get this legislation passed, and if the House does its job and passes this legislation, millions of American children will have the opportunity for all kinds of good health care provisions, a lot of them preventive in nature.

We have a lot of discussions in this body where people talk about the workforce and growing the economy and building a stronger skilled workforce in the future. None of that means much unless you are going to do this, OK. A child will not develop, they will not achieve in school, and they will not be productive members of our workforce unless we pass legislation such as the children's health insurance bill.

I will give you one example: well-child visits. Anyone who knows anything about child development—I do not consider myself in any way an expert on this issue; others may—but we all know, as parents—forget legislators or experts—it is as parents we know how important it is to have a child go to the doctor a couple times, at a minimum, several times in their first year of life. It is a key time for parent and physician to communicate. Doctors recommend six visits in the first year of a child's life.

Now, with this legislation we have an opportunity to guarantee that millions more children will see a doctor six times in their first year of life. That is something we ought to do.

They get a complete physical exam. Height, weight, and other developmental milestones are mentioned. Hearing and vision are checked. Important topics, such as normal development, nutrition, sleep, safety, infectious diseases, and all kinds of other issues, are discussed; general preventive care.

Now, if we allow some of these discussions and debates today to bog this down and not get it passed in a bipartisan way, what we are preventing is, among other things, millions of children getting this care. It is as simple as that. So those who are going to use these other things to put them in the way as impediments or obstacles, to block this legislation, should be reminded and the American people should be reminded what they are stopping. This is not complicated. It is whether millions of children are going to have health insurance; and one aspect of that care or that health insurance is a well-child visit.

The other point I want to make in the early going today is there is a good bit of mythology that surrounds this legislation, and sometimes facts are not put on the table. This is mostly a question of whether working families are going to have health insurance. There is a frustration now that so many families are living with the loss of a job, the loss of a home, the loss of their livelihood and, therefore, their hopes and their dreams.

The least the Senate should do, in the midst of what is arguably the worst economic circumstance in more than a generation—maybe the worst economy we have faced since the 1930s; we can debate all that, but it is bad out there, it is real bad for families—the least we could do is to say, we may not have solved the larger health care challenge, we may not have fully debated all the aspects of health care we are going to debate and I hope we can vote on, but at least we can take an existing program that we know works, that is battle tested, that has results for 15 years now—my home State of Pennsylvania; when my father served as Governor, he signed this into law, which was the first big State to do it. He knew it worked. He knew it worked then, and he supported it strongly. It has worked in Pennsylvania. We have over 180,000 kids covered. This legislation would increase that to the point we could almost cover every child in the State, for example.

But in the midst of this economy, the least the Senate should do is say: We may not have solved all of our economic trouble, we may not have even solved significant aspects of our health care challenge, but the minimum—the minimum—this Senate and this Congress and this administration should do is get this done, and get it done now.

All these other debates are interesting and important, but, frankly, some of them are academic in nature. I know they have risen to the level of conflict, and I know the media likes to report on conflict. That is their job. But a lot of them, compared to the gravity of what is at stake here, are academic, in my judgment. And I think for some—not everyone but for some—they are deliberately calculated to stop this legislation, deliberately so. I hate to say that, but it is the way I feel. We are getting down to the details now of getting this done, and we have to be blunt and direct.

So we are going to have debates about parts of this legislation, but at the end of the day the question is whether the Senate is going to provide millions more children with health care. That is the question. All this other stuff does not amount to or does not rise to that level. They may be important debates, but they do not rise to that level.

One more point, and I will yield because I know we have colleagues waiting.

Seventy-eight percent of children covered by CHIP are from working families—working families. I will get into some of the other aspects as well. But at this time I will yield the floor because I know we have colleagues waiting.

The PRESIDING OFFICER. The Senator from Oklahoma.

Mr. COBURN. Mr. President, I wish to ask the Senator from Pennsylvania a couple questions, if he might be so kind as to respond.

Your earlier statement was without this, children will not develop, children will not become productive members of our society.

Having taken care of 4,000 infants and done well child exams on them, what is the number of children out there who are not getting vision and hearing screens right now?

Mr. CASEY. Well, I don't have a number on them.

Mr. COBURN. The number is zero because every one of them is tested.

Mr. CASEY. Let me finish.

Mr. COBURN. I control the time.

Mr. CASEY. Let me finish the answer. If we do not pass this—if we don't pass this, those children won't get that preventive care. It is as simple as that.

Mr. COBURN. That is simply not true.

Mr. CASEY. How are they going to get preventive care?

Mr. COBURN. They are going to get preventive care, and let me tell my colleagues how. What is the number of children who are not getting preventive care in the first 6 months of life right now? We don't know that number, and that is exactly the problem.

Here is the point: Every one of us wants children to get health care. It is not about wanting children to get health care.

Mr. CASEY. This is the way to do it.

Mr. COBURN. The fact is, we have an SCHIP program now and a Medicaid Program right now where we have 5.4 million kids who are eligible and who are not enrolled.

What we are doing is exactly the opposite of what President Obama stated we should be doing. He stated that we should be being responsible. I would contend that one of the areas of being responsible is to make sure programs work. When we have a program where last year, on average, 5.5 million kids were covered and another 5.4 million kids who were eligible weren't covered, I would tell my colleagues that program isn't working very well. It is not working. So what have we done? We have expanded the eligibility with this bill.

The debate over how we cover all the rest of Americans—we will have that debate, and I am sure we are going to have that debate this year. But the fact that 51 percent of the eligible children under the programs we have now, under the requirements we have now, are covered means 49 percent aren't. In this bill is a measly little $100 million to try to expand the enrollment of those kids who are already eligible.

I would think the average American out there who does have insurance or who may not have insurance might say: Well, why don't you make the program you have today work? We would have more kids covered than this bill will totally cover if we just made the requirements that the States and Medicaid directors throughout do the outreach to get the kids who are eligible.

The fact is, most of the poor women in this country—up to 300 percent right now—deliver under either title XIX or Medicaid. Their children are covered the first year of life. They are not going to miss the first well child visit. As a matter of fact, they are the ones—the biggest problem we have is getting the people who have coverage to be responsible and to bring their kids in. It is not about coverage; it is about responsibility—the very thing our new President said we need to reach up to and grab.

The other point that has to be brought forward in this debate is there is a lack of integrity with this bill. Let me tell my colleagues what it is. I do not doubt this Senator's integrity whatsoever. He is a friend of mine. When he speaks, he speaks from the heart. But when we manipulate the numbers and we drop a program from $13 billion to $8 billion in the last year of the first 5 years of its authorization so we don't have to meet the requirements of living within our means, and then we transfer $13.2 billion so we lower the baseline—this is all inside baseball—what, in fact, we are doing is we are lying to the American people to the tune of $41.3 billion. That is what CBO says. That is what CBO says in a letter to PAUL RYAN, the ranking member on the Budget Committee in the House, that, in fact, because we manipulated the numbers, because we cheated with the numbers, that it is actually going to cost $41.2 billion or $41.3 billion more than what we are saying it is going to cost.

Why is that important? Because we have decided to pay for this with one of the most regressive taxes toward poor people that we can. The consequence is that we are going to tax them and then we are going to wink and nod to the rest of the American public to say: This $41.2 billion, oh, don't worry about it; we are going to fudge the rules; we are not going to play the game honestly and with integrity. There is not going to be change you can believe in because the Senate's bill winks and nods at $41 billion. We all know that is there. We all know that is the only way they can do it to where it is scored in terms of pay-go.

So what we did is we paid attention to the numbers but not to the integrity behind the numbers. So the American taxpayer in some way or another will take on, from 2014 to 2019, an additional $41 billion. That is not change, folks, regardless of how good our goal is, regardless that every Member of this body wants to see kids who don't have care covered. Every Member wants to see that. We don't want the first child, we want every American covered—every American covered. But to do that under the guise of ''integrity in our numbers'' puts us right back into the same problems that got us into the deep financial problems we have today.

Let's be honest. Let's talk about what this bill really costs, what we know it would cost if we didn't play a game with the numbers, and what we could do to offset some of the programs President Obama says need to be eliminated so we can do the things that are good. There is not one attempt in this bill to do that. As a matter of fact, there is an attempt to cover non-U.S. citizens at the expense of U.S. citizens in this bill.

So basically we are going to keep a 9-percent approval rating because we are not going to earn the trust of the American people about being honest about what something really costs. I want to tell my colleagues, that undermines the whole debate. It sends us on a track to where we are going to be a Third World country because we won't even be honest about what things really cost. There is nothing wrong with having an honest debate about what this bill really costs, but to deceive the American people on what this bill actually costs—actually costs and will actually cost them—it is not going to cost us; it is going to actually cost them. It is going to cost them in terms of a lower standard of living and less opportunity.

Let's get honest about what it really costs, and it really costs $41.2 billion more than what we say it is going to cost. Let's do the hard work. If the bill is such that the Senator from Pennsylvania thinks it is absolutely necessary so children will develop, so children will become productive, isn't it worth getting rid of things that don't make

kids develop and don't make them productive? Isn't it worth us taking the heat to get rid of programs that aren't effective so we can actually pay for this? Instead, we are in essence lying to the American public about the true cost of this bill. That is what has to stop.

The integrity of those who want to do this is fine. The integrity of the numbers stinks. For us to say we are for children and have that honorable position that we are for children, but at the same time we want to undermine the faith in this place so they can't believe us in the future because we are going to charge them $41.2 billion more than it actually costs says a whole lot about us.

Every child should have an opportunity for health care. Every child should have prevention. Every child should get a hearing screen and a vision screen as we do now at every newborn nursery in this country. Every child should get their immunizations at every opportunity when they encounter—first at 2 months, 3 months, 6 months, 9 months, and a year, their first year of life. The whole purpose for that screening is to see if development is not normal.

The Senator from Maryland talked about the mandated oral health care in this bill. The mandated oral health care in this bill is a direct consequence of one of our other programs to help people. It is called food stamps. When we look at the mix of food stamps, what do we see? We see a high predilection for high-fructose corn syrup in the foods that we use food stamps to buy which causes the very dental caries we are fighting. So do we fix the real problem or do we treat the symptoms? We ought to be about fixing the real problems. So if we want to do and mandate oral health care in this bill, why don't we put a limitation on the high-fructose corn syrup products and high-glucose products that are the No. 1 cause of the dental caries the kids are having? An ounce of prevention is worth a pound of cure. But we didn't do that.

We didn't come forward with a total plan on health care, which is the whole problem as we try to expand this bill to meet a need. What we need to do—and I think the Senator from Pennsylvania agrees—is we need to reform all of health care. It needs to be based on prevention. It needs to be based on prevention. It needs to be based on teaching and preventing disease rather than treating disease.

My hope is that when we come through this, whatever we do, win or lose—whether my side wins or the other side wins—what should happen is Americans should win. The American people should win. What that means is an honest debate about the numbers—not a game with the numbers, an honest debate about the numbers—and what it really means is an honest debate about what the real problems are and not about things that aren't the real problems.

We have plenty of money in health care. We don't need to increase spending in health care. What we need to do is redirect the spending that is there. We spent $2.28 trillion last year on health care. Thirty percent of that money didn't go to help anybody get well or prevent anybody from getting sick. That is $600 billion. If we would look at it and say prevention is going to be No. 1, and No. 2 is going to be every American insured, we could go a long way toward solving this problem.

Unfortunately, however, we have chosen to start off the new SCHIP by trying to pull the wool over the eyes of the American taxpayer, by playing funny numbers. Why would we leave that out there? Why would we do that? It lessens the integrity of the debate. It lessens the quality of the work product we put forward. It undermines the very thing we need most from the American people, which is their confidence that we are doing what is in the best long-term interests of the country. This bill isn't in the best long-term interests of the country. The bill doesn't address the needs of the Medicaid populations out there today who aren't served who could be served if, in fact, we should mandate that the States go and do it. But we have chosen not to do that. We have chosen to expand up the chain before we fix the problems down the chain. We have chosen to take dollars and give them to those who are more fortunate instead of spending dollars on the people who are the least fortunate in this country, all in the name of a movement to close in ultimately on a single-payer health system. Let's have the debate about single-payer health system.

One final point I will make before I yield to my friend from North Carolina, and that is this: The most important thing after access is choice. We know what. Medicaid offers little choice. SCHIP offers little choice. The reason is because we have a payment system that rewards specialty and doesn't reward primary care. It started with Medicare, and it has worked its way through Medicaid. So our average pediatrician in this country makes about a fourth of what the average surgeon does or about a fourth of what the average gastroenterologist makes, and we ask ourselves: Why can't we get more pediatricians? Our average family practitioner makes a little bit more than that, but not much, and we ask ourselves: Why can't we get people out there into primary care? Our average internist makes just a little bit more but still about a fourth of what the specialists make because we have decided to pay it. Who is going to take care of them? Let me tell you who is going to take care of them: PAs and nurse practitioners. Some are excellent, some are great, but none of them have the training of a physician. We are slowly walking to a health care area where we are going to tell people you have coverage, but the coverage is you do not have choice and you do not have the same level of care because we have not chosen the priorities of compensating primary care, compensating pediatricians, compensating pediatric dentistry, compensating internists to care for these kids.

Choice is the most important thing, and the reason is because if a mother is taking her child to a health care professional in which she does not have confidence, do you know what happens? She does do what they say.

As we eliminate choice, which is what happens in SCHIP and Medicaid because so few physicians take it because the reimbursement rate is so low, we eliminate the doctor-patient relationship in establishing the confidence necessary to make sure, as the Senator from Pennsylvania said, that these kids will develop, that they will become productive.

The idea behind this whole program is we have taken away the most important attribute of consequences of care, and that is confidence in the provider.

I yield to my colleague from North Carolina.

The PRESIDING OFFICER. The Senator from Pennsylvania.

Mr. CASEY. Mr. President, I know our colleague from North Carolina has been waiting. I wish to make a couple brief points and come back to them. Our colleague has been waiting.

The Senator from Oklahoma makes a number of interesting points. Some of them are going to be the subject of even more debate. I will make a couple brief points about the question of enrollment and, therefore, outreach.

One of the biggest problems with the veto and the blockage of the children's health insurance legislation in 2007 was we did not have the resources to do the kind of outreach, to enroll those who are eligible but not enrolled. We would have gotten as many as 3.3 million more eligible kids had the 2007 bill not been blocked. Point No. 1 on outreach.

This bill, in fact, has steps to improve enrollment. In fact, it provides bonuses if States do a better job of enrolling children. We will get back to that in a moment.

The point about single payer that the Senator made, we are going to have a lot of debate about philosophy on health care overall and where this whole health care debate is going to go. That statement is premature or unrelated to what we are doing today.

What we are doing today is talking about whether we are going to pass the children's health insurance bill, not some new program but a program that has been tested. We want to add millions more children to that program.

The final point—and I know our colleague has been waiting—is the question of choice. The Senator from Oklahoma made a point about what choices people will have if they are enrolled, if families are enrolled in SCHIP, Medicaid or any other program of its kind. The problem for a lot of families right now is not that they are lacking in choice of options; the problem for a lot

of families, if their children are not enrolled, is they have no choice, they have no health insurance at all, except if they want to go to the emergency room, which is bad for the economy and bad for that family because it is usually too late in the game, so to speak, to get the kind of preventive care or to mitigate a problem.

For a lot of families right now, this is not a question of choices. They have no choice because they have no health insurance. I will come back to this point, but I wish to yield for my colleague from North Carolina.

The PRESIDING OFFICER. The Senator from North Carolina.

Mr. BURR. Mr. President, I thank my colleague from Pennsylvania. I do not wish to dwell on what he said, but let me make this point. He said we are not here to talk about the bigger health care piece. From the standpoint of the bill, he is exactly right. This is another attempt to grow the size of a Federal Government program to include more Americans in it without taking on the tough task of debating how we fix health care in this country; and what are the reforms that have to take place so every American has the opportunity to be insured.

Let me cite some facts about the Baucus bill. The Baucus bill spends $34 billion over 5 years. Actually, it might spend more than that based on CBO. It increases the number of enrollees in SCHIP by 5.7 million children. By the way, 2 million of those children are currently covered under their parents' insurance. Let me say that again. We are spending $34 billion over 5 years to increase enrollment in SCHIP by 5.7 million children, and 2 million of them are already covered under their parents' health care insurance.

When our benefit gets bigger, when it becomes even more inclusive, what happens? We say to the American people: Why should you pay for it? We have a government program to cover your children instead.

There is an alternative, and it has already been offered in one of the first three amendments. It is the McConnell amendment, Kids First. It spends $19.3 billion over the same 5 years. It enrolls 3.1 million new kids. For $19.3 billion, we get 3.1 million kids, and for $34 billion over 5 years, we only get 3.7 million new kids when you consider the 2 million that are already insured. The American taxpayers ought to ask us: For the additional 600,000 kids who are uninsured today whom we would be pulling in under the Baucus bill, what does it cost them per child? The answer is $4,000.

Having just had a son who reached an age in college that he can no longer be under my insurance, I was amazed when I tried to get this college senior insurance. Naturally, I turned to the Federal Government I work for and said: Surely you have a plan already in place for my child and the other 2 million Government workers who might fall into this classification.

They said: We certainly do. We have negotiated with the same insurance company for the same coverage that your son was under when he was covered by you.

What is the annual cost of that? I said to the Office of Personnel Management.

They said: $5,400 a year. Mr. President, $5,400 a year. The Government negotiated for my 22-year-old, healthy-as-a-bull son to be covered under the same insurance plan he had before.

What did I do? I picked up the phone. I called the university. I said: Surely you have plans for kids whose insurance runs out. They said: We certainly do. We have it with this company, it is this plan. It was the exact same coverage I had as a Federal employee. I asked the magical question I would ask anybody: How much does it cost per year? The answer: $1,500. One phone call and I saved $3,000 for a 22-year-old, healthy-as-a-bull college senior because I no longer let the Federal Government be a part of his health care decisions. I took him out. For $1,500, my son was covered. For every year under that 22 years of age, an amazing thing happens. Children get cheaper to cover. They get cheaper to cover because they are less likely to have serious illnesses.

The most likely period of illness for somebody under 18 is what Dr. COBURN referred to, the first year of life. That is why we make sure that in that first year of life, every kid gets the exams they need to make sure they are on the path to not only a successful life but a healthy life.

One should not be amazed to find out that the average cost for insuring someone under 18 years old is about $1,200 a year for full health coverage, compared to $4,000 under the Baucus bill. But what are we debating here today? This was the part, from my colleague's earlier statement: If we allow discussions and debates to bog us down, then this is a huge mistake. That is what he said.

We are having a discussion and a debate about what the American taxpayers are willing to pay for a benefit. We all agree the SCHIP program should be expanded. But some of us believe we ought to have the bigger debate now about how we fix the American health care system. How do we walk away from the Senate Chamber confident that every American has the opportunity to have a health insurance policy?

But, no, we have decided not to do that. We have decided to take one little piece—kids. Why? Because every American wants to do something for children. I want to do it. But I am also inclined to do the right thing for kids, not just anything for kids.

It was said earlier that this was a bipartisan bill. Let me point out for my colleagues and for those paying attention to this debate, when this legislation passed the Finance Committee, it got one Republican vote. I am not sure that is the bipartisan measurement tool President Obama said he needed when he was sworn in as our 44th President. As a matter of fact, he is aggressively coming to the Hill in about 1 hour to meet with Republicans to talk about the stimulus package because he does not want a stimulus package to just barely pass. He wants overwhelming bipartisan support. But bipartisan support was just defined here as when one Republican votes with every Democrat to pass a bill.

An amazing thing, if you look back to 2007—excuse me, 2008, I think it was—when a bipartisan SCHIP bill did come out of the Finance Committee. The ranking member voted for it, and the second highest ranking Republican in seniority voted for it. They came to the floor and spoke on it. Chairman BAUCUS—it was his bill. There was bipartisan support. So, what happened this year? Why didn't we start with the bipartisan bill we had last year? They took everything Senator GRASSLEY, everything Senator HATCH incorporated into the bipartisan bill, and they ran right over them. They threw it out. If you see something on the floor in the Senate today, it is road kill. That is where Senator GRASSLEY and Senator HATCH were thrown aside. Not in an effort to reach bipartisanship, but in an effort to be prescriptive as to exactly what SCHIP said and who it covered.

Make no mistake about it, when Senator CHUCK GRASSLEY comes to the floor—and every Senator in this Chamber understands it—and says that when you strike the 5-year waiting period before legal immigrants can get benefits, you have now opened the insurance program to new legal immigrants to America who have a responsibility, which is accepted by their sponsor, to make sure they do not accept Federal Government benefits. In other words, they are not at the taxpayer trough for at least 5 years.

What did we do with that important legal safeguard in this bill? We discarded it. We said: No, we will let you at the taxpayer trough. We will let you there on day one, even though when you came into the country you and your sponsor said: I will not do that for 5 years.

Not only did we do that, we actually threw away the verification that they are legal. We no longer under SCHIP will require a photo ID of somebody who walks in to be enrolled in SCHIP. All we say is you have to have a name and you have to have a Social Security number, one of which can be made up, the other of which can be bought. It is an amazing thing. We see it every day.

We have had every sort of immigration debate on this Senate floor. We are building a wall along the border today because there is an immigration problem. Yet we have now said: You know what, let's forget about that part about sponsorship when you come to this country legally. Let's forget about the obligation that your sponsor had to make sure that for 5 years they were there for the financial assistance you

needed. And, oh, by the way, in case there are folks out there who might not be here legally, let's not require them to show a photo ID to make sure the person who is in line matches the name they gave us and matches the Social Security number that was provided.

What we have done is we have opened a tremendous loophole. I am all for making sure, as I said earlier and Dr. COBURN has said, we want to make sure every American has health insurance. I am not trying to cut anybody out.

But if we want to target those people who are here legally for under 5 years, or those people, for heavens' sake, who are here illegally, then we should integrate them into a health care system that works.

Today, cost shifting alone in the American health care system costs $200 billion a year. If we are talking about having a debate on health care, let's talk about how to eliminate that $200 billion that doesn't go to prevention, doesn't go to wellness, doesn't go to insurance coverage. It goes to a big black hole that doesn't deliver health care to any American.

As I stated, this is not a debate about health care reform. It is a debate about growing a Federal Government program.

The SCHIP statistics: 7.4 million children were enrolled in SCHIP in 2008, a 4-percent increase over 2007. Yet, if you look at the devil in the details, there were only 5.5 million enrolled on average per month; 7.4 million total enrolled, 5.5 million on average throughout the year. And 5.4 million additional people are eligible for Medicaid or for SCHIP in this country and are not enrolled. Exactly what Dr. COBURN said earlier to my good friend from Pennsylvania. We have 5.4 million children who, today, are eligible for Medicaid or for SCHIP but are not enrolled.

I remember when Dr. COBURN and I held up the President's PEPFAR bill, when we were talking about an increase in funding from $15 billion to $50 billion for AIDS treatment in Africa. There was only one thing, when they increased substantially this amount of money for the program, they also dropped the requirement that 50 percent of the funds actually be used to treat people living with AIDS or HIV disease. They said we would leave that up to the NGOs implementing the program.

In other words, the NGOs said: To get any further into the population of people who have HIV and AIDS, that is going to be really tough. Rather than attempt to do something tough, we were going to lift the requirement that 50 percent of the money had to be spent on medical treatment.

So, what are we doing here? Now we have gotten to the SCHIP population that is tough—5.4 million kids who are eligible for Medicaid, eligible for SCHIP but are not enrolled. What are we saying? OK, States, we know it is tough to get to that 5.4 million kids so we are going to allow you to expand the pool you are able to solicit for this program. We are going to increase the percentage of Federal poverty that you are going to be able to include in this program—and I might say this to my good friend Senator BEN CARDIN, who served in the House with me, not only did I vote for this program, I helped craft the first SCHIP bill. I remember the laborious days when we sat trying to figure out exactly how to structure it, a program that was designed for States to run, for us to target those kids in America whose families did not have enough income to afford health care for them but had too much income to be eligible for Medicaid. It was targeted specifically at the families who were over 100 percent of the Federal poverty level but under 200 percent of the Federal poverty level.

That may be Greek to a lot of folks, so let me point out: At 200 percent of the Federal poverty level for a family of four, a person earns $44,000. Now we are up to 300 percent of poverty in SCHIP and 300 percent of poverty is $66,000 a year. But there is an exception, because New Jersey currently has a waiver to go up to 350 percent of the Federal poverty level in SCHIP. That puts them at $77,175, for a family of four.

What about the Baucus bill? The Baucus bill also allows, for New Jersey and New York, the ability to go up to 400 percent of poverty—$88,200 a year for a family of four.

For God's sake, do not lecture me on what SCHIP was designed to try to do in this country. We are leaving 5.4 million kids behind today who currently are eligible, and then you tell me there is some rational reason why we should roll over and pass something without a debate that increases the eligibility from where I had it targeted at $44,000 a year and raise it up to $88,200 a year. Why do others think we need to increase the eligibility? It is simple. Because it is too hard to reach the 5.4 million children who are below 200 percent or 300 percent of poverty who are eligible but not enrolled today in this country.

On another topic, the Medicaid FMAP in this country ranges from 50 percent to 75.9 percent with a ceiling of 83 percent, meaning that is how much the Federal Government gives to the States for our portion of their Medicaid payment. SCHIP offers a higher Federal match than Medicaid. The SCHIP match ranges from 65 to 83.1 with a ceiling of 85 percent.

If you listened to me list the numbers, I think you can figure out what is going on, on the Senate floor today. Why do some want to increase the eligibility limits? It is because, for some States under Medicaid, they get a 50-percent match, but under SCHIP they get a 65-percent match. So, you want to expand SCHIP eligibility because then the Federal Government is picking up 15 percent more of the tab. Why wouldn't some want the parameters of SCHIP to increase if we are letting the State off the hook for 15 percent of the cost they are obligated to cover?

As a matter of fact, in full disclosure, let me say that in North Carolina our SCHIP match rate is 74.8 percent, and our North Carolina Medicaid match rate is 64.6 percent.

I think it is important also to remind my colleagues that in the Baucus bill, even though it limits the SCHIP match rate to children and families below 300 percent of poverty, it still does allow Medicaid to, in fact, wrap around that. I call it the Medicaid sandwich. Medicaid covers people up to 100 percent of poverty, SCHIP fills in right here, and then Medicaid goes back right on top.

I am not sure there is a rational, sane person in the world who would design the health care system we currently have. Yet we are on the Senate floor today, and we will be here tomorrow and the next day and we will probably be here the entire week, and we are here trying to rationalize why this program needs to be reauthorized in its current form, why we should drop things that have been bipartisan in the past so we can increase the enrollment size to include somebody here legally but under sponsorship, or people here illegally but who want to be covered. We are here to debate whether the eligibility parameters should be increased.

I return to my colleague from Pennsylvania, to another one of his quotes. He said ''all this stuff doesn't rise to the level.'' Well, I believe it does. Everybody is entitled to their opinion. But I believe this stuff does rise to the level of Senate debate. I believe it rises to the level of public disclosure.

The American people look at SCHIP. And I might note, Mr. President, we had this debate last year as we got ready for reauthorization, when all of a sudden SCHIP dropped the ''S.'' I noticed, with the first two speakers on the majority side today, that everything refers to the CHIP program. I assume I have not picked up the provision in this bill yet that eliminates this as a ''State'' program, and now it is going to be only the ''Children's Health Insurance Program,'' run by the Federal Government, administered by the Federal Government, and the States will not have anything to do with it.

I haven't found that provision yet but, then again, we have not had the bill long enough to read all the nuances of it. We have had it long enough to read the budget aspects of it, and I think Dr. COBURN alluded to that very effectively.

CBO says the Baucus bill spends, in fiscal year 2012, $14.98 billion. Rather than continue that spending level for SCHIP into 2013, the bill somehow drastically reduces the allocation to only $5.7 billion in 2013.

Let me cover that again. In 2012, we allocate $14.98 billion for SCHIP, almost $15 billion. But under the bill's

structure in 2013, we allocate only $5.7 billion for the health care of that same population. Somehow we are either going to lose two-thirds of the kids under the program or we are miraculously going to find another $9 billion.

You know, numbers like $9 billion appear frequently up here. It is called debt. It is called debt on our children and our grandchildren. We make it up, we print it, we fund it, it goes into place.

I might add, I am not sure I am the only one who caught onto this. I think Senator BAUCUS caught onto it too when he wrote the bill because in 2013 he also has a one-time charge of $11.4 billion, not counting the 2013 allocation. I was worried that I might not have read the numbers right the first time until I looked at 2013 and I found the one-time charge.

He just doesn't want that amount included as a score under the 5-year timeline. Why? Because as Dr. COBURN said, we are being less than honest with the American taxpayer. We are suggesting that this program can be run for X and we know it is going to cost Y. How in the world can we take something up as serious as children's health insurance and lie about the numbers? If we lie about the numbers, how do we expect the American people to believe us when we say we are only covering 300 percent of poverty, or we are only covering kids?

On that point: We are only covering kids? I know it will be shocking to some—probably not to all—to find out that we currently cover 334,616 adults under the SCHIP program: 334,616 adults under the State Children's Health Insurance Program. Why? Because we allowed States to increase the eligibility under waivers because it was too tough to find the 5.4 million kids who were eligible under the original structure of the SCHIP bill that we wrote and passed in 1997.

In 1996, we conceived a plan, passed in 1997. It went for 10 years—$40 billion. It went for 10 years, $4 billion a year. Before we had ever gotten to the end of the 10 years we already changed the parameters, already changed the eligibility, we already put more money into it. We knew 10 years ago, now 11, soon to be 12 years ago, we needed to fix our health care system. We didn't do it under the Clinton administration, we didn't do it under the Bush administration, we didn't do it in the 104th Congress, 105th, 106th, 107th, 108th, 109th, 110th, 111th—well, maybe in the 111th Congress. We are in the 111th now.

And regarding the assertion that we should not have this health care debate? We should have this debate. We should fix it. For once, the Senate ought to step up and say let's quit continuing to do something that we know is broken and let's fix it. Let's not just increase eligibility of a broken program, let's fix the program. Let's not just talk about supplying an insurance product to a certain segment of America. Let's do it for everybody. Let's have an honest debate and discuss whether every American ought to be insured and let's have a debate as to how we get there.

Over the next 2 days we are going to talk extensively about this program. Today a Grassley amendment has been offered—it strikes the ability for legal immigrants to be brought into the program during those first 5 years. And a Hatch amendment which is very clear. If a State wants to bring in other people into the SCHIP program, then they have to verify that they have reached a threshold where 95 percent of the eligible kids are enrolled in the program. Mr. President, 95 percent of all the eligible kids would have to be in the program in order for this to be expanded—I think this is reasonable. If you are concerned with covering children, then I think this is a slam dunk amendment, and I might add it was part of the bipartisan bill last year.

The last amendment is Kids First, offered by Leader MCCONNELL. I might reiterate one more time, it spends $19.3 billion over 5 years.

It increases the enrollment in SCHIP by 3.1 million kids, as opposed to the Baucus bill that spends $34 billion over 5 years that increases enrollment by 5.7 million but does it by enrolling 2 million kids who are currently under their parents' insurance. That means our additional costs, the cost to the American taxpayer, is $4,000 per child for the additional 600,000 kids who would have health insurance for the first time under the Baucus bill because they are currently uninsured.

But we have options. We will have more amendments. We will have more debates. I look forward to working with my colleagues on what I think is a very serious piece of legislation.

I yield the floor.

The PRESIDING OFFICER. The Senator from Pennsylvania is recognized.

Mr. CASEY. Mr. President, a couple of points: Obviously, based upon what my two colleagues have said this morning, we do not agree on a number of points. That is pretty obvious. But I think there is one area of common ground which maybe we can make progress on; that is, the point that was raised by both the Senator from Oklahoma and the Senator from North Carolina about the eligible but not enrolled.

I know one of the biggest problems over time, for example, in Pennsylvania with this program has been that you have a great program but not enough people know about it. If you do outreach by way of television advertising, that is the most effective by far, but any kind of outreach would be welcomed certainly by me and by those who are supportive of the legislation. The problem is, if we do not pass this legislation, all of the good intentions that I think are evident in what was said about getting people enrolled is without merit. So that is an area on which we can agree.

I have to say, one of the things I get from this chart with the carriers on it, one of the points that has been made about this is, because it is a Federal and State program that is obviously supported by public resources, the impression is that somehow it is a 100-percent public program, it is just growing government, and the usual arguments that are made against it.

I understand the philosophy behind it. This is often lost; that this is indeed now for 15 years, and will be, a very successful public-private partnership. These, for example, are in Pennsylvania, the private providers for the Children's Health Insurance Program in our State: Aetna, Ameri Choice, Capital Blue Cross, First Priority Health, Highmark, Highmark Blue Cross Blue Shield of Western Pennsylvania, Keystone Health Plan, Unison Kids and UPMC for Kids. This is the very definition of a successful—remarkably successful—public-private partnership where hundreds of thousands of children in our State and literally millions across the country have been provided health insurance.

With regard to the numbers, where are we now in terms of covered versus not covered under this program? Nationally, the covered number is 6.7 million right now. The number of children who are not covered amounts to 4.1 million children. And 83 percent, or 3.4 million of those 4.1 million uninsured covered by the legislation are currently eligible.

So we have all of these children, more than 4 million children, who are eligible but are not enrolled. Some of the issues we talked about earlier about enrollment, simplifying paperwork, and eliminating bureaucratic areas, we should work on that, and that is what is contemplated by this legislation: funding for outreach and enrollment, which has been pushed by people in both parties in connection with this legislation, and incentives to States to encourage them to provide coverage for those who are eligible but not enrolled.

The point was made also about bipartisanship. Look, the definition of bipartisanship does not mean unanimous. I realize in the Finance Committee there was more Democratic support than Republican support. But the fact remains this program, the birth of this program and the continuation of it, has been bipartisan. The votes in 2007 were evidence of that, and I think even the debate today and the support—I should say more than the debate—the support is bipartisan.

When this is voted on in the Senate, you will have a lot of Democratic support, obviously, but you will also have significant Republican support. That is the definition of bipartisan, in my judgment. Maybe it is in the eye of the beholder, but I am trying to emphasize this is indeed bipartisan.

We are going to have time today in the hours ahead of us on the question of immigration. Two points I wanted to make: One is the 5-year bar. Basically,

what we are talking about is a restoration of something that was in place before. Prior to 1996, lawfully residing immigrants, those holding green cards and those defined as ''permanently residing under the color of law,'' those individuals, prior to 1996, were indeed eligible for Medicaid. And this amendment, the Rockefeller-Snowe-Bingaman-Kerry-Wyden, a lineup of names that is bipartisan, by the way—that amendment offers a restoration of eligibility for only some of these immigrants: children and pregnant women who are here lawfully—lawfully—who intend to remain in the United States and who meet all other Medicaid and CHIP eligibility requirements. That is what we are talking about. We are talking about children, legal immigrant children, and pregnant women.

Removing the 5-year bar could help States provide coverage to additional low-income children. What do we mean by that? You would think, listening to this debate, that removal of this is somehow brandnew, that it has never happened before, and no States are doing that. In fact, right now 23 States use their own funds to pay for health coverage for lawfully residing immigrants, immigrant children. Let me say that again: lawfully residing immigrant children or pregnant women, those 23 States, during the 5 years, who have become ineligible for Medicaid or CHIP. If this 5-year waiting period were removed, these States could secure Federal matching funds which would free up State funds to cover additional low-income children.

So this is something States are wrestling with now, and what this would do is provide an option for States to have some help in the coverage they are providing for those individuals. So it is nothing dramatically new, but I think it is humane, and it is prudent based upon what has happened with this program over time.

Let me make one other point about the issue of legal immigration and the so-called public charge: Nothing in the bill changes the agreement a person makes when sponsoring an immigrant, when an immigrant comes to this country. Citizenship and Immigrant Services, so-called CIS, does not consider participation in a public health program a failure to support the immigrant. Longstanding Citizenship and Immigration Service guidance makes it clear that immigrants will not be considered a public charge if they use health care benefits, including Medicaid and CHIP, prenatal or other low-cost care at clinics. So when we are talking about this issue, it is important to put that on the table, what Citizenship and Immigration Services would consider to be a public charge.

I want to get back to some of the provisions in the bill. I wanted to get that chart on rural children. One of the discussions we have had over many months now is, Who benefits from this program? Certainly, children across the board, children in urban and suburban communities. But what is often not emphasized is—and I want to make this point because I have a significant part of our State that is rural, and most of our State, when you get outside of the major urban areas of Philadelphia and Pittsburgh, is indeed rural. Rural children are more likely to be poor. Nearly half of rural children live in low-income families at or below 200 percent of the poverty level.

In this economy, when you consider the confluence of bad circumstances for rural children and rural families, here is what you have: escalating costs for energy, which disproportionately affects rural Americans; significant job loss in rural communities; an inability to have access to health care—I should say a lack of access to health care in rural communities. All kinds of problems.

This bill, among the many other good things it does, would have a disproportionately positive impact, in my judgment, when you look at the data on rural children. Rural children increasingly rely on children's health insurance. More than one-third of rural children rely upon the Children's Health Insurance Program or Medicaid. One-third of rural children rely upon one of these two programs.

So in this debate it is important that we stress the broad reach of this bill as it pertains to children from across the board, across the demographic and even economic landscape.

Mr. President, I yield the floor.

The PRESIDING OFFICER. The Senator from Oklahoma.

Mr. COBURN. I will make this short because I know we have a swearing in.

I wanted to make a few points. When President Obama talks about being responsible, if you sign an affidavit that you will cover and be the sponsor for a legal immigrant in this country, you ought to do that. That is what he is talking about. He is not talking about: I will do it until I can get someone else to take care of my responsibility, talking about it, if you sign an affidavit that you will do it.

The idea that 22 States already do this is great. If States want to do it, that is what makes our Union so great, that 22 States can, except now they cannot afford to do it, and we are going to be bailing them out to the tune of about $300 billion on Medicaid and SCHIP programs in the supplemental or the spending package or the stimulus package that is coming through.

What this bill is going to do is make permanent that people do not have to be responsible when they, in fact, sign an affidavit that they will sponsor a legal immigrant.

One final point I would make is, the Senator from Pennsylvania listed all of those premium assistance programs that Pennsylvania has because that is what they are, premium assistance rather than a regular SCHIP program. Well, in this bill you have extremely limited any new premium assistance programs without an absolute mandate and an absolute mandate on what kind of program you have. You will be in an HMO. You will not have the doctor of choice, and you will not go where you want; you will go where you are sent.

So great points, great need in our country, great debate, but integrity first. Be honest with the numbers about what they really mean. Everybody in this Chamber knows they are not, but we are not going to change that. Even if we offer an amendment, it is not going to go anywhere because nobody knows what to get rid of to be able to afford to pay for that.

I yield the floor.

Mr. CASEY. Mr. President, I suggest the absence of a quorum.

The PRESIDING OFFICER. The clerk will call the roll.

The legislative clerk proceeded to call the roll.

Mr. REID. I ask unanimous consent that the order for the quorum call be rescinded.

CERTIFICATE OF APPOINTMENT

The VICE PRESIDENT. The Chair lays before the Senate a certificate of appointment to fill the vacancy created by the resignation of former Senator Hillary Rodham Clinton of New York. The certificate, the Chair is advised, is in the form suggested by the Senate.

If there is no objection, the reading of the certificate will be waived, and it will be printed in full in the RECORD.

There being no objection, the material was ordered to be printed in the RECORD, as follows:

STATE OF NEW YORK

Executive Chamber

CERTIFICATE OF APPOINTMENT

To the President of the Senate of the United States:

This is to certify that, pursuant to the power vested in me by the Constitution of the United States and the laws of the State of New York, I, David A. Paterson, the Governor of said State, do hereby appoint Kirsten E. Gillibrand a Senator from said State to represent said State in the Senate of the United States until the vacancy therein caused by the resignation of Hillary Rodham Clinton, is filled by election as provided by law.

Witness: His excellency our Governor David A. Paterson, and our seal hereto affixed at 11:00 a.m. this twenty-third day of January, in the year of our Lord 2009.

By the Governor:

DAVID A. PATERSON,
Governor.

LORRAINE A. CORTÉZ-VÁQUEZ,
Secretary of State.

[State Seal Affixed]

ADMINISTRATION OF OATH OF OFFICE

The VICE PRESIDENT. If the Senator-designate will now present herself at the desk, the Chair will administer the oath of office.

Mrs. GILLIBRAND, escorted by Mr. SCHUMER, advanced to the desk of the Vice President; the oath prescribed by

law was administered to her by the Vice President; and she subscribed to the oath in the Official Oath Book.

The VICE PRESIDENT. Congratulations.

(Applause, Senators rising.)

RECESS

The VICE PRESIDENT. Under the previous order, the Senate stands in recess until 2:15 p.m.

Thereupon, at 12:34 p.m., the Senate recessed until 2:15 p.m. and reassembled when called to order by the Presiding Officer (Mr. CARPER.)

CHILDREN'S HEALTH INSURANCE PROGRAM REAUTHORIZATION ACT OF 2009—Continued

The PRESIDING OFFICER. The Senator from Ohio is recognized.

Mr. BROWN. Mr. President, I suggest the absence of a quorum.

The PRESIDING OFFICER. The clerk will call the roll.

The legislative clerk proceeded to call the roll.

Mr. BROWN. Mr. President, I ask unanimous consent that the order for the quorum call be rescinded.

The PRESIDING OFFICER. Without objection, it is so ordered.

The Senator from Ohio is recognized.

Mr. BROWN. Mr. President, today with the advent of the 111th Congress, the Senate is considering legislation to renew and expand the Children's Health Insurance Program, sending a clear and definitive message that this country will no longer turn its back on our 9 million uninsured children.

When we pass this bill, we will make it clear that the health and well-being of our children—in bad economic times or, in the future, in good economic times—the well-being and health of our children comes first.

After 2 long years and repeated vetoes from former President Bush, this legislation finally has a chance of becoming law, thanks to the support of a new President who is committed to reforming our Nation's health care system.

It is my sincere hope that the passage of this legislation will be the beginning—the beginning—of a major overhaul of American health care, which ultimately will provide all Americans with the quality, affordable health care coverage we all deserve as Americans.

The Children's Health Insurance Program is a success story. It was created about 13 years ago, in 1996, to provide health coverage to children who would otherwise not be insured. The program provides health insurance to low-income families who do not qualify for Medicaid but who are unable to afford private coverage, to reduce the number of uninsured children in working families—underscore that, Mr. President: in working families—by about one-third.

Despite its huge successes, there is room for improvement. Sadly, millions of American children remain without health insurance, even though the law states they are eligible for it.

Today, we have an opportunity to take decisive action to bridge that gap and to reach children who need this coverage desperately but who are not receiving it. The legislation before us today would provide coverage to an additional 4.1 million uninsured low-income children. It would improve access to dental coverage. It would improve the public health by enabling legal—legal—immigrant children to receive care in doctors' offices rather than taking them to more high-cost, less primary care, emergency rooms.

If signed into law, S. 275 would have a profound impact on children and families nationwide, including in my State of Ohio, including Toledo and Akron and Canton and Mansfield and Cincinnati and Bellaire. It would provide approximately $294 million to Ohio in fiscal year 2009, helping my State cover approximately 245,000 uninsured children—children such as Emily Demko from Athens County.

Emily was born with Down Syndrome. When her mother Margaret made the decision to stay at home to care for Emily, their family found themselves without health insurance. The Demkos looked into many options, but no private insurer would cover Emily, at any cost, due to her genetic, preexisting condition. Luckily, the Demkos found they were eligible for Medicaid. However, during their 6-month reauthorization meeting, they were informed their income was—get this—$135 per month too much to qualify any longer. Mr. President, $135 too much to qualify for Medicaid any longer.

Since Emily's medical bills were in excess of $3,500 a month, the Demkos had to make decisions no parent should ever have to make. They had to decide what therapies and treatment they could afford for their daughter.

Although they have done their best to manage Emily's medical care, being uninsured has left Emily without access to needed hearing tests, corrective treatment for an eye condition, and several blood tests to scan for conditions likely to occur with Down Syndrome.

It is for children such as Emily that we must support the reauthorization and the expansion of CHIP. Access to health coverage will provide Emily and so many others around our great Nation with the opportunity to live a healthier, happier, more productive life, regardless of their medical condition.

For the third time in my Senate career, I have come to this floor to advocate for the reauthorization and expansion of the Children's Health Insurance Program. I did it in the House 13 years ago, when this program was first conceived and when we first enacted it.

For the third time in my Senate career, I have come to the Senate floor to speak on behalf of the 9 million children in this country who do not qualify for Medicaid but whose families cannot afford health insurance.

For the third time in my Senate career, I have come to this floor to cast a vote in favor of legislation which will enable parents to help their children when they are ill. In my opinion, there are few legislative or ethical priorities more important than that.

This is the third time I have advocated for CHIP on the Senate floor. I believe, I hope, the third time will be the charm.

Mr. President, I suggest the absence of a quorum.

The PRESIDING OFFICER. The clerk will call the roll.

The legislative clerk proceeded to call the roll.

Mr. BROWN. Mr. President, I ask unanimous consent that the order for the quorum call be rescinded.

The PRESIDING OFFICER. Without objection, it is so ordered.

Mr. BROWN. Mr. President, there was an amendment offered earlier by Senator HATCH with whom I sit on the Health, Education, Labor and Pension Committee. Senator HATCH has played a major role in health issues in this country and I respect him for that. His amendment, however, to this bill is sort of the same old same old. We have seen this throughout the Children's Health Insurance Program debate. We saw it last year both times when the President vetoed the bill. We saw it raised by opponents in the House of Representatives. We saw it raised many years ago. When the amendment says States should have to enroll at least 90 or 95 percent of their kids under 200 percent of the Federal poverty level before they can enroll children at higher income levels, it pretty much says no more children in the Children's Health Insurance Program. I wish they would simply be more direct saying, We don't want more kids in here. Instead, they say if you can't find close to 100 percent of these children who are eligible—this is a big country, it is a complicated country; so many of the people we are trying to insure are living economically on the margins. There are two children with a single parent who has moved from one job to another. Those children often move across town or to another county as their mother or father get another job—a job that may pay $20,000 a year and a job without health insurance—so the Children's Health Insurance Program is so important to them. So when they build in this ''standard'' that virtually everybody—95 percent of all children eligible have to be enrolled before you can enroll new children who are a little bit better off—a little bit better off isn't a family making $100,000 a year; it is a family making much less than that without health insurance and simply can't afford it. Even mandatory programs we have found around the country don't have a 95-percent take-up rate. It is simply impossible for Government or for private businesses

or for social services working with Government to get to 100 percent of the people who are eligible. So what this does is say no more children would enroll.

We know health insurance is becoming less and less affordable for families at every income level. I know what has happened in my State. As the Senate majority leader told us earlier today—an hour ago—85,000 people in this country lost their jobs today. Eighty-five thousand people lost their jobs today. In my State, we have lost 200,000 manufacturing jobs in the last 8 years. It was 200,000 as of last October. That number has gone up. We hear about plant layoffs such as the third shift at Lordstown in northeast Ohio, a General Motors plant that assembles goods. As the Presiding Officer knows from what has happened to his plant in Delaware, we know what happens when people are laid off from these jobs. They cut off the third shift at Lordstown. We are seeing Wilmington, DHL in southwest Ohio, 7,000 jobs over a several week period have been terminated in a city of about 13,000 people. That DHL plant is the largest employer in a six-county area, in each of these six counties—in Clinton County, Brown County, Adams County, Highland County, and two other counties.

The point is we don't want with this economic downturn—we don't want to turn back the clock. It is the worst possible time to cut back on States' tools for helping low-income children. We want these children to become insured, not to find ways to deny coverage. The Hatch amendment does that. That is why it is so important later today, if and when we vote on this amendment.

Another point. There are about 150,000 children in my State. My State has a population of around 11 million. There are about 154,000 of our children in my State—enough to fill Ohio State Stadium. The Presiding Officer, even though he is from Delaware, is an Ohio State graduate. He knows how big that stadium is. It holds more or less 100,000 people in one place—Columbus—in the heart of the State. There are 150,000 children who don't have insurance, enough to fill that stadium one and a half times. That number grows. That was sort of yesterday's number. That number grows every day. Ohio has already lost 100,000 jobs in this recession. If the pace of job loss accelerates this year as expected, more and more children will suddenly become uninsured. President Obama has already said the 2009 economy is going to be even worse than the 2008 economy. That is why Senator INOUYE and so many others in this body, Senator MIKULSKI and others on the Appropriations Committee, are working so hard to put a stimulus package together that will have an impact as quickly as possible as we work our way through the second year of this recession.

In these tough economic times, the risk of being uninsured is even greater. Many Ohio families, as we know too well, are only one emergency room visit away from bankruptcy and foreclosure. Too many have declared bankruptcy, too many people have lost their homes to foreclosure, too many people have lost their jobs to this recession. We should not turn our back on them in providing health insurance to their children. Again, these are mostly people who are eligible for the Children's Health Insurance Program, mostly children in families where mom or dad or mom and dad have jobs and simply are not making enough to buy health insurance and those employers for whom they work simply don't have the ability to provide insurance to these families. That is why this legislation is so important. That is why defeating the Hatch amendment is so important.

I would add that in the Hatch amendment, the 95-percent rule is especially for those who want to enroll legal immigrant children and pregnant women. Again, that is a standard I don't think we can meet, because no matter how hard these States try, they can't find 95 percent of the people who are eligible. That will mean too many children of legal immigrants, legal people in this country, too many pregnant women simply would not have insurance for their children that we should offer them in this body.

Mr. President, I note the absence of a quorum.

The PRESIDING OFFICER. The clerk will call the roll.

The legislative clerk proceeded to call the roll.

Mr. KYL. Mr. President, I ask unanimous consent that the order for the quorum call be rescinded.

The PRESIDING OFFICER. Without objection, it is so ordered.

The Senator is recognized.

Mr. KYL. Mr. President, the legislation that is before us is a reauthorization of the Children's Health Insurance Program, but it is, as I said yesterday in my remarks, seriously flawed in a number of respects. Because of that, the minority leader, the Senator from Kentucky, and I have offered an alternative. It is called the Kids First Act. The Kids First Act is an effort to reauthorize this important program but address the numerous flaws in the pending proposal so we can adopt something that literally puts kids first.

I spoke yesterday about several of the problems with the underlying bill. First, the problem of crowding out private coverage. We created this Children's Health Insurance Program in order to help families who did not have insurance. But the bipartisan Congressional Budget Office has noted that because of provisions in the underlying bill, there are actually over 2 million people—in fact, 2.4 million people—who will go to the Government insurance program who already have private health insurance that is perfectly adequate to their needs. The reason primarily is because their employers obviously appreciate the fact that it is costing them money to insure their employees' families and it will be a lot cheaper if those families go to this Government-run program. Our effort was never to cause people to leave the health insurance coverage they have to come to a new Government program. Our effort, when we adopted the kids insurance program, was to provide insurance for those who did not have it already.

This crowdout effect is well known, and it is well understood. It can actually be quantified as the Congressional Budget Office did. Last year, we offered a couple of amendments to ensure that the crowdout effect would be minimized. The amendment I offered was not adopted. But recognizing that there was a serious problem, when the Democratic leaders in the House and the Senate wrote the bill that ended up passing both the House and the Senate, though it was vetoed, it was supported by Democratic majorities in both the House and Senate, and it had some language related to crowdout. I thought it was insufficient language, but nevertheless I understood the necessity of dealing with the issue.

That language is not in this bill. So in the committee, I offered the Democratic language. The Senator from Montana, the chairman of the committee, helped draft it. As I said, it was supported by Democratic majorities in both the House and Senate. Essentially on a party-line vote, that amendment was rejected.

We need to deal with the problem of crowdout. The legislation Senator MCCONNELL and I have drafted does put kids first. It tries to deal with the problem of kids who do not have insurance rather than taking families who are already insured and transferring them to a Government program.

Another problem we spoke of is the fact that as this program has expanded, it does not just relate to families who are at the poverty level or even twice the poverty level but three and four times the poverty level. In other words, it can actually cover families in two States—up to $88,000 a year in New York and about $10,000 less than that in New Jersey. That is clearly wrong. We are trying to talk about low-income families. In fact, if you add other assets of a family that are not counted in income, you could literally have $40,000 in additional assets and, in New York, be making $128,000 a year for a family and be eligible for this low-income children's health care—$128,000-a-year income. That is wrong. What that does is take money from the State of the Senator from Oklahoma, it takes money from my State of Arizona and other States and transfers that. We are trying to be as frugal as we can. Our limit is 200 percent of poverty. That is twice the poverty level. That is what we pay for in Arizona. But we are having to pay for more than twice that much for families in New York. That is not fair. The program Senator MCCONNELL and I have offered as an alternative deals with that problem as well.

In addition, we ask that people demonstrate that they are eligible for this coverage. That has always been a part of the program. The bill that is before us weakens those provisions so that you do not have to have the same kind of documentation that you are eligible for the program. It expands the program to legal immigrants in this country who have always had a contract that they will not become part of our public welfare system.

One of the really interesting things is the budget gimmick that is used which Senator MCCONNELL and I believe should not be part of this program. It is a budget gimmick to circumvent the Senate's so-called pay-go rules by which we ensure whatever the costs are, there is a way to cover those costs. The way that is done is that the program, even though it is a 10-year program, as all of our authorizations are—after 5 years, there is just an assumption that it does not cost very much anymore. Of course, under that assumption, we would have to disenroll millions of people from this program. That is never going to happen. Everybody knows that. Everybody knows that gap in financing would be filled, and as a result, the program would actually cost $40 billion more than it is alleged to cost as the bill came out of the committee. And that is by CBO's number, $41 billion-plus.

Those are some of the deficiencies with the legislation.

The amendment Senator MCCONNELL has offered, the Kids First Act, is very targeted and I think a much more responsible approach to the problem. It does reauthorize the children's health care insurance program. It preserves health care coverage for millions of low-income children. It actually adds 3.1 million new children to SCHIP. It minimizes the reduction in private coverage, the so-called crowdout I spoke about earlier, by targeting SCHIP funds to low-income children, not higher income families who may already have access to insurance. By the way, it is offset without new tax increases or a budget gimmick such as the program before us is.

I encourage my colleagues to ask us questions about this amendment. If they have concerns about it or would like to debate, I would love to have that debate on the floor, if anyone would like to engage me in a discussion about why this is not a superior alternative.

The bottom line is, we have two choices. We have a budget buster that does not protect SCHIP coverage for low-income children, that represents an open-ended financial burden on taxpayers and takes a significant step toward Government-run health insurance or the amendment Senator MCCONNELL has filed, a fiscally responsible SCHIP reauthorization that preserves coverage for low-income children. It is fully offset without a budget gimmick or a tax increase, and it minimizes the so-called crowdout effect on employer-sponsored health coverage that people have today.

I think the answer is clear. The Kids First Act is the right solution. And when we have an opportunity to vote on that, hopefully a little bit later this afternoon, my colleagues will take a good hard look at it and see if they don't agree that is a good approach to the reauthorization of SCHIP and support the McConnell amendment.

The PRESIDING OFFICER. The Senator from Ohio.

Mr. BROWN. Mr. President, I appreciate the comments of my friend and colleague from Arizona. The minority leader filed this amendment in 2007. It was not a good idea then. It simply knocks too many children. These are not rich kids. These are sons and daughters of people who are working who are not making a lot of money, are not making enough that they have health insurance or can afford out-of-pocket health insurance. They are working for employers who do not provide it—small businesses, lower income workers. I don't want to do anything that takes away the eligibility of those children.

When I hear about the crowdout provision Senator KYL discussed, I want to make a couple of comments about that. I just don't think it exactly is going to work that way.

The CHIP statute already requires States to determine and monitor whether crowdout is occurring and adopt policies to limit crowdout if it does occur. Most States that cover children at more moderate income levels have imposed 3- or 6-month waiting periods to prevent families from dropping employer-based coverage to enroll in CHIP. There may be a time when families are not going to want to do that.

It is not as though States want to give away this money. States are squeezed today every bit as much as many families are squeezed. States already have a strong interest in monitoring and preventing crowdout. They don't want to spend limited resources on children who already have private health insurance.

This bill does a good job of targeting the lowest income children. The new enrollment options, the performance bonus, and the outreach funding all help to achieve everyone's shared goals to ensure that the most vulnerable are covered.

We accept that our friends on the other side of the aisle want to insure people at 100 percent, 150 percent of poverty, but we also want to extend this to families who still do not have insurance for their children because of their economic situation. These are not Congressmen's kids. These are children whose parents are working at places that do not offer insurance and do not make enough money that they can out of pocket come up with health care coverage for their children.

The PRESIDING OFFICER. The Senator from Oklahoma.

Mr. COBURN. Mr. President, I wonder if anybody has ever asked the question—it has certainly never been answered—if you are a family and you qualify at the new 300 percent and you are buying your own insurance and you are covering your two kids, what happens when you transfer your kids to SCHIP, the Children's Health Insurance Program? What happens to your premium? I can tell you what happens to the premium. Do you know what happens to the premium? It goes down zero because health insurance is sold as an individual or a family product. So by taking two children, if I am earning 300 percent of poverty, and taking them off and transferring—now I am paying for it—and transferring that to the State Children's Health Insurance Program, the taxpayers of this country now will pay for that premium about $2,200 a piece when you can buy it in the private market for $1,100 a piece, but the parents will get no decrease in their insurance premium. That is why the crowdout provision is so negative for the American taxpayer and the generations that follow us.

My friend, the Senator from Ohio, mentioned that everybody wants to cover the 200 percent and below. The fact is, we have done a terrible job of covering the 200 percent and below. There are 5.4 million children out there today who do not have health insurance, whose parents do not have health insurance, who are eligible for Medicaid and SCHIP today, and they are not signed up. What are we doing? We are expanding a program that has only gotten about 51 percent of the kids who are eligible right now signed into the program. We are also being dishonest about what it costs. It is actually going to cost $42 billion more than what we say it is going to cost. Nobody will deny that. So why would we not want to have something that will limit the amount of crowdout because as we take money for kids who are now insured and put it to them through a Government program, it means these same 5.4 million kids are still not going to get covered.

We have not improved the program by increasing the eligibility. What we have done is we have just moved the income scale up to $60,000, some $62,450 a year, and we say: We will now cover your kids, and even if you have them covered now, you will not get any break from your insurance. But the same 5.4 million kids who are in poverty or at 200 percent of poverty still are not covered.

What are we doing? Why wouldn't we want to fix it to where all the kids who are out there today who do not have insurance, who are 200 percent and below the poverty level, why aren't we making sure they are covered? Why are we not doing that? Why are we not saying: States, you can go to the 300 percent if you want but only after you have covered the kids whom the program was designed for in the first place.

There is an amendment by Senator HATCH in that regard. Why would we spend all this extra money?

By the way, we just met with the President. Other than the short-term financial struggles we are in, one of the big concerns with him is the fact that we have an unending entitlement disaster before us and we are getting ready to make it worse. Why would we not address that? Why would we say we are going to help kids but not really help kids? Why would we say we want to help the poorest children and the families who need it the most but still ignore them?

There is an answer to it. There is an answer to it, in that we want to move whichever way we can to eventually have a single-payer system in this country. We gutted the Premium Assistance Program. The Senator from Pennsylvania listed all the great things about the Premium Assistance Program. He listed all the different programs in Pennsylvania. Those are gutted under this bill. You can have one, but by the time you get it, nobody will want to have it.

We have taken what people have and said maybe we could spend $500 per kid per year to keep them in a health insurance program that the parents might have at work, but instead we are taking them all out and putting them in a Government program that costs twice as much as it does to buy them the same insurance in the open market.

Crowdout is a real phenomenon, but the most important thing is it helps the people who need it the least the most. And it helps the least those people who need it the most. That is what we are doing in this bill. We are not helping the lowest. We are only moving it up the chain and we are saying if you make $62,000 a year in this country, your children can be covered by the Government.

Why would you not want to do that? We do not have any other Government program that people do not voluntarily take if we put it out there. That is in the face of the fact that this year—hear my words very clearly—this year the true Federal budget deficit will be $1.6 trillion. The Government will spend $24,000 per family more than it takes in. Hear those words—$24,000 more per family it will spend than it takes in.

What is the future to be for this child at the 300 percent above poverty level? Their parents make $62,000 and we are going to give them this gift of health insurance today. But you will not be able to afford a college education. You certainly will never afford a home. It is doubtful you will ever be able to afford a car that is reliable. You will be in a debtor nation. Those are the consequences of our actions in the name of wanting to expand a program that today is highly ineffective in addressing the needs of the real poor children in this country.

Why would we do that, and just say: Don't worry, you have a pricetag to pay if you ever hope to get out of college or have the ability to get out of college? By the way, we are going to up your taxes if you get out there and get it up here on the front end.

This body is abandoning the very principles this country was built on. This country was built on a heritage of sacrifice, sacrifice by the common man for the common good to create a great, bright shining future for the generations that follow. This bill doesn't fit with that heritage. This bill, as a matter of fact, undermines that heritage. In the name of helping children, we are hurting those children's children. We are stealing opportunity from those children's children.

As I said earlier this morning, I want every child in this country insured. If we took the money that was out there today in Medicaid and SCHIP and the State contribution to it, we could insure every child in this country. We could create an insurance policy for every child in this country that gives them total screening exams, could give them prevention care, could give them acute care, and could give them hospital care. Yet when we run it through the Government, it costs twice as much because of the inefficiencies that are inherent in the system.

Later on I am going to offer a limitation based on improper payments. The American public may not know this. Certainly Members of Congress know. We do not know how much money is wasted in Medicaid because Medicaid has refused to report it. By law they are mandated to report it. They have refused to report it. We now have the information on 17 States on improper payments. The average is 10.5 percent on the 17 States we have looked at. Of that, 90 percent of those are overpayments. In New York City alone their own inspector general said at a minimum $15 billion a year is wasted in fraud, abuse, and deceit on the Medicaid Program. Where have we addressed any of that in this? Where have we put the safeguards to make sure this doesn't happen here? We have not done that.

We are not fixing the problems that are in front of us. What we are doing is creating more problems in the name of expanding a children's insurance program and limiting the future of the things that have been very successful with it, such as premium assistance, and taking that away.

There is going to be crowdout and the crowdout is going to benefit the most wealthy of the upper middle income because in some States, by the time you count exclusions, you can earn $120,000 a year and have your kids on SCHIP. We are going to help them. But not the kids of the parents working at $7 an hour, both of them, making $28,000 or $30,000 a year, of which half of them are not on either Medicaid or SCHIP. Why would we do that? Do we truly care about children's health? Are we really about trying to solve it?

Where are the ideas of combining where the biggest health care disparities are in our country? We know where those are. Why not design a program to go and attach and direct health care dollars to the large health care disparities? We know it pays big returns in terms of childhood obesity, in terms of precluding the onset of smoking, in terms of prevention and vaccinations, in terms of well-child care? Why would we not look at where the problems are and try to direct dollars to where the problems are? Instead, we are going to allocate across this country, to those who can now afford it, we are now going to start paying for it.

Even if we wanted to do that, why would we do it at twice the cost of what you could buy in a private market? Mr. President, $1,156 is the average market cost to insure a child in this country. Why would we spend $2,200 to get the same thing? So we can say we did something?

If, in fact, you could take $1,156 or $1,200 for every child out there—we have more than enough money with what we are spending today to accomplish that—we could buy them all an insurance policy.

I am not sure this bill is about children. I am not sure it is about children's health care. I have some doubts when we are not frugal. If it is about children's health care now, it is certainly not about those children's long-term financial security, when we are not even going to be honest with how much this bill costs. We have pulled a trick so we do not have a pay-go rule, and the trick keeps us from offsetting $42 billion in expenses associated with this bill. Everybody knows that. Nobody will say that is not right. Nobody wants to talk about that. That is what is wrong.

That is why people do not have confidence in the Congress. It is because we have this sleight-of-hand. We want to do something good but we don't want to tell you what it costs and we don't want to get rid of programs that don't work in order to be able to do something good. We are going to hide it under the blanket. So we are hiding $42 billion under the blanket. We are playing the inside baseball game, not being honest with the American people about what it costs; not being honest with the American people that it is a lot cheaper to give premium assistance than it is to give a program directly to a child; not being honest about the fact that this costs twice as much as what you could buy a health insurance policy for, for every child in this country.

We are not being honest at all, so our integrity is in question. Would we do the right thing in the long term for these kids that we say we care about their health care? I do not have the confidence we will. I have the confidence that this train is going to roll, we are going to do it just the way we have done it. There are still going to be 5.4 million kids out there 10 years from now, when we look at eligibility. It will be the same 5.4 million under the 200

percent of poverty level that we did not reach, that we didn't get out and actually make a difference. And then we are going to pay a larger cost as they mature as adults because what we could have prevented will not have been prevented, what we could have taught will not be taught, and the health care costs associated with that will be tremendous.

Mr. President, 5.4 million children are presently eligible for either SCHIP or Medicaid and we have done nothing to make sure those kids get a program that is readily available to them today. We have done nothing. We put $100 million in for outreach and said we will feel good about it because maybe that will reach some of them. We will still have millions of children who are eligible for these programs who will not get it.

We are going about approaching it the wrong way. We ought to be saying let's have a bill that insures every American child. Let's do that. Every American child, universal access with an insurance policy for every American child, why won't we do that? That is what we should be doing. Let's do it for every child. Then the insurance rates on adults will modulate and then husband and wife will not be paying a falsely elevated price once their kids get pulled off of their insurance policy and go into a Government program. Why not buy them all something, from then until the time they are 21, that covers them, that gives them the prevention care, that gives them the counseling, that gives them the immunizations? We know what it costs and we know what we can do it for. Why not do that?

Instead, we have created this complex, convoluted system that can be gamed. The estimate on Medicaid fraud—listen to this—the estimate on Medicaid fraud is $60 billion a year. That is enough to pay for where we cheated on this program if we would get rid of 10 percent of it a year over the next 10 years, if we got rid of 10 percent of the fraud. There is nothing in here on fraud. There is nothing in here to make the States accountable for the money we send out there.

We have done a poor job. We claim we want to help children, we claim we want children to have health insurance, yet we mortgage those very children's futures by not being honest about how we are going about doing it, about how we are going to pay for it and what the ultimate results will be.

I yield the floor.

The PRESIDING OFFICER (Mr. SANDERS). The Senator from Ohio is recognized.

Mr. BROWN. Mr. President, I appreciate as always, even when we disagree, the words of the Senator from Oklahoma. He and I have worked, from our time in the House, on international health legislation together. We come at things from very different perspectives. But I often come down in the same place. I would love to hear more about his plan on children's health, to extend universal coverage to all children.

I was driving to the airport this morning after leaving my mother in Mansfield, and heard Bill Considine, who is the president of Akron Children's Hospital, one of the premier children's hospitals in my State and in our country. Mr. Considine, the CEO of that hospital, had some interesting things to say about what I believe he called Kids Care, which may be similar to what Senator COBURN was talking about.

I hope we can work some things through there. I want to disagree, though, for a moment briefly with Senator COBURN's comments about we absolutely want to—we do not want 50 percent of children covered who are at 200 percent of poverty or 300 percent or beyond for that matter.

We obviously want to do better. We have done generally fairly well locating those children and signing them up, those children who are eligible.

This legislation goes a good bit further, and the efforts to, if you will, encourage and find those children who are eligible and sign them up, those efforts have been very bipartisan in the last dozen years.

The Presiding Officer from Vermont has been part of this. He has always had an abiding, intense interest with what we do with children's health care. I extend this back a couple of sessions ago—Senator FRIST, the Republican leader, and Senator BINGAMAN, a Democrat from New Mexico; and Senator LUGAR, a Republican from Indiana, with Senator BINGAMAN; and at other times Senator GRASSLEY, a Republican from Iowa, Senator HATCH a Republican from Utah—all of them have been part of, and many on my side of the aisle have been part of, finding ways to get people to sign up, simplification of paperwork and bureaucratic requirements, including language directly from legislation introduced by Senators LUGAR and BINGAMAN; providing funding for outreach and enrollment, which is language originally introduced by Senators FRIST and BINGAMAN and pushed and supported by Senators GRASSLEY and HATCH in the legislation in the last Congress.

It provides for incentives for States to encourage and to provide coverage for those eligible but unenrolled children. We can certainly learn from Senator COBURN to do more, but this legislation is replete with provisions to bring in more children. It does not mean we do not enlarge the eligibility to 300 percent of poverty, nor does it mean we do not look down the road, I hope, sooner than later with the relationship that Senator COBURN has built with President Obama, both as freshmen Members of the Senate and since Senator Obama has become President, to work together in finding ways to do this.

I yield the floor.

The PRESIDING OFFICER. The Senator from Oklahoma is recognized.

Mr. COBURN. Mr. President, I thank my colleague for his comments. There is an easy way to solve this; it is called auto enrollment. You just write a bill. Anybody in any region under 200 percent who has a claim of deduction for children is automatically enrolled in SCHIP or Medicaid. It is not hard. We do not want to do that. Why are we not doing that? Because we do not want to help all of these 5.4 million children. We do not want to do that.

We have all of these incentives that have not worked in the past. We have done all of these things. All you have to do is auto enrollment. We can write a law. We can pass it. We can say: The IRS can look at every family who has children under 200 percent who files a tax return or files for the earned income tax credit, and their children are automatically enrolled. They automatically get a notice that says: Here is your insurance. Here is your State card. You have coverage.

It is not hard. We can do that. But we have not done it.

I yield the floor.

The PRESIDING OFFICER. The Senator from North Carolina is recognized.

Mr. BURR. Mr. President, I wanted to pick up where I was before lunch. I am glad to see my good friend from Ohio. We were having conversations before lunch on this bill. Clearly, it is an important piece of legislation.

As Dr. COBURN and I said before lunch, I think every Member of the Senate, I think every Member of Congress, and probably everybody in the country believes it is important that we cover children; that the prevention and wellness aspects of having coverage means we have a healthier community; that we take those who, by the way, are historically more healthy, younger folks, and we give them the assurances of check-ups and the ability to visit a doctor so that we minimize anything that can happen to them. In 1996 and 1997, the Senator from Ohio and I were both on the Energy and Commerce Committee. We were involved in crafting the original legislation. I remember it today as well as I do then. The legislation was targeted at a specific group of our country's children: those over 100 percent of poverty whose families made too much for Medicaid but those with not enough income between their parents to be able to afford health care at the time.

My gracious, health care has done nothing but get more expensive since 1997. We appropriated and authorized $40 million for a 4-year program. The target—I can't remember what the target was for the number of kids—but today, at 100 percent of poverty for a family of four, they would have an income of $22,000. At $22,000 they apply for Medicaid, regardless of what State they live in, and health care is provided under Medicaid for that family.

As Dr. COBURN pointed out, I think rather clearly, for Medicaid and SCHIP today, we have probably eliminated access to about 40 percent of health professionals because they choose not to

participate in the programs. Why? It is because the reimbursements are so pitiful in those two programs, regardless of the State. Doctors have chosen to opt out of providing that care and focus just on the Medicare and private market or just on the private market.

So just the creation of Medicaid and SCHIP means we have eliminated some choices for these people where this coverage is their only option, it is their safety net. Now, if I had my druthers, I would rather be here debating overall health care reform because I believe every American should have the ability to be insured.

I am not sure I would have much disagreement in Congress or in America on that. We will have a big disagreement on how we get there, but we can get there. Were we to have that debate today, we would not be here talking about the expansion of one program that hits a small group of Americans and is targeted to put them in a one-size-fits-all program that only 40 percent of the health care professionals even participate in.

Now, having said all of that, SCHIP is up for reauthorization. We are now 10 years down the road, and we are talking about, How do you change this bill to apply what we have learned? Can we reach new efficiencies in cost? Can we cover more people? If so, how? Which States have done well? Which states can we learn from? Which have done poorly? Which states should we work with in the legislation to try to prod?

Well, we find in this legislation that in 10 years, we have moved from 200 percent of poverty to 300 percent of poverty. I do not have any big disagreement with that, with the rise in health care costs. Three hundred percent of poverty for a family of four is $66,000 a year.

So under this program—SCHIP currently, not under the reauthorization bill—if a child lives in a household that has an income of $66,000, above $22,000, they are eligible in several states for SCHIP today.

So what is our experience so far? As we get ready for this reauthorization, we have 7.4 million children enrolled in SCHIP in 2008. But the average monthly enrollment for 2008 was 5.5 million, meaning that somewhere, somehow we have had almost 2 million drop out. They have moved to a different State. The income of their family changed. They are no longer eligible. So 5.5 million covered children today seem to be sort of the fixed point.

Well, how many are eligible today but not covered? I think my colleagues would be amazed to find out it is 5.4 million. We are covering 5.5 million, but we are not covering 5.4 million who are eligible under today's guidelines.

So in typical Washington response, what do we do? We come out with a reauthorization that expands the eligibility. Already we have in place a waiver where New Jersey can currently go up to 350 percent of poverty. Well, what is that? That is $77,175. Now in the reauthorization bill, we are going to grandfather the 350 percent, and we are going to go up to 400 percent for New York. What is 400 percent? Well, that is $88,200. How do those 5.4 million who were eligible before get enrolled? Well, the answer is, they are not. This is what Dr. COBURN was talking about. How about the kids nobody is going out to enroll? Do auto enrollment. It is easy.

But that is not what this bill is attempting to do. This bill is attempting to increase the eligibility to get a bigger slice of America eligible for Government programs so that at some point the number of folks who are on Government programs—Medicaid, Medicare, SCHIP, VA, the list goes on—is well over 50 percent of America, and then the die is cast. We go to a single-payer system. The Government runs it, the Government tells us how much we get, the Government tells us where we go, and the American taxpayer pays for everybody.

Now, here is the decision the Senate has—the House has already voted this bill out. We have a decision whether we are going to stand up for those 5.4 million. Those are the tough ones. Those are the ones who did not walk into the door and raise their hand when their parents were told they were eligible and say: I want to enroll. I would like health care. I would like prevention. I would like a primary care doctor. I would like a medical home. No, they are the 5.4 million children who are out there to whom no State is reaching out. They are just letting them fall by the wayside. Rather than focus on the 5.4 million, we are focusing on how we increase eligibility, how we change the income parameters.

Let me point out New Jersey, which is grandfathered to 350 percent of poverty under this bill, ranked 47th in the country at enrolling children who are at 100 percent to 200 percent of poverty. Let me say that again. A State that we have allowed to be grandfathered in at 350 percent of poverty ranks 47th out of 50 in the United States at enrolling kids between 100 and 200 percent of poverty.

As a matter of fact, 28 percent of their children are uninsured in that 100 to 200 percent of poverty. Yet once again we are going to grandfather them and allow this incredible expansion to continue. So where is their focus? Let's go after the easy ones. Let's go after the ones in families who are easier to find and who are easy to enroll.

Well, why does that happen? Let me point out to my colleagues, Medicaid gets a matching rate from the federal government, depending upon which State you are from, and that rate is from 50 percent to 75.9, with a ceiling of 83. So as the State makes a Medicaid payment of $1, depending upon what State you are from, the Federal Government reimburses anywhere from 50 cents to 83 cents.

But if you are enrolled in SCHIP, the range goes from 65 to 85. So if you are on the bottom, if you are a State on the bottom, why would you lobby for expanded eligibility? It is because if you are on the bottom, you are going to have an increase in the Federal share of what you pay out from 50 to 65 cents. It is 15 cents of every dollar. You are crazy, if you are a State, for not lobbying for this because you are going to spread the cost over the entire taxpayer base. It makes a lot of sense if your focus is not on 5.4 million children and how they get covered and how they get health care.

If you are only focused on how you get a bigger piece of the Federal pie, if you are only focused on how you get a bigger share of space at the trough, then this makes a tremendous amount of sense. But from the standpoint of developing health care policy, it makes absolutely no sense whatsoever.

I don't take my position just looking at one section of the bill. Dr. COBURN pointed out, as I did earlier, that the financing of this bill is suspect. In fiscal year 2012, which is the last of 5 years, we allocate $14.98 billion to fund the program, almost $15 billion. Yet in 2013, the bill reduces the allocation to $5.7 billion. How do you have a health care program for children, with all these people enrolled, that is sucking up $15 billion a year, and all of a sudden, the next year it drops to $5.7 billion? The answer is, you don't. We all know it. The reality is, you have to go to the next 5-year period to find the answer. The answer is, starting in year 6, out of the next 5-year budget, we do a one-time payment of $11.7 billion on top of what it costs us to run the program for 2013.

So what does that mean? Frankly, it means the accounting methods used in Washington are not accounting methods any family in America could use because their creditors would walk in the door and shut them down. Yet we get up here every day and claim we do things just like people at home. In fact, we know when it comes to budgets, there is no American family who can get away with what we get away with, especially when it is this obvious. One year it costs us $15 billion. The next year it costs $5.7 billion. There are only two ways you accomplish that. You either reduce enrollment drastically or you magically come up with the money and you stick it in and say: Oops, we didn't understand that was going to happen.

We understood it was going to happen. It is done to fit the parameters, to get around pay-go rules so you can actually take this money and stick it right onto the deficit and the debt of the country. In other words, we are going to provide our children health care with one hand, and we are going to rob their financial future with the other, all at the same time. It is miraculous that we would even attempt to do this. At least we could ask for honesty and transparency in how we are funding this program.

It is important that we sort of recap. What is SCHIP? I think a lot of people

who might not have been in Congress very long, certainly weren't here in 1996 and 1997 when we passed it, people across the country might be saying: I have never heard of this program. Again, we saw the need in 1996 to create an insurance product for children's health, for those people who financially didn't qualify for Medicaid and didn't make enough to purchase insurance on the open market. SCHIP was created with the vision of trying to take kids from 100 percent of poverty to 200 percent of poverty and make them eligible for a program where 100 percent of them would have health care. Nationally, the parameters grew from 100 percent to 300 percent, and we still haven't met the original 1996 mission of covering all the kids. Because with 5.5 million people covered today, average monthly number, we still have 5.4 million over here who are eligible and don't have insurance. Clearly, we have a tremendous amount of work to do to get the SCHIP program to fulfill its original mission.

Let me go specifically to the bill before us. CBO estimates the bill will increase outlays by $32.3 billion above the baseline over 5 years and $65 billion over 10. The cost is offset by a tobacco tax. I am from North Carolina. I can get up and wail about how this is unfair. It is not the first time Congress has done it. It is the most regressive tax there is. In essence, we are taking a group who financially are challenged and, according to every analysis I have looked at, the people who are going to be most taxed by a tobacco increase are those people in the lower socioeconomic levels. So, in essence, we are not spreading this across taxpayers. We are asking the parents of these children to pay for the expansion in eligibility because we are going to tax them for every cigarette they buy and consume. We are going to hope that they quit. When they quit, I am not sure how we are going to fund the program except probably do it the same way we are doing it in the year 2013. We will come up with the money in some way and some fashion.

It is important we realize today we have something we call a Medicaid sandwich. Medicaid starts here; SCHIP goes here; Medicaid wraps on the top. It is hard to believe we could have something designed that is so complicated for the States, that Medicaid applies here to some; SCHIP applies here to others; and Medicaid applies on top of that to an even larger group. If it seems confusing, it is. If it is this confusing, one has to ask: Why don't we change it? Why don't we fix it? Yet as I continue to go through the Baucus bill, what I find is that we are making it more complicated. We are designing it in a fashion that aggressively goes after an increase in enrollment but does not go after the 5.4 million children who currently today are unenrolled in the program but are certainly eligible. As a matter of fact, the Baucus bill spends $34 billion over 5 years. It targets 5.7 million new children. I might add, 2 million of those children today are currently covered under their parents' insurance. So we have actually got a net pickup of 3.7 million kids who were uninsured. That is $34 billion.

There is an alternative plan. It is called the McConnell substitute. It is called Kids First. It uses $19.3 billion over 5 years to enroll 3.1 million kids who are uninsured today. So what do we get with the $34 billion investment that we are not getting with a $19.3 billion investment? The answer is quite simple: 600,000 uninsured kids who are enrolled under the Baucus bill. When you do the simple math on that, you find out you are paying $4,000 per enrollee under the Baucus bill.

Now, I don't expect everybody to associate with this, but last year I had a son who was a senior in college. Because we have these funky Government rules that say no matter where you are in your education process, when you become 22, you are no longer eligible to be under Government insurance for your family—it doesn't apply just to Members of the Senate or to Congress; it applies to every Federal employee—I was forced, as a parent, to go out and go through the thought process of getting my son insurance. Sure, he is 22 years old. He is healthy as a bull. There is no reason I should suspect he is going to get sick. But what if something happens to him.

So I immediately did what every good Federal employee would do. I called the correct office up here, and I said: This has to be something you have run into. Have you got some type of gap insurance I can turn to and I can purchase for that 22-year-old healthy son? They said: Certainly, Senator. We have negotiated with the same company, the same plan he was under, and he can go on that tomorrow. I said: How much is that? They said: $5,400 a year, for a 22-year-old, healthy-as-a-bull senior in college.

I did probably what every parent would do. I called the college and said: Have you got a plan? Here is the situation. They said: Absolutely. We have negotiated with the same company, with the same plan he was under as a child of a Federal employee. I said: What is the premium? They said: $1,500 a year.

Now, that lesson I actually learned when I became a Member of Congress. When I became a Member of Congress, I chose the same insurance plan I was under in Winston-Salem, NC, working for a company of 50 employees, the same exact plan paying the same 25 percent, and the only difference was my health insurance cost went up $100. Why? Because a company of 50 employees negotiated a better plan than the U.S. Government on behalf of 2 million employees. But it had been 14 years. I had forgotten that. I relearned it firsthand though with my son, when all of a sudden I realized he got a plan for $1,500 that the University of North Carolina Chapel Hill had negotiated, and the Federal Government had negotiated the same plan at $5,400. No wonder parents are confused. No wonder most Americans are confused. What a screwed up market this is. How unbelievably complicated is it for an individual to try to go out and access insurance, and at what point do you actually know that you have found a value?

Let me try to bring some relevance to this story. For that 22-year-old, healthy-as-a-bull senior in Chapel Hill, his health care plan was $1,500 a year. For all these 600,000 kids we are adding to SCHIP, we are spending $4,000 a year to insure them. The average cost per policy for somebody under 18 in America today is about $1,132. Yet under the Baucus bill we are going to invest $4,000 per child, per those 600,000 children, to make sure they are covered—not a wise investment. But considering my experience with the Federal Government, I can understand why, for some people here, that makes absolutely perfect sense.

Let's assume for a minute somebody is going to say my numbers are wrong. I am sure they will before the debate is over. Let's assume for a minute we are trying to figure out the number of increased enrollees—and I am not talking about the ones who had their own insurance and we just shifted them over to government insurance—what are we paying for them? We are paying about $2,200. They are still paying $700 more a year to insure every child 18 and under than I paid in premiums to cover my 22-year-old, healthy-as-a-bull senior in college. So we are overpaying at least by $700. At most, we are overpaying by almost $2,500. Somewhere in that range, I would hope the American people would say: Hey, let's stop for a second. Let's call time out. Let's go back and get Congress to re-look at this program because this doesn't make a lot of sense.

I am not getting into any of the aspects that have already been addressed which deal with the loopholes that were created. I actually sat on the floor and heard somebody say this was a bipartisan bill. If you count one Republican vote out of the Finance Committee, then you are right, it is bipartisan. But I am not sure that is President Obama's interpretation of what bipartisanship is. He came to the Hill. He had lunch with us today because he is trying to get more Republicans to support a stimulus package because he doesn't want to just win it, and he doesn't want to win it by one vote. He wants the American people to understand that there is confidence up here in the legislation that is passed. He probably should have talked about this bill. It is going to be bipartisan, not by many votes.

If that is the type of bipartisanship we want, then it is going to be a long couple of years.

My hope is we can actually get something done. There are so many areas I

could talk about on this bill, but it would keep me here forever, and I see my good friend, Senator WHITEHOUSE, is in the Chamber.

Let me end with this. I am sure I will come back. What I want Members to search their souls and ask is, Is it really the Federal Government's responsibility and, more importantly, the taxpayers' responsibility that a family making $88,000 be included in a plan that is designed and was originally designed to take care of kids between 100 and 200 percent of poverty? Do we feel bad that today 5.4 million children who are eligible at 100 percent to 200 percent of poverty are not enrolled in the program?

This is not the first time I have had a test like this. My own President, last year, proposed we increase spending for HIV/AIDS patients in Africa from $15 billion to $50 billion, and to many people's amazement, TOM COBURN and I supported the President. Then all of a sudden they made a change in the program. The program had always said 50 percent of the money had to go to the treatment of HIV and AIDS patients, meaning they actually had to deliver medicine to them.

Well, when all of a sudden the countries that got these Federal grants to carry out these programs in Africa looked at the program, they said: My gosh, for us to get from committing $7.5 billion all the way up to $22.5 billion in delivering medicines to people who have HIV or AIDS, that is going to be tough. We are going to have to work to find these people. It is going to be dangerous in some cases for us to get drugs out.

What did the White House do? They dropped the requirement in total. They did not require one dime of that $50 billion to actually go to the delivery of drugs to HIV and AIDS patients. So what did we do? We held up the bill. We were taking flak from our own President because other people wrote a bill that was structured poorly. It actually did not accomplish what we set out to have with PEPFAR originally.

At the end of the day, they put back in the requirement of 50 percent, and today, for the multiple countries this applies to, we have a commitment that $22.5 billion is going to go to actually treat individuals who have HIV and AIDS—our original intent of the program. We just expanded it.

Now, we were not going to get there just by saying it is difficult, therefore we do not think we should do that. And we are not going to cover these 5.4 million kids who are eligible but not enrolled if we say: Do you know what. This is hard. And since it is hard, why don't you change the program so the eligibility is wider so we can get some of the kids who are out here in different income groups who are easier for us to enroll than for us to go and find the 5.4 million who are so hard to find.

Well, I am going to say to my colleagues, just like I said to my President: No. That is not what we intended to do. We put this program together to make sure the most at-risk kids in this country had health coverage, so they had a medical home. To suggest we are now going to change the parameters of this and allow a larger income pool to come in because it is hard to reach out and find these 5.4 million people, no; it is not going to happen. It may happen, but it should be as difficult at happening as it possibly can.

I look forward to the debate we are going to have. It is my hope we will have an opportunity to actually look at honest budget numbers that share with the American people exactly what this costs, that we can look at the eligibility requirements with predictability, understand who is going to have an opportunity to be enrolled, and, hopefully, at the end of the day, when a bill passes—whether we vote for it or not—that we can all look at it and say: There is a real chance that 100 percent of the kids at 100 percent to 200 percent of poverty have a real opportunity to be enrolled in this program. I fear without changes to this legislation that will not happen. We will not have fulfilled what we set out to do.

Mr. President, I yield the floor.

The PRESIDING OFFICER. The Senator from Rhode Island.

Mr. WHITEHOUSE. Mr. President, I see my colleague and friend from Virginia, Senator WEBB, who is prepared to speak, and we will recognize him in just a moment.

I would note there would have been, by our estimates, 3.3 million children who would have been covered had the bill passed in 2007. That would have been one very good way to reduce the number of children in this country who are not protected by health insurance.

Mr. BURR. Mr. President, will the Senator yield for a question?

Mr. WHITEHOUSE. Of course.

Mr. BURR. Would any of those 3.3 million children have been in 100 percent to 200 percent of poverty?

Mr. WHITEHOUSE. As I understand it, the bill contained both funds and programs for outreach that would have supported the States in their initiatives to find the children who, because their parents were moving or for one reason or another, were eligible but had not entered into these State programs. So I think the answer to that question would be yes.

Mr. BURR. Let me suggest to the Senator—and I will not ask him to yield much longer—there was the same expansion of eligibility in last year's bill, so the likelihood is any increase in enrollment would have been spread across not just the 100 percent to 200 percent of poverty, but all the way up to the 400 percent of poverty.

Mr. WHITEHOUSE. I think the increase in enrollment would have spread wherever the program went. There are very few areas, as the Senator knows, where the eligibility level is 400 percent of poverty. In the vast majority of the country, in my State, for instance, it is well below that. It is a program that supports working families, that supports low-income working families, that makes sure their children get health care.

But for a number of reasons, probably the most prominent of which is people moving from location to location and not being registered with the local program, there are outreach requirements. I would be happy to work with the Senator on improving those outreach requirements in any way he wishes. But I think to hold the entire bill and his support—I think in this case we are estimating it will now reach 4.1 million children—hostage because of not having gotten the outreach better is a strategic mistake.

If your goal is to insure more children, then you should go about it by insuring more children. If the outreach is a problem, then we can happily make that better. But for outreach to be criticized, when it was President Bush who vetoed that bill, I am not sure how the distinguished Senator from North Carolina voted on that—

Mr. BURR. Mr. President, I would be happy to disclose to my colleague that I voted against the bill, for the same reasons that without changes I will oppose it this year because the eligibility requirement is being expanded.

As I said, and I thought fairly clearly, when you expand eligibility, you take the pressure off of making sure the enrollees come from the most at risk. It is my hope we can modify this bill. I am not embarrassed to be on the Senate floor and talk about the aspects of this legislation that I am unhappy with. But certainly I can count, and I know the majority can move this bill at any point they feel comfortable, and I am sure they will.

At the end of the day, it is my hope we will cover as many of the originally targeted children in that 100 percent to 200 percent of poverty as possible.

Mr. WHITEHOUSE. I understand the Senator from Virginia wishes to speak. I will simply respond before I yield the floor to Senator WEBB that I have had quite a number of years of experience with our Children's Health Program in Rhode Island, back to the years when I came in with Governor Sundlun in a bad economic crisis in Rhode Island—probably the largest percentage deficit in the State budget of any State ever recorded. Even in that very gloomy fiscal environment, Governor Sundlun insisted we build a statewide universal health care program that protected children.

SCHIP is very much in line with that. The people who have been working on that for these many years in Rhode Island—and I suspect it is the case in many other States—feel a real passion for trying to make sure children get health care, that they get the health care to which they are entitled.

So I am not sure the notion that by just putting more pressure on them, by just refusing to add any other children until they have done this, is really a productive or fair way to go about

reaching the children who have not been reached. What the bill does is provide outreach funds and empower these people who care so deeply about this issue to actually get out there and work harder to find them, have the additional resources to find people. From my work in law enforcement, my work with schools, my work on health care, there are a lot of people who live apartment to apartment, very hand to mouth, and it is a very significant challenge to keep up with them. The resources to do that, I submit, would be the best way to solve that problem, not holding one set of children hostage to providing health care for another set of children.

With that, Mr. President, I yield the floor for the distinguished Senator from Virginia.

The PRESIDING OFFICER (Mr. NELSON of Nebraska). The Senator from Virginia.

Mr. WEBB. Mr. President, I thank the Senator from Rhode Island, and I am here to speak in favor of this legislation. This is a very important piece of legislation. It is long overdue. I also would like to point out that I have an amendment I will offer.

I am very concerned about the way this legislation is going to be funded. We all have our own issues with respect to whether tobacco should be used or not used, but to fund an entire program based on a tobacco tax, I think, is not the way to go for a number of reasons. So I am offering an amendment that will help offset this highly regressive, 61-cent-per-pack increase in the cigarette tax that is being used to fund this bill, and to add on to the bill a tax on carried interest, which is the compensation that is received by hedge fund managers. This proposal would generate $11.2 billion in revenue over 5 years. Tobacco taxes would thus be raised by a more reasonable 37 cents a pack to make up for the shortfall between the revenue being generated by this amendment and the costs of the CHIP reauthorization.

Tobacco is already federally taxed at 39 cents per pack for the CHIP program. All 50 States and the District of Columbia also impose an excise tax on cigarettes above this tax. For instance, my State of Virginia adds 30 cents on top of the present tax. In these difficult times, many States, including Virginia, are considering an increase in their State excise tax.

So we would have, with the amendment I am going to offer, the 39-cent Federal tax that is already in place on a pack of cigarettes, an additional 37 cents—instead of an additional 61 cents—plus the State taxes on cigarettes; and a big proportion of this—all the Federal tax—going to fund a health program.

I would like to be clear that there is no question in my mind about the fact that we do need to reauthorize and expand this program. But I do not think it is a proper to fund this program on the backs of people who, for better or worse, smoke cigarettes. I am a reformed smoker. Many of my contemporaries in the Senate are reformed smokers. I am not encouraging anyone to smoke cigarettes. I hope you do not. I just believe although tobacco taxes are already a popular source of revenue, it does not change the reality that this tax is regressive.

We had a Congressional Research Service report brought to my office, and I am going to quote from it. It said:

> Cigarette taxes are especially likely to violate horizontal equity and are among the most burdensome taxes on lower-income individuals. Only about a quarter of adults smoke, and less than half of families have expenditures on tobacco. Tobacco is more heavily used by lower-income families than are other commodities, and is unusual in that actual dollars (in addition to the percent of income) spent on tobacco products decline in the highest income quintile.

My amendment will help soften the blow of the increase in the cigarette tax.

Let me provide some background on carried interest. A partner of a private equity or hedge fund receives two different types of compensation. First, hedge fund managers receive management fees that are linked to the assets they oversee. Second, they receive what is called ''carried interest,'' which is compensation based on the percentage of the profits generated by the assets they manage. Currently, carried interest is taxed at a capital gains tax rate. As noted by Peter Orszag, who is now a member of the Obama administration, in his 2007 testimony, many economists view carried interest as:

> Performance-based compensation for management services provided by the general partner rather than as a return on financial capital invested by that partner.

Given that carried interest is performance-based compensation, it makes sense to tax it as ordinary income. This compensation has been earned by many of the same people who helped bring about the present financial crisis. The Financial Times stated these managers ''have made fabulous sums in recent years.'' Given the need to pay for children's health insurance, it makes more sense to have these persons, who are better positioned to pay for it, pay a greater percentage of the cost.

When it comes to taxing carried interest as ordinary income, there is a wide acceptance in support of this proposal among thinkers and editorial writers across the country. The Financial Times itself editorialized ''this repair should be done at once.'' They made that statement 2 years ago.

I have a string of editorials that support the idea of closing this carried interest loophole as a matter of fairness. I ask unanimous consent they be printed in the RECORD at the end of my statement.

The PRESIDING OFFICER. Without objection, it is so ordered.

(See exhibit 1.)

Mr. WEBB. They include editorials from the Washington Post, New York Times, USA Today, the Philadelphia Inquirer. In fact, the Washington Post in 2007, in talking about this particular tax break, said this:

> The only mystery is why Senate Democrats don't have the good sense to grab on to this as their centerpiece domestic issue. It's hard to think of an issue that better taps into the public anxiety about the markets and the economy, the anger about income inequality, or the disgust with a political system that bends to the will of powerful interests.

The Washington Post continued:

> This is a make-or-break issue for Democrats. If they can't unite around this issue, then they aren't real Democrats and they don't deserve to govern.

The New York Times in 2007 talked about this issue, mentioning:

> With income inequality surging along with the need for tax revenue, supporters rightly conclude that it is untenable for the most highly paid Americans to enjoy tax rates that are lower than those of all but the lowest income workers.
>
> Congress will achieve a significant victory, for fairness and for fiscal responsibility, if it ends the breaks that are skewing the tax code in favor of the most advantaged Americans.

There are others and, as I mentioned, I will insert the full text of these editorials at the end of my comments.

I also should point out that our new President, President Obama, has supported throughout his campaign the idea of taxing carried interest as ordinary income.

So the choice is this: Do we help fund this program, which we all agree is critically necessary, with a well-deserved tax adjustment for some of those who are the most capable of absorbing a new tax, or do we take money exclusively from tobacco, causing people who in large part are in the same economic circumstances as the beneficiaries of this health insurance program to foot the bill?

Let's think for a moment about the irony of that. We are taxing a practice that we deem unhealthy in order to fund a health program, and we supposedly want this practice to go away, but if it goes away, we are not going to be able to fund our health program.

So we need to find a way to fund health care needs that is sustainable and fair, and a declining revenue source is not sustainable. I hope my colleagues will join me in supporting this measure, which will partially offset the cigarette tax that is a part of the bill. I again wish to express my strong appreciation to Chairman BAUCUS and to others, such as my colleague from Rhode Island, who have worked so hard on this bill and who work to help those in our system who are most in need of medical care.

With that, I yield the floor.

EXHIBIT 1

EDITORIALS SUPPORTING CLOSING PRIVATE EQUITY/CARRIED INTEREST LOOPHOLE AS MATTER OF FAIRNESS

[From the Washington Post, Sept. 9, 2007]

PRIVATE-EQUITY TAX BREAKS, A CALL TO BE UP IN ARMS

Even by Washington standards, the private-equity industry certainly went over the

top in conjuring up the economic woes that would befall the United States if their cherished tax breaks were taken away.

Pensioners would be destitute. Wall Street would pack up and move to Dubai. The hedge fund industry would disappear. Federal revenue would plummet. Entrepreneurial risk-taking would grind to a halt. And the urban underclass would slip even deeper into poverty.

And all that just because some of the richest people in the world would have to pay the same 35 percent tax rate on their income as dentists, lawyers and baseball players.

There is no mystery as to why the industry bothers to make these ridiculous and contradictory arguments—billions of dollars in tax windfalls are at stake.

The only mystery is why Senate Democrats don't have the good sense to grab onto this as their centerpiece domestic issue as they head into the 2008 campaign. It's hard to think of an issue that better taps into the public anxiety about the markets and the economy, the anger about income inequality, or the disgust with a political system that bends to the will of powerful interests. And if Republicans go through with their threats of a filibuster and a presidential veto, Democrats ought to put aside all other business and call their bluff.

This is a make-or-break issue for Democrats. If they can't unite around this issue, then they aren't real Democrats and they don't deserve to govern.

[From the Washington Post, July 13, 2007]

EQUITY FOR PRIVATE EQUITY; LEGISLATION TO RAISE TAXES ON FUND MANAGERS' INCOME

Investment partnership funds can be enormously profitable, highly secretive and lightly regulated. People tend to get suspicious.

As a result, government bodies periodically try to tamper with private equity firms, hedge funds, venture capital firms and the like. This largely unregulated industry does a lot to stabilize America's financial system by fostering innovation and bringing inefficient or undervalued markets closer to equilibrium, and most of these attempts to regulate or reconfigure the industry would be bad for the U.S. economy. But this time around Congress has proposed legislation that makes sense.

A House bill would set a higher tax rate for ''carried interest,'' the cut of profits typically awarded to fund managers at private equity firms and other investment partnerships. In these investment partnerships, a fund manager typically manages the investment made by himself and various limited partners, with the manager usually contributing about 1 percent of the investment. The fund manager then usually receives 2 percent of the assets he manages annually and 20 percent of the profits earned on the investment when it is sold. Even though this 20 percent cut makes up the bulk of the manager's compensation, and even though it is awarded for managing others' money, under current tax law this income is treated as capital gains rather than ordinary income. As a result, fund managers who make zillion-digit incomes from carried interest can be taxed at the same rate (15 percent) as a part-time janitor.

The House bill, sponsored by Sander M. Levin (D-Mich.), Ways and Means Committee Chairman Charles B. Rangel (D-N.Y.), Financial Services Committee Chairman Barney Frank (D-Mass.) and 13 other Democrats, would close this loophole for fund managers and treat their ''carried interest'' earnings as regular income taxable at the ordinary 35 percent top-income rate that high-earning employees in other industries must pay. The bill would not affect the other investors in these funds, nor would it affect the tax rate for profits that fund managers make on investments with their own money.

A Senate bill that also attempts to bring equity to the private equity industry would force investment partnerships that are publicly traded—right now, only a handful—to pay corporate income taxes. Support for the Senate bill has gained some momentum because of Blackstone Group's splashy initial public offering, one of the largest in history. The Senate's corporation-rather-than-manager-based solution seems less effective, however, because companies can easily move overseas (as many have already done), while individuals are less likely to do so. Investment partnerships can also simply choose not to go public.

Critics of the two bills argue that investment fund managers should be rewarded for taking high risks. But these fund managers, for the most part, are not risking their own money, and they're paid management fees during the duration of their partnerships, so they have steady incomes. Besides, plenty of risky industries don't enjoy comparable tax benefits. Income earned from managing an investment partnership fund should be treated just like the income earned for providing any other service.

[From the New York Times, June 25, 2007]

RAISING TAXES ON PRIVATE EQUITY

So much for the argument often made by managers of hedge funds and mavens of private equity that higher taxes would cripple their business.

The prospect of higher taxes did not dent, in the least, the initial public offering on Friday of the Blackstone Group, the giant private equity firm. The week before, a bill was introduced in the Senate to raise taxes on private equity firms that go public. On the day of the offering, a House bill was introduced that would raise their taxes, whether they're publicly traded or not.

And yet, Blackstone had a debut that was one of Wall Street's biggest, its thunder muted only by the announcement by its longtime rival, Kohlberg Kravis Roberts, that it, too, planned to go public.

The bills in Congress take aim at a provision of the tax law that has allowed private equity and hedge fund operators to pay a lower capital-gains tax rate of 15 percent, instead of the ordinary top income-tax rate of 35 percent, on the performance fees that make up the bulk of their huge paychecks.

With income inequality surging along with the need for tax revenue, the bills' supporters rightly conclude that it is untenable for the most highly paid Americans to enjoy tax rates that are lower than those of all but the lowest-income workers.

Fairness is not the only reason to change the rules. The private equity industry is on shaky ground when it claims that current practice is a correct application of the law.

Many of the firms' partners are not investing their own money in the various funds and ventures, and so have no direct risk of loss, the general test for claiming capital-gains treatment on one's earnings. Moreover, the tax rules in question were developed decades ago for enterprises that had passive investors to whom gains were passed along. Hedge fund managers and private equity partners are not passive. They're actively managing assets, and should be taxed accordingly as managers earning compensation.

The challenge now is to develop a single bill that can withstand the formidable lobbying efforts of the private equity industry to water it down.

To do so, the final bill should clearly apply to other firms where partners may also receive most of their pay as capital gains, such as oil and gas partnerships. It will also be necessary to narrow the bill, where appropriate. For instance, it could include a mechanism to allow some compensation to be taken in a form similar to incentive stock options.

Congress will achieve a significant victory, for fairness and for fiscal responsibility, if it ends the breaks that are skewing the tax code in favor of the most advantaged Americans.

[From USA TODAY, July 23, 2007]

WEALTH MONEY MANAGERS MAKE MORE, GET TAXED LESS

As many business executives, doctors, lawyers and other skilled professionals know, the top income tax rate is 35%. The top rate on dividends and long-term capital gains is 15%.

Whether it makes sense to tax the output of expertise and hard work at more than twice the rate of investment returns is debatable. But, for better or worse, that's the way it is.

Except, that is, when it isn't. Owners of companies, ranging from small real estate partnerships to multibillion dollar hedge funds and private equity firms, have devised a way to erase this distinction. Their managers pay 15% on their income by dressing it up as investment returns—even though they bear no investment risk or put none of their own money in play.

Nice work if you can get it. But in this case it constitutes a frontal assault on fairness. Why should such people pay only 15% when senior corporate executives pay 35% for making many of the same types of business decisions? More to the point, it's hard to see the logic (or the justice) in a school teacher or bus driver with taxable annual family income as low as $63,700 paying 25% when someone like Blackstone Group CEO Stephen Schwarzman can make nearly $700 million on the day his firm went public and pay at most 15%.

Congress is rightfully re-examining the issue. Reps. Sandy Levin, D-Mich., and Charles Rangel, D-N.Y., have a proposal. In the Senate, Max Baucus, D-Mont., and Chuck Grassley, R-Iowa, have a useful, if narrower, bill.

The practice they are seeking to ban or limit is a transparent ruse. Here's how it works using the example of a private equity firm: The partners raise capital from banks, pension funds and other large investors, which they use to buy companies and resell them. Their investors give them some direct compensation, which is taxable as income.

But most of the compensation comes in the form of an investment vehicle known as ''carried interest,'' which gives them a right to a portion of the profits they generate (typically 20%). That portion of the profit is taxed 15%, just as if they supplied 20% of the capital at the outset.

It's a creative practice, but with a result that says the rich get to write their own rules. That's not a new problem in the American tax system, but it is nevertheless repulsive. Income is income, or so you'd think.

Supporters of this scam argue that these money managers actually are risking their own investments. It's just not money, in their case, but their ''sweat equity,'' their time, their expertise. But the same could be said of the lawyer who takes a case on a contingency fee, the movie actor who negotiates a cut of the box office receipts, the financier who chooses to work for a firm known for paying enormous bonuses during good years. In most, if not all, of such cases, these people pay income taxes.

And so should partners in these exotic investment firms. More so because the tax

they avoid paying is money that has to be made up by people of lesser means—or borrowed from later generations by adding to the budget deficit.

These schemes add insult to injury at a time of increasing wealth concentration. It is time to end them.

[From the Philadelphia Inquirer, Sept. 19, 2007]

EQUITY MANAGERS' LOOPHOLE; BILLION-DOLLAR BREAKS

For years, a relatively few players in the corporate takeover game have benefitted from a tax loophole that costs the federal government billions annually.

Now a push is under way in Congress to tax these wealthy managers of private equity funds at the same income-tax rates as everyone else. Congress should end this unfairness in the tax code.

Most workers pay income taxes on a graduated scale, with marginal tax rates running from a low of 10 percent, to a high of 35 percent for the wealthiest wage earners. But managers of private equity funds, who usually do extremely well for themselves, pay only a capital gains tax rate of 15 percent on most of their income. That's because the tax code considers their wages ''carried interest,'' even though this compensation can run into hundreds of millions of dollars per individual. The preferential treatment can be worth millions of dollars to such a manager.

Rather than being taxed on compensation for services rendered, these managers are taxed as though they had invested a 20-percent stake in the fund. But, even though they sometimes gain equity stakes in the companies they buy and manage, they don't have capital at risk in the ventures. They're really being compensated for their expertise and effort.

This definitional fiddle creates a class of service provider that is taxed a preferential rate. Economist Greg Mankiw, former chair of the Council of Economic Advisers under President Bush, has said that carried interest should be taxed at the same rate as other compensation for such services. As it stands now, an executive in a financial-services firm is taxed differently from the manager of a private equity or a hedge fund.

There's no good reason why a person earning $200 million per year should pay a lower tax rate than a single worker earning $45,000 annually and paying 20 percent in taxes.

The loophole costs the Treasury several billions of dollars per year. The sum is small compared with the overall federal budget. But in a budget season in which Congress and the president are feuding over a difference of about $22 billion, such sums do matter.

Some argue that taxing these fund managers at a higher rate would harm ordinary investors, such as those enrolled in state employee pension plans, because the fund managers would demand higher compensation. But the evidence is slim. The liberal Center on Budget and Policy Priorities, a nonprofit think tank in Washington, said the impact on investors would be ''quite small.''

And this glaring inequity shouldn't be preserved on the presumption that a tiny fraction of it will trickle down to the folks already paying their fair share.

[From the Washington Post, Nov. 8, 2007]

NO PAY, NO PATCH

Nearly everyone wants to ''patch'' the alternative minimum tax. Not everyone wants to pay to do so. That is the challenge facing lawmakers as they race to install yet another temporary fix on the tattered federal tax system in time for the Internal Revenue Service to produce forms reflecting the change. How this job is accomplished will show whether congressional Democrats are willing to live up to the pay-as-you-go obligations they imposed on themselves when they retook control of Congress—and whether Republicans can regain any credible claim to being committed to fiscal discipline.

The alternative minimum tax was created in 1969 to dun a tiny number of the super-rich who managed to avoid paying any income taxes. Because the tax isn't indexed for inflation and because the 2001 tax cut lowered regular tax rates, the AMT, without adjustments, will affect millions of taxpayers who everyone agrees were never its intended targets. But exempting those millions will cost a lot in forgone revenue, money that the Bush administration has built into its budget numbers. Because fixing the problem is expensive and complicated, lawmakers have chosen for years to slap a Band-Aid onto it—and bill the cost to future generations. This year's model totals $50 billion, $76 billion when the cost of extending expiring tax provisions and other changes is included.

To its credit, the House Ways and Means Committee has produced an AMT patch whose costs are offset by other changes, including eliminating the carried-interest deduction that allows private equity and hedge fund managers to pay taxes at far lower rates than other wage-earners. This is far from a perfect solution: It would take 10 years of revenue to pay for the one-year patch.

It's preferable, though, to the approach of congressional Republicans and the Bush administration, which is to not offset the tax cut with new taxes or spending cuts. House Minority Leader John A. Boehner (R-Ohio) was illustrative of the irresponsibility. ''Tax relief pays for itself by creating more American jobs for more taxpayers to strengthen our economy,'' he said in a statement. Perhaps Mr. Boehner believes that the Tax Fairy will simply leave $50 billion under the IRS's pillow; there is no economic basis for his statement that ''tax relief pays for itself.'' Moreover, if Mr. Boehner doesn't like the way Democrats propose to finance the patch, what would he cut instead?

Republicans may not be the only obstacle to responsibility. Senate Democrats say they want to comply with the pay-go requirement, and there were hopeful signs last week from Majority Leader Harry M. Reid (D-Nev.). ''I'm not in favor of waiving pay-go rules,'' he said. ''I think we cannot waver on that.'' But Senate Finance Committee Chairman Max Baucus (D-Mont.) has been less definitive, saying only that he'd like to comply with pay-go to the extent possible; he has also not been eager to close the carried-interest loophole. Once the pay-go rule is ignored, though, lawmakers won't be able to discipline themselves in the future. This is a key test for the party that wants to wear the mantle of fiscal responsibility.

[From the New York Times, Nov. 8, 2007]

ALTERNATIVE TAX SHOWDOWN

The House and Senate are poised to vote on a vitally important tax bill that poses a test for each chamber of Congress. In the House, the vote on a short-term fix for the alternative minimum tax will test whether Democratic representatives have the courage of their convictions. In the Senate, the vote will test whether Democratic senators have any convictions at all, or just a belief in keeping the world safe for campaign contributors.

Under current tax law, 23 million taxpayers will owe the alternative tax for 2007, up from 4 million last year. The tax was originally intended to apply to multimillionaires. But most of this year's alternative taxpayers make between $100,000 and $500,000 and about a third make less than $100,000. They all have good cause to feel rooked and to expect help from Congress.

The challenge is the ''pay-as-you-go'' budget rule adopted when Democrats took control of Congress this year. New tax relief must be paid for, either by raising taxes elsewhere or by cutting government benefits like Medicare or Social Security that cover everyone who is eligible. The one-year cost of shielding millions of Americans from a tax they should not have to pay is $51 billion.

The House tax committee met the challenge, drafting a bill that provides the needed tax relief and plugs the resulting budget gap, mainly by raising taxes on private equity partners and hedge fund managers. The bill is good policy. The tax relief assuages justifiably aggrieved taxpayers. Tax increases on private equity firms and hedge funds rectify outdated rules that have allowed the very wealthiest to enjoy tax rates lower than those paid by middle-income Americans and, in some cases, to defer taxes indefinitely.

But key Democratic senators, among them New York's Charles Schumer, who is the main fund-raiser for Senate Democrats, are balking. They know they must provide alternative tax relief, but they don't want to tax private equity and hedge funds to pay for it. Their defense of the industries' morally indefensible tax breaks is tawdry. As The Washington Post reported yesterday, in the first nine months of 2007, as pressure built to dismantle the tax breaks, investment firms and hedge funds contributed $11.8 million to candidates, party committees and leadership political action committees. That's more than was given in 2005 and 2006 combined. More than two-thirds of that money went to Democrats.

The Senate's equivocating has rubbed off somewhat on the House. The bill is still expected to pass the House, as early as tomorrow, but some members have wondered aloud why they should support a tough measure if the Senate is determined to kill it.

The answer is that it is the right thing to do. The House bill holds true to the pay-as-you-go rule when doing so matters most, that is, when large sums and difficult trade-offs are at stake. It undoes a tax injustice. And maybe, just maybe, the money men in the Senate can be swayed by example.

The PRESIDING OFFICER. The Senator from Rhode Island is recognized.

Mr. WHITEHOUSE. Mr. President, this week we have the chance in the Senate to provide health insurance to 4.1 million children in this country who now don't have it, to cover 11 million children total. All we have to do is the right thing and pass H.R. 2, the Children's Health Insurance Program.

I know the distinguished Presiding Officer from Nebraska and the distinguished Senator from Virginia, who has just spoken so eloquently, have shared the experience I have had in my home State of Rhode Island, and that is to travel around and hear personal stories from people whose lives and whose health have collided with our broken, dysfunctional health care system. Too often, families in this country can't afford to pay for the care they need. As our economic troubles worsen, that problem only grows more acute. Too often, they can't even get in to see a doctor. Too often, when they do receive care, it falls short in quality, in efficiency, in effectiveness, and in timeliness.

The crisis in our health care system affects all of us, but it is greatest and it is most tragic when it affects our children. That is why Congress created the Children's Health Insurance Program which for years has given millions of uninsured, hard-working American families access to health care for their kids.

The program has not only expanded health care coverage for children, it has encouraged States to be flexible, innovative, and responsive in meeting their families' health care needs. We come from 50 different States with 50 different sets of history, demographics, and economics, and as a result, the States come up with different programs. That is something to celebrate, not to bemoan. The program has safeguarded the vulnerable, it has united families, and it has invested in the future of our Nation. It is a special program of all the things that we do here.

The Children's Health Insurance Program means that children are more likely to receive medical care for common conditions such as asthma or ear infections. It means that children end up with higher school attendance rates, and that children have higher academic achievement. It means that children have more contacts with medical professionals. It means that children receive more preventive care. It means that children go to the emergency room when it is an emergency, and when it is not, they have someplace else to go that allows them and their families to stay out of those expensive urgent care settings. So as we have done for the past 2 years, this week we are working to pass legislation to ensure that every eligible uninsured child in America can get regular checkups when they are well and can get medicine when they are sick.

Not long ago, former President Bush denied children needed health care coverage by vetoing this legislation. But the American voters have spoken and we are in a new era in this country—a new era for peace of mind, for security, and for dignity for American children and for their families. With a new Congress and a new President committed to health care for all American families, I could not be more hopeful as we discuss this bill today.

I am especially proud to serve with my senior Senator, JACK REED of Rhode Island, and to support him in this fight. I have been in the Senate for 2 years now. Before I even got here, JACK REED was one of the most prominent, most ardent, and most determined fighters for our Nation's children. Frankly, it is in significant part due to his relentless work that we have come this far.

I am proud also to represent a State that has one of the lowest rates of uninsured adults and children in the Nation. It was not easy. Rhode Island worked hard over the past 15 years to achieve this success. It began with the RIte Care Program in 1993. In 2001, the creation of the Children's Health Insurance Program allowed Rhode Island to further reduce uninsurance rates in the State. I am proud to be on the team of former Governor Bruce Sundlun who turned 89 a few days ago. When he was Governor, he created the original RIte Care Program. His vision and determination to do this, in a time of grave economic straits for Rhode Island, has yielded immense rewards. Now, as health care costs skyrocket and the number of people in this country who lack health insurance approaches the staggering number of 50 million—50 million Americans, and so many of them children—we in Congress have an obligation to strengthen initiatives like RIte Care through which States have made health care more accessible.

Today, 4.1 million uninsured children are waiting for us to pass this bill; 4.1 million children who might not see a doctor this winter when they get the flu because their parents can't afford to pay out of pocket for the visit; 4.1 million children who might delay needed vaccinations or other preventive care because their parents have to buy food instead; 4.1 million children who might not get an inhaler or insulin or—heaven forbid—chemotherapy because in this economic downturn, the money just isn't there.

Who could say no to uninsured, vulnerable children? Should we not at least be able to agree on that? Why would anyone say no? We plan to raise taxes on cigarettes, a tax that the American Cancer Society says could prevent nearly 1 million deaths and keep nearly 2 million children from starting to smoke; a tax with health savings that could ultimately decrease government costs for government health care programs; a tax that the Congressional Budget Office confirms will fully offset this bill so as not to add to our deficit. I don't think that would be a good reason to deny vulnerable children the safety and security of health insurance.

During the course of this discussion, some Members have tried to make this debate about illegal immigration. It is not. We should not permit the very difficult issue of illegal immigration to affect this bill to deny millions of children the health care they badly need. That would be a grave mistake. That would be a wrong.

Let me be very clear: Only children who are legally in the United States are eligible to receive coverage under Medicaid or the Children's Health Insurance Program. They must document their immigration status. Medicaid agencies use information provided by the Bureau of Citizenship and Immigration Services to confirm the status of legal immigrants applying for benefits. Further, this bill does not even require States to cover legal immigrant children. It simply provides and supports that option.

Legal immigrants pay taxes, they serve in our Armed Forces, and just like the rest of us, they play by the rules. They are our future citizens, and insuring their children makes sense. This was the law until 1996 when sweeping restrictions affecting legal immigrants were made. Since 1996, we have become wiser, and many of those restrictions have been reversed on a bipartisan basis by Congress. The provision in this legislation covering legal immigrants is fully consistent with that trend back to 1996 levels.

This Nation is slowly emerging from a dark time when our ideals and our virtues were too often hidden in the shadows, when we let our fear overcome our principles and our better judgment, when we lost sight of our priorities and left millions of people in the cold and millions of children uninsured. That time can end now.

This bill is a chance to show these millions of Americans that we have heard them and that we stand ready to help. We know how tough it is for working families in this economy. If there is one worry, one burden we can take off those parents' shoulders so they can be sure their children have the health insurance every American deserves, we should stand ready to help. This country should once again own its duty to protect those who cannot protect themselves and to restore dignity and hope where it has diminished.

I close by applauding Chairman BAUCUS and the Finance Committee for bringing this vitally important and long overdue legislation to the floor.

I urge all of my colleagues—it would be wonderful if we could do this together—to allow these 11 million children to be covered by health insurance, to have access to the health care they need, to grow up healthy and strong and ready to seize the boundless opportunities that are at the heart of the American dream.

I think we will find in the months and in the years ahead that there will be things we cannot do to help families. I know everybody in this Chamber wants to do everything they can, and we want to work as hard as we can, but the economic situation is dire, and we are not going to be able to do everything we would like. But this is something we can do. This is something we can do for American families and for their children, and I hope very much we will do it.

I yield the floor. I suggest the absence of a quorum.

The PRESIDING OFFICER. The clerk will call the roll.

The bill clerk proceeded to call the roll.

Mr. REID. Mr. President, I ask unanimous consent that the order for the quorum call be rescinded.

The PRESIDING OFFICER. Without objection, it is so ordered.

COMMITTEE ASSIGNMENTS

Mr. REID. Mr. President, in accordance with S. Res. 18, I announce that the following Democratic Members have been assigned to the following committees: Agriculture, Mr. BENNET and Mrs. GILLIBRAND; Banking, Mr.

BENNET; Environment and Public Works, Mrs. GILLIBRAND; Foreign Relations, Mrs. GILLIBRAND; Homeland Security, Mr. BENNET; Aging, Mr. BENNET and Mrs. GILLIBRAND.

The PRESIDING OFFICER. The RECORD will show the appointments.

Mr. REID. I suggest the absence of a quorum.

The PRESIDING OFFICER. The clerk will call the roll.

The legislative clerk proceeded to call the roll.

Mr. REID. Mr. President, I ask unanimous consent the order for the quorum call be rescinded.

The PRESIDING OFFICER. Without objection, it is so ordered.

Mr. REID. Mr. President, I ask unanimous consent that, at 5:25 p.m. today, the Senate resume consideration of the DeMint amendment, No. 43, with the time until 5:45 p.m. for debate with respect to the amendment, with the time equally divided and controlled in the usual form, with no amendment in order to the amendment prior to a vote; that at 5:45 p.m. the Senate proceed to vote in relation thereto; that upon disposition of the DeMint amendment, the Senate resume consideration of the Hatch amendment, No. 45, with 2 minutes of debate equally divided and controlled prior to a vote in relation to the amendment, with no amendments in order to the amendment prior to a vote; that upon disposition of the Hatch amendment, the Senate proceed to executive session and the Banking Committee be discharged from further consideration of the nomination of Daniel K. Tarullo to be a member of the Board of Governors of the Federal Reserve System; that the Senate then proceed to vote on confirmation of the nomination; that upon confirmation, the motion to reconsider be laid upon the table, and the President be immediately notified of the Senate's action; that the Senate then resume legislative session; further, that after the first vote in this sequence, the remaining votes be 10 minutes in duration.

If I could say to Senators within the sound of my voice, we would be having more votes today, but I conferred with Senator MCCONNELL. The Finance Committee is involved in marking up the economic recovery plan. There are scores of amendments they are trying to work through so we are limiting the number of amendments today. We are going to work hard tomorrow, as I indicated when we opened today. We are not going to have morning business all week. We are going to get these amendments processed as quickly as we can.

The PRESIDING OFFICER. Without objection, it is so ordered.

Mr. WHITEHOUSE. I suggest the absence of a quorum.

The PRESIDING OFFICER. The clerk will call the roll.

The legislative clerk proceeded to call the roll.

Mr. WHITEHOUSE. Madam President, I ask unanimous consent that the order for the quorum call be rescinded.

The PRESIDING OFFICER (Mrs. MCCASKILL). Without objection, it is so ordered.

Mr. WHITEHOUSE. Madam President, I see the very distinguished Senator from Arkansas in the Chamber to take over managing this bill.

Before I leave the floor, I want to make two points. I have been here while a great deal of discussion has taken place about 5.4 million children who are eligible for children's health care but who, through lack of effort, it is claimed, the State programs are not finding. The purpose of the argument has been to argue if we could make the States find these kids, they would be the ones for whom the program was truly designed, and that the 4.1 million additional children we are going to help with this legislation are sort of a distraction from that figure.

I have not been able to source that 5.4 million number to anything. I would note on a population basis, my State of Rhode Island is one three-hundredth of the country. So if there are 5.4 million kids out there, in that circumstance, Rhode Island should have, by my math, 18,000 of them. We only have 12,000 kids in the CHIP-funded portion of what we call the RIte Care Program.

From my own experience, the likelihood of there being 18,000 eligible children in our small State who cannot be found makes no logical sense at all, which gives me significant pause about the validity of this 5.4 million number upon which so much of our colleagues' argument stands.

The other point I would make is there are many States that could reach more eligible children, but the funding is not there for them. Rhode Island is one such State. When other States return funds, we get access to that pool, and we can expand our coverage.

So, in fact, by supporting this legislation, you will enable the State programs to reach whatever that group of kids is, whether it is 5.4 million or 540,000. I do not know what the number is. Madam President, 5.4 million sounds very unlikely. But even setting that question aside, the fact that we would vote against this piece of legislation in order to help those 5.4 million kids makes no sense whatsoever because this legislation contains both the funding and the outreach tools to allow the State programs to reach those very kids.

So that argument, at least from this Senator's perspective, appears to hold no water whatsoever, or at least requires substantially better justification and support before it should be counted on, at least in my view, by any Senator as a reason to oppose this piece of legislation.

With that observation, I yield the floor and suggest the absence of a quorum.

The PRESIDING OFFICER. The clerk will call the roll.

The assistant legislative clerk proceeded to call the roll.

Mr. DEMINT. Madam President, I ask unanimous consent that the order for the quorum call be rescinded.

The PRESIDING OFFICER. Without objection, it is so ordered.

AMENDMENT NO. 43

Under the previous order, the time until 5:45 will be equally divided and controlled prior to a vote on amendment No. 43, offered by the Senator from South Carolina, Mr. DEMINT.

The Senator from South Carolina is recognized.

Mr. DEMINT. Thank you, Madam President.

I wish to take a few minutes to talk about an amendment I am offering as part of the children's health plan we will be voting on probably later this week.

I think it is important, as we talk about expanding the program, we do it responsibly and make sure we do everything we can to keep personal responsibility as part of the plan. All of us, Republicans and Democrats, look forward to the day when every American family has a health insurance plan they can afford and own and keep.

The children's health plan is, I see, maybe an interim step to that. It was started to help America's poorest children be insured. The plan we are discussing today, however, expands the children's health plan to children over 200 percent of poverty. One of the things we want to make sure does not happen is people who have private insurance and have taken responsibility for health insurance for their family are not encouraged to drop their private insurance and to join a government children's health plan.

There are ways we can do it, and some States already do this. This is by adding cost-sharing provisions for those who take advantage of the government children's health plan. That is what my amendment is about: making sure States that provide Government health coverage to families over 200 percent of poverty have some cost-sharing arrangement to send the signal that this is not a permanent subsidy from Government but a temporary bridge to help families who need some help getting health insurance for their children to get the help they need.

So let me talk a little bit about what is in there.

Again, the main goal of this amendment is to stop the people moving from private plans—that they are paying for and taking responsibility for—to a Government-sponsored plan so there is accountability, and that is what we want to make sure is in this system.

We need to remind our colleagues the children's health plan was created for America's poorest children. I wish a lot of our emphasis and debate was on: How can we get more children under 200 percent of poverty actually registered for the program? There are millions of children today who qualify for the current children's health plan who are not registered, either for what we call SCHIP or for Medicaid. Instead of

just taking those numbers up and expanding the people who can take advantage of the program, we should be trying to get those who are most needy registered for the program. Instead, I am afraid we are going to crowd out those folks, as we provide insurance for other families. In some States, under this plan, families making over $70,000 a year, with a family of four, can take advantage of Government health plans.

So what we are going to have is one person making $70,000 a year paying for their own private insurance and their neighbor making the same amount who has Government health care. There are ways we can discourage it. A number of States already require that the beneficiaries of this children's health plan pay a copay or a small part of the cost of the health insurance, and that is what this amendment does.

My amendment specifically would require that States that are offering the children's health plan to families above 200 percent of poverty have some minimum cost-sharing. We protect the beneficiaries by saying that no State can charge a user of the children's health plan more than 5 percent of their monthly income, and we don't have a minimum. So we expect most States to have a very minimum cost-sharing plan put in place.

What we are doing does not replace or change anything that States already have set up for cost-sharing. In fact, I think it will make it fairer for them. The way the system will work, unless we pass this amendment, is the people in States that are participating in the costs of this plan will help pay more for those States that don't have any cost-sharing. So it is not fair, if we have some States encouraging personal responsibility and cost-sharing, to put more of a burden on them to pay for States that might not do the same.

My belief is that every State would implement for families over 200 percent of poverty a cost-sharing arrangement. What this does is just lays out some basic parameters that give the States complete flexibility, whether it is a copay, whether it is a percent of the insurance, but not to exceed 5 percent of the income of any of the recipients.

I understand this is the next amendment to be voted on. I encourage all of my colleagues to do everything we can to stop any incentives that move people from private insurance to Government insurance, create some accountability and personal responsibility in this plan for the ones with higher incomes, and to save more of the dollars for those who are most needy in the plan.

Again, I encourage a vote, and I reserve the remainder of my time.

I yield the floor.

The PRESIDING OFFICER. Who yields time?

Mr. PRYOR. Madam President, I ask unanimous consent that the time during the quorum call be divided evenly, and I suggest the absence of a quorum.

Mr. DEMINT. Madam President, reserving the right to object, I understand I have 2½ minutes left; is that correct?

The PRESIDING OFFICER. That is correct.

Mr. DEMINT. And the quorum call will be applied against that time; is that correct?

The PRESIDING OFFICER. Equally applied to the Senator 2½ minutes and the time remaining on the majority side.

Mr. DEMINT. If the Senator would agree, I don't have much time left, and if I could reserve that time. If there is no opposition, obviously, I don't need to use any additional time.

Mr. PRYOR. That is agreeable.

Mr. DEMINT. I thank the Senator.

Mr. PRYOR. I suggest the absence of a quorum.

The PRESIDING OFFICER. The clerk will call the roll.

The assistant legislative clerk proceeded to call the roll.

Mr. PRYOR. Madam President, I ask unanimous consent that the order for the quorum call be rescinded.

The PRESIDING OFFICER. Without objection, it is so ordered.

Mr. PRYOR. Madam President, I move to table the DeMint amendment No. 43 and ask for the yeas and nays.

The PRESIDING OFFICER. Is there a sufficient second?

There appears to be a sufficient second.

The question is on agreeing to the motion.

The clerk will call the roll.

The assistant legislative clerk called the roll.

Mr. DURBIN. I announce that the Senator from Massachusetts (Mr. KENNEDY) is necesarily absent.

Mr. KYL. The following Senator is necessarily absent: the Senator from Louisiana (Mr. CHAMBLISS).

The PRESIDING OFFICER (Mr. TESTER). Are there any other Senators in the Chamber desiring to vote?

The result was announced—yeas 60, nays 37, as follows:

[Rollcall Vote No. 16 Leg.]

YEAS—60

Akaka	Feingold	Mikulski
Baucus	Feinstein	Murray
Bayh	Gillibrand	Nelson (FL)
Begich	Hagan	Nelson (NE)
Bennet	Harkin	Pryor
Bingaman	Hutchison	Reed
Bond	Inouye	Reid
Boxer	Johnson	Rockefeller
Brown	Kaufman	Sanders
Burris	Kerry	Schumer
Byrd	Klobuchar	Shaheen
Cantwell	Kohl	Specter
Cardin	Landrieu	Stabenow
Carper	Lautenberg	Tester
Casey	Leahy	Udall (CO)
Collins	Levin	Udall (NM)
Conrad	Lieberman	Warner
Dodd	Lincoln	Webb
Dorgan	Menendez	Whitehouse
Durbin	Merkley	Wyden

NAYS—37

Alexander	Cochran	Graham
Barrasso	Corker	Grassley
Bennett	Cornyn	Gregg
Brownback	Crapo	Hatch
Bunning	DeMint	Inhofe
Burr	Ensign	Isakson
Coburn	Enzi	Johanns
Kyl	Murkowski	Thune
Lugar	Risch	Vitter
Martinez	Roberts	Voinovich
McCain	Sessions	Wicker
McCaskill	Shelby	
McConnell	Snowe	

NOT VOTING—2

Chambliss	Kennedy

The motion was agreed to.

AMENDMENT NO. 45

The PRESIDING OFFICER. Under the previous order, there will now be 2 minutes of debate equally divided prior to a vote in relation to amendment No. 45, offered by the Senator from Utah, Mr. HATCH.

The Senator from Utah is recognized.

Mr. HATCH. Mr. President, to remind my colleagues, the Hatch amendment, No. 45, says that before a State is permitted to cover legal immigrants through CHIP and Medicaid, it must demonstrate to the HHS Secretary that 95 percent of its State children who are citizens under 200 percent of the Federal poverty level are enrolled in either the State's Medicaid Program or CHIP.

My amendment does not prohibit legal immigrant children from being covered, but it does set some of the parameters. Again, I believe our U.S. children who are citizens should be covered first. If you cover 95 percent, then you can go on and do more. Once those kids are covered, I am happy to work with my colleagues to cover legal immigrant children, but our U.S. citizen kids should be covered first. That is all I am saying, and I think it is reasonable.

Mr. President, I think this is a reasonable amendment. I am prepared to ask unanimous consent to have a voice vote on it.

The PRESIDING OFFICER. The Senator from Montana is recognized.

Mr. BAUCUS. Mr. President, basically the amendment requires States to certify that 95 percent of their CHIP children, or Medicaid, are being paid first before the children of legal immigrants. No State meets that requirement.

I might also say the nationwide average for covering children under 200 percent of poverty is 80 percent. No State reaches 95. It is too high a standard.

More than that, we do include in this bill provisions for bonus payments to States to encourage them to cover low-income kids first. I think it would be inappropriate and unfair to make it an ironclad requirement that States must certify 95 percent. These are kids who are sick through no fault of their own. Their parents are paying taxes. They are full citizens—they are legal immigrants, but they are already incorporated into the system, being taxed, et cetera, and their kids should not be penalized.

I strongly encourage us not to adopt this amendment because no State can certify to 95 percent.

The PRESIDING OFFICER. All time has expired. The Senator from Utah is recognized.

Mr. HATCH. Mr. President, I ask unanimous consent that we withdraw the call for a rollcall vote and voice-vote this amendment.

The PRESIDING OFFICER. The rollcall vote has not been ordered.

The question is on agreeing to the amendment.

The amendment was rejected.

The PRESIDING OFFICER. The majority leader is recognized.

Mr. REID. Mr. President, I have conferred with the Republican leader. This will be the last vote today. The Finance Committee is still meeting, and they expect to continue working tonight. I spoke to the chairman just a short time ago. He is going to do everything within his power to finish the markup tonight. We are going to get back tomorrow and again have no morning business. We will be back on this bill tomorrow. Everyone who has amendments to offer, get them ready.

EXECUTIVE SESSION

NOMINATION OF DANIEL K. TARULLO TO BE A MEMBER OF THE BOARD OF GOVERNORS OF THE FEDERAL RESERVE SYSTEM

The PRESIDING OFFICER. Under the previous order, the nomination is discharged and the Senate will proceed to executive session to consider the nomination, which the clerk will report.

The bill clerk read the nomination of Daniel K. Tarullo, of Massachusetts, to be a member of the Board of Governors of the Federal Reserve System.

Mr. LEVIN. Mr. President, I ask for the yeas and nays.

The PRESIDING OFFICER. Is there a sufficient second? There appears to be a sufficient second.

The question is, Will the Senate advise and consent to the nomination of Daniel K. Tarullo, of Massachusetts, to be a member of the Board of Governors of the Federal Reserve System. On this question, the yeas and nays have been ordered and the clerk will call the roll.

The legislative clerk called the roll.

Mr. DURBIN. I announce that the Senator from Massachusetts (Mr. KENNEDY) is necessarily absent.

Mr. KYL. The following Senator is necessarily absent: the Senator from Georgia (Mr. CHAMBLISS).

The PRESIDING OFFICER. Are there any other Senators in the Chamber desiring to vote?

The result was announced—yeas 96, nays 1, as follows:

[Rollcall Vote No. 17 Ex.]

YEAS—96

Akaka	Boxer	Coburn
Alexander	Brown	Cochran
Barrasso	Brownback	Collins
Baucus	Burr	Conrad
Bayh	Burris	Corker
Begich	Byrd	Cornyn
Bennet	Cantwell	Crapo
Bennett	Cardin	DeMint
Bingaman	Carper	Dodd
Bond	Casey	Dorgan
Durbin	Kyl	Risch
Ensign	Landrieu	Roberts
Enzi	Lautenberg	Rockefeller
Feingold	Leahy	Sanders
Feinstein	Levin	Schumer
Gillibrand	Lieberman	Sessions
Graham	Lincoln	Shaheen
Grassley	Lugar	Shelby
Gregg	Martinez	Snowe
Hagan	McCain	Specter
Harkin	McCaskill	Stabenow
Hatch	McConnell	Tester
Hutchison	Menendez	Thune
Inhofe	Merkley	Udall (CO)
Inouye	Mikulski	Udall (NM)
Isakson	Murkowski	Vitter
Johanns	Murray	Voinovich
Johnson	Nelson (FL)	Warner
Kaufman	Nelson (NE)	Webb
Kerry	Pryor	Whitehouse
Klobuchar	Reed	Wicker
Kohl	Reid	Wyden

NAYS—1

Bunning

NOT VOTING—2

Chambliss Kennedy

The nomination was confirmed.

The PRESIDING OFFICER (Mr. UDALL of Colorado). Under the previous order, the motion to reconsider is considered made and laid upon the table.

The President will be immediately notified of the Senate's action.

LEGISLATIVE SESSION

The PRESIDING OFFICER. The Senate will resume legislative session.

CHILDREN'S HEALTH INSURANCE PROGRAM REAUTHORIZATION ACT OF 2009—Continued

The PRESIDING OFFICER. The Senator from Ohio.

ECONOMIC RECOVERY

Mr. BROWN. Mr. President, the severity of this economic crisis requires the Federal Government to respond quickly and forcefully. The economic recovery proposal we are considering has two key objectives: stimulating the economy and creating jobs. Congress currently is negotiating where the funds will be spent—on infrastructure projects, on health care and safety net programs, on developing alternative energy for the 21st century economy. As we decide how to spend these tax dollars, it is imperative we consider where to spend them or, rather, on whom. These funds must create American jobs. To do that, we must ensure that Federal funds are used to buy American services and American products.

Our economy is suffering from the highest unemployment rate in more than a decade and a half. In 2008, we lost 2.6 million jobs, the largest job losses in 1 year in more than six decades. Our unemployment rate jumped to 7.2 percent. We all know that number doesn't tell the real story, the real human story. The more accurate measure of joblessness, the unemployed and the underemployed, or workers whose hours have been cut, is almost 14 percent. More than 533,000 jobs were eliminated in December. Yesterday, some of America's strongest, most prestigious companies announced more than 55,000 job cuts in 1 day. Among them was General Motors, which announced it would cut a shift at its Lordstown plant in Mahoning County in northeast Ohio. As President Obama said:

> These are not just numbers on a page. There are families and communities behind every job.

Communities such as Moraine and Chillicothe and Canton understand what happens when there is a major layoff. They don't need to hear the new job numbers. They understand it when small businesses close and diners empty out.

Manufacturing jobs keep American communities strong, and the steepest job losses are occurring in manufacturing. Nearly one in four manufacturing jobs has simply vanished since 2000, and 40,000 factories have closed in the last 10 years. Last year, manufacturing accounted for nearly a third of all lost jobs, while factory orders plummeted to record lows. Inventories are piling up because no one is buying. This leads to production cuts and then massive job losses that we will likely see more of this year. President Obama said it is likely going to get worse in 2009 before it gets better.

A loss of manufacturing is about more than jobs; it is about the loss of the Nation's middle class. I want to lay out what exactly the benefits of manufacturing are to this Nation.

Many of us represent large manufacturing workforces. All of us represent some manufacturing, some in more States than others. We all recognize or all should recognize the importance of manufacturing to our national security and to our domestic security—for families, neighborhoods, communities, for the Nation.

Let me cite the benefits of manufacturing:

No. 1, these jobs pay better on average than others.

No. 2, manufacturing jobs have a stronger multiplier effect, supporting as many as five other jobs. For instance, an auto assembly plant obviously creates other jobs—suppliers and tool and die shops and machine shops and parts manufacturers, and all that those jobs create. Manufacturers are large taxpayers supporting vital public services and schools in communities across the Nation.

No. 3, if you have a large industrial plant in a school district, that school district gets an awful lot of help in local property tax dollars from the manufacturing plant.

No. 4, American manufacturers are on the cutting edge of new technologies in the clean energy economy of tomorrow.

No. 5, if we are to end our dependence on foreign oil, we need to do more manufacturing here rather than allowing it to go offshore, especially in alternative energy.

No. 6, our national security depends on a strong defense industrial base to supply troops and protect our national interests.

Without a bold economic recovery plan that makes manufacturing a priority, the job losses will continue throughout this year and into next.

''Buy American,'' established in 1933 by President Roosevelt, requires that Federal purchasers prefer U.S. products. In other words, if the product is made in the United States at a decent price, then Federal purchasers must buy those products. But over the years, waivers of those preferences have been abused to create giant loopholes in ''Buy American.'' In other words, when we should be buying American, we are often buying Chinese or from some country in the European Union or Mexico. U.S. tax dollars whenever possible should go to create U.S. jobs. It is pretty simple. It is something people at home simply don't understand—nor do I—why we, as a country, as a government, don't use our tax dollars to create American jobs.

I am concerned about the lack of transparency in the waiver process and how that can lead to lost business, lost jobs, lost work, the actual steel, iron, cement, and other materials coming from overseas and not creating jobs in our country.

The Obama administration's stated goal is to make the biggest investment in the Nation's infrastructure since President Eisenhower created the Interstate Highway System more than 50 years ago. Imagine all this infrastructure, steel, concrete, all the materials we are going to buy with tax dollars, what it will matter if these products are made in the United States and not somewhere else. That is what we did mostly with the Interstate Highway System 50 years ago.

So when we are building infrastructure, whether it is water or sewer lines in Denver or whether it is a bridge in Minneapolis, this ''Buy American'' provision says we should be buying American and creating jobs here.

We have a responsibility to taxpayers to ensure that these dollars are creating jobs. Inclusion of ''Buy American'' requirements in the recovery proposal would be the most effective way to ensure that tax dollars are spent in the United States to create jobs. We have a responsibility to give American manufacturers the opportunity to bid on the steel and the iron and the other products that will be in demand from these massive investments in our infrastructure.

We have ''Buy American'' provisions in Federal statutes that provide that preference to use domestic materials, such as steel and other products and components, in federally funded highway and transit projects for State and local authorities. These need to be applied to the maximum extent possible as we try to revive the economy, as we move the Obama stimulus package through the Chamber.

Just last week, the Government Accountability Office reported on the benefits of Buy American policies. This is what the GAO said:

> The types of potential benefits to this program include protecting domestic employment through national infrastructure improvements that can stimulate economic activity and create jobs. . . .

This recovery proposal is about creating direct jobs with taxpayer dollars and then spin-off jobs with taxpayer dollars.

Let me be clear. This is not about stopping or slowing international trade. It is about using provisions in U.S. law consistent with our international obligations that allow for a preference for domestically produced goods financed by our U.S. taxpayer dollars.

Only if we do this will the recovery effort have the impact our towns and cities so desperately need. Why spend tens of billions—no, hundreds of billions—of dollars for infrastructure if we are not going to spend that money on American made products to create jobs directly and the spin-off jobs that come from that manufacturing?

American taxpayers deserve no less. Congress must act in good faith to create the most jobs here, especially in manufacturing. Enforcing the Buy America requirements already on the books and, to the extent we can, applying them to this stimulus bill is simply the right thing to do.

Thank you, Mr. President.

The PRESIDING OFFICER. The Senator from Pennsylvania.

Mr. CASEY. Mr. President, I rise tonight to speak of the Children's Health Insurance Program and the debate we are having in the Senate.

I appreciate what my colleague from Ohio just spoke of, the tremendous trauma that has been caused across the country with this terrible recession so many families are living through. I appreciate the fact he reminded us about what has been happening in our States and our communities as a result of this economic horror that so many families are living through. That horror and that trauma will only be increased in the months and years ahead if we do not pass this children's health insurance legislation. I think it is directly related to what we are talking about here when it comes to the terrible recession so many families are living through.

So I want to speak about the bill and deal with some of the questions that have been raised about the bill. But in particular, I want to, first, step back from the bill, from the debate, even step back for a few minutes from the program itself, to reflect on what the reality is for families.

I think when we speak of families and children's health insurance we speak and we think mostly about parents and the relationship they have to their children and what they want for their children. They, of course, want their children to succeed in life. They have hopes and dreams for their children. But, of course, for a parent, and especially for a mother, who is often providing most of the care for a child, her initial hopes, her initial fears, her concerns at the beginning of that child's life are very basic: Will that child be born healthy? Will that child grow and develop as he or she should?

I was thinking back to 2007 when we were having this debate at that time, thinking of the love of a mother and what she can provide for a child, especially a very young child. That mother can provide all of the protection she can muster for that child, she can envelop or embrace that child with protection and love and nurturing and all the wonderful things that a mother—a parent but especially a mother—can provide for a child. But there are some things that no matter what that mother does, no matter how much she loves her son or her daughter, there are some things she cannot provide on her own. She cannot provide health insurance on her own. She cannot provide medical care if she is not trained in that profession as a doctor or a nurse.

So there are a lot of mothers out there who have children they worry about every day of the week. They go to bed worrying what if that child has a problem in the middle of the night or some kind of a health care challenge in the middle of the day, what will happen to that child?

So when we are thinking about this debate and this issue, we should think about the love of a mother and what she can and cannot provide. That is one of the reasons why as a country we come together to solve problems such as this. We know an individual person cannot build a road, so we come together and provide public resources to build a road. We know one person or one family cannot provide law enforcement protection, so we all contribute to that. The same is true on health care. No matter how much that mother loves her child, she cannot on her own provide health insurance.

So what did we do? We created a program which in my State of Pennsylvania is called the Children's Health Insurance Program—CHIP for short. The program ''name'' is kind of redundant because the last word of the acronym is ''Program.'' But the CHIP Program then developed into a national program, as the Presiding Officer knows from his time in the House of Representatives, the so-called SCHIP, State Children's Health Insurance Program. That is what the debate is about.

What did we do? We created a program which now covers 6.7 million American children, most of whom, probably the overwhelming majority of whom would not have any health insurance coverage because, as we know, these are families who are above the income levels for Medicaid but they are often below or outside the category of families who have employer-sponsored health insurance. So they are in that gap: lower middle or middle-income families, in many cases. So we have covered 6.7 million children. That is wonderful. The only problem is there are millions more who are not covered.

This bill—strip away all the debate, all of the back and forth, all of the fighting about this—at its core, just as it did a couple years ago, is to provide health insurance to more than 4 million additional children. So 6.7 million, roughly, and you add 4.1 million, that is what you are talking about.

So we have the program in the legislation now to cover more than 10.5 million American children. Few, if any, generations of Americans who have served in a legislative body could say they cast a vote to cover that many children. It is a tremendous opportunity for a child, for their family, for the community and neighborhood they live in, for their State, and for their country now and in the next months and years ahead, but it is also important to all of us down the road.

Who would you want to hire 20 years from now? A child we invested in? A child who had health care in the dawn of his or her life? A child who had early learning opportunities? A child who had a good healthy start in life? I think as an employer you would want to hire a person who had that investment. They are bound to be more productive. So there is a long-term workforce argument. But even if that argument was not there, this is the right thing to do for the obvious reasons.

Now, what are we talking about? We are talking about health care and benefits. There is a long list of benefits I won't go through. We have charts we have all pointed to, and we will continue to do that.

But just consider one aspect of the benefits, one that I focus on because I think it is crucial to the life of a child and crucial to their—I should say, not just crucial, determinative of the kind of future they are going to have or not have, and that is well-child visits. One of the benefits that is covered in Pennsylvania is that in the first year of the life of that child he or she will get six well-child visits. Every child in America should have that opportunity. Every family should have the peace of mind to know that if all does not go well, at least their child has health insurance, and in the first year of their life they have been to the doctor at least six times, and they have been to the dentist and any other specialty they can get to and that the benefits cover.

So if we want to just focus on one benefit of the children's health insurance: a kid gets to the doctor six times in a year—pretty important. I am not a doctor, but we all know the benefit, as parents and as legislators from our work.

Another aspect of this legislation that does not get a lot of attention: When people hear about a government-inspired initiative, or a program in this case, that is partially paid for with public dollars, we often hear about: Well, that is just for communities where people are low income, but they are covered by Medicaid, so why do we need to help them? It does not help people kind of across the length and breadth of the country. It is somehow targeted to one group and, therefore, it is not good for everyone.

Well, I just made the case about the workforce long term. But one aspect of this issue in terms of a group of children who are often not in the headlines but benefit directly and are reliant upon the Children's Health Insurance Program and the Medicaid Program for children is that a lot of poorer families with children are in rural areas—people who live in rural areas across the State of Pennsylvania and across the country.

In my State of Pennsylvania, when you get outside of Philadelphia and Pittsburgh and Erie and Harrisburg—a couple of major urban areas—we are a very rural State. We have literally millions of people who live in the demographic category that we refer to as rural areas. Those children—one-third of them—rely upon either the Children's Health Insurance Program or the Medicaid Program. So it helps a high percentage of rural children.

In the midst of this economy, when those rural communities in Pennsylvania and across the country have been disproportionately adversely impacted by high energy costs, including everything from gasoline to home heating oil, to all kinds of other energy costs, when they have also been hit hard by the downturn in the economy—job losses are rampant in rural communities—when you factor in those realities with the dependence or reliance they have on this program, it is critically important we provide as much in the way of resources as we can and outreach to get those children enrolled in rural areas, as well as in our urban and even suburban communities.

I want to conclude with a recitation of some myths and facts, some of which we have heard on the floor in the debate over the last couple days. I will do just one, two, three, four—about four or five myths.

Myth No. 1, the children's health insurance bill reduces documentation requirements, allowing illegal immigrants to receive benefits. That is the myth.

Here are the facts.

Fact No. 1: Under current law, only individuals applying for Medicaid are subject to the citizenship documentation requirements. This bill actually extends those requirements to the Children's Health Insurance Program, requiring documentation in CHIP just like documentation is required in the Medicaid Program. You would never know that by some of the debate here.

Fact No. 2 about this documentation issue: Because the requirements have resulted in the widespread denial of coverage to many citizens, the children's health insurance bill also gives States a new way to prove citizenship through matching Social Security Administration records. So that is further help on documentation.

Fact No. 3 under this section: These citizen documentation provisions are the same as they were in the children's health insurance bill passed in the Senate overwhelmingly—overwhelming—with bipartisan support in 2007. So it is the same. So for those who are creating the myth that somehow it is new, that is not true.

Myth No. 2: The bill ends the mandatory 5-year waiting period for legal immigrants to receive benefits—opening the program to abuse by illegal immigrants. It is another myth.

Fact No. 1 under this myth: The bill allows but does not require—it allows but does not require—States to cover legal immigrant children without forcing them to wait 5 years for coverage. Why should a child who is a legal immigrant or why should a pregnant woman in the same circumstance—why should they have to wait 5 years? Does that make any sense at all? Does that make any of us safer or does that make our country better to have vulnerable people wait to get these benefits, especially when 23 States are doing this now? By listening to the debate, you would think this is some new concept that just fell out of the sky. Twenty-three States right now are doing this. So what does this bill do? It allows States to cover legal immigrant children without forcing them to wait 5 years for coverage.

Only immigrant children here legally—legally—are eligible for the benefits provided by Medicaid and the Children's Health Insurance Program. So if anyone uses the word ''illegal'' in this context, you know automatically they are deliberately attempting to mislead people.

Children and pregnant women who will now be eligible must document their immigration status. State Medicaid agencies use the Bureau of Citizenship and Immigration Services' automated SAVE system to verify the immigration status of legal immigrants applying for Medicaid. So that is a protection that is built into this bill.

The next myth: This bill will allow children from families making over $80,000 per year to receive coverage while poor children are still not enrolled.

That is another myth. This bill would extend coverage to 4 million more low-income children and help struggling families in this time of economic downturn. The CHIP bill prioritizes enrolling low-income children by establishing a performance-based system to reward States for enrolling low-income kids while giving them new tools to do so. So we incentivize States to go out and enroll more children, which is a worthy thing to do, and critically important.

Under the bill, States would be allowed to designate CHIP funds to help families afford private coverage afforded by employers or other sources.

Finally, under this section, the bill maintains provisions to reduce the Federal match rate for the cost of covering children above 300 percent of the Federal poverty level.

Let me get to two more myths, and I will conclude.

The next myth: The revenue stream to pay for the Children's Health Insurance Program with tobacco tax is unsteady and will not be able to fund the program in the future, increasing the burden on taxpayers.

That is the myth. We have heard that a lot. The fact is, according to the nonpartisan Congressional Budget Office, the proposed $31.5 billion in spending will be fully paid for by the fee increase to tobacco products over the authorized 5-year timeframe.

Finally, this myth: Democrats have made unilateral changes to CHIP, which has jeopardized the bipartisan support of the previous version passed by the Senate.

Fact: The CHIP legislation introduced this year is almost identical to the legislation in 2007 which received broad bipartisan support in the House and the Senate. Two prior bipartisan efforts were blocked by President Bush when he vetoed the legislation.

Providing health care for children is not a Democratic or Republican issue. We know that. It is a moral issue and one that all Senators should support. The few unresolved policy disagreements were put to a vote in the committee. So we have had a committee vote as well.

So I would conclude tonight with where I began. What is the Senate going to do when faced with the question, the stark and fundamental question: Are we going to act this week to cover 4.1 million more children? It is up or down.

There have been a lot of discussions about so-called immigration issues which I think have been misleading. A lot of the debate is about numbers. But we are either going to act to do this, to cover 4 million kids, or not.

Finally, what will the Senate do this week to speak to that one mother and to say to her: We understand a little bit—a little bit—about what you are going through, and we understand that with all of the love you surround your son or daughter with, we know you cannot provide them health insurance on your own. We are going to help you because we have the program that has been in place for 15 years, which is one of the best pieces of legislation this body or the other body ever voted on; we know how to help you, and we are going to do everything we can to help you. We know this economy is especially tough on that mother and that family. We are going to act to help you through this difficult period in your life so that you can have the peace of mind to know that your son or daughter at least—at least—is covered by health insurance and can get six visits to the doctor in a year. That is not asking too much of all of us and of the American people, to show some degree of understanding and some degree of solidarity with that mother and her children.

Thank you, Mr. President. I yield the floor and note the absence of a quorum.

The PRESIDING OFFICER. The clerk will call the roll.

The legislative clerk proceeded to call the roll.

Mr. DURBIN. Mr. President, I ask unanimous consent that the order for the quorum call be rescinded.

The PRESIDING OFFICER. Without objection, it is so ordered.

Mr. DURBIN. Mr. President, I ask unanimous consent to speak as in morning business.

The PRESIDING OFFICER. Without objection, it is so ordered.

ERIC HOLDER NOMINATION

Mr. DURBIN. Mr. President, I rise in support of the nomination of Eric Holder to be Attorney General of the United States. As a member of the Judiciary Committee, I have given especially close consideration to this nomination. I met privately with Eric Holder, reviewed his record, listened to his sworn testimony, and I have come to the conclusion that he will be an outstanding Attorney General.

On January 15 and 16, the Judiciary Committee held a hearing on Mr. Holder's nomination where he was asked many questions from the committee members on both sides of the aisle. He stayed until every member of the committee had asked every question they wished. Then, following the hearing, Mr. Holder responded to literally hundreds of written followup questions from members of the committee.

Last week, the Judiciary Committee was scheduled to vote on his nomination. Despite a lengthy 2-day hearing which included multiple outside witnesses and Mr. Holder's timely response to the questions, the Republicans asked to postpone the committee's vote on Mr. Holder's nomination. That is their right under the Senate rules, but it is disappointing that despite Mr. Holder's full cooperation, we have been unable to move forward on this nomination to this point. As a result, the crucial position of Attorney General remains unfilled and the Obama administration's national security team is incomplete.

Due to the delay, the committee will now vote on Mr. Holder's nomination as early as tomorrow. I urge my colleagues on both sides of the aisle to support the nomination so we can have new leadership in place at the Justice Department.

I believe Eric Holder has the experience, independence, and commitment to the rule of law to reform the Justice Department. He will be one of the most qualified Attorneys General, having previously served as Deputy Attorney General, U.S. attorney, judge, and a career Justice Department attorney. Mr. Holder will need to bring all of that experience to bear to restore the integrity of the Department which has descended to a sad state today.

However, it is more than just experience that he will bring. The Attorney General is the people's lawyer, not the President's lawyer, so he or she needs to have the backbone on occasion, if necessary, to stand up for what is right, even if it means disagreeing with the President.

I have had many differences of opinion with John Ashcroft, our former Attorney General under the previous President, but there was a moment in history when he was literally in an intensive care unit and asserted his authority as Attorney General to say no to the President. It took courage. It took commitment. It took professionalism. We should expect nothing less of those who serve in that capacity.

There can be little doubt about Eric Holder's willingness to say no to the President. He has demonstrated a lot of independence throughout his career. As Deputy Attorney General, he recommended expanding the Starr investigation into the Monica Lewinsky affair, and he recommended the appointment of a special prosecutor to investigate a member of President Clinton's Cabinet. He has been involved in the investigation and prosecution of Members of Congress in both political parties.

The testimony of former FBI Director Louie Freeh, in support of Mr. Holder, is a good indication of his independence. No one would accuse Mr. Freeh of being a partisan Democrat. He was a strong supporter of former New York mayor Rudy Giuliani and also of JOHN MCCAIN's efforts when he ran for President. He has been a vocal critic of former President Clinton. Mr. Freeh included his decisions to pardon Marc Rich and offer commutation to the FALN as things he disagreed with. But Mr. Freeh enthusiastically supports Mr. Holder's nomination. Here is what he said:

> The Attorney General is not the President's lawyer. . . . the President has a White House counsel for those purposes. And I know that Eric Holder understands the difference. I think he would be very quickly able to say no to the President if he disagreed with him. And I think that's the confidence and trust we need in that position.

Mr. Holder is also supported by dozens of other prominent Republican lawyers, such as former Attorney General William Barr and former Deputy Attorney General Jim Comey, a man who, incidentally, distinguished himself during the previous administration in his service at the Justice Department.

President Obama respects Eric Holder's independence. At his hearing, Mr. Holder testified about a conversation he had with the President after he accepted the offer. The President said:

> Eric, you've got to understand you have to be different. You know, we have a pretty good relationship. That's probably going to change as a result of you taking this position. I don't want you to do anything that you don't feel comfortable doing.

What a refreshing exchange. It gives me hope that the Attorney General, if it is Eric Holder, in this Justice Department will chart a new and important course for this Nation.

In addition to Mr. Holder's experience and independence, there is little

doubt about his commitment to the rule of law. I voted against the two previous Attorneys General because of their involvement in one issue: torture.

As White House Counsel, Alberto Gonzales was an architect in the Bush administration's policy on interrogation, a policy which has come into criticism not only in the United States but around the world. His successor, Michael Mukasey, refused to repudiate torture techniques such as waterboarding. That was unfortunate because Mr. Mukasey really brought a stellar resume to the job, but that really was a bone in my throat that I couldn't get beyond, and I voted against his nomination.

Now, during his confirmation hearing, Eric Holder gave a much different response. When asked directly, he said: ''Waterboarding is torture.''

Those three words resonated throughout the committee room and across the Nation among many Americans who had been concerned about this important issue and literally gave a message to the world that there was a new day dawning in Washington.

I also asked Mr. Holder the same question I asked Attorneys General Gonzalez and Mukasey: Does he agree with the Judge Advocates General, the four highest ranking military lawyers, that the following interrogation techniques violate the Geneva Conventions: painful stress position, threatening detainees with dogs, forced nudity, or mock execution. Mr. Holder said:

> The Judge Advocate General Corps are in fact correct that those techniques violate Common Article 3 of the Geneva Conventions.

Some of my colleagues on the other side of the aisle have suggested that Eric Holder's opposition to torture will somehow lead to a witch hunt against former Bush officials. Frankly, this seems like a weak excuse to delay the confirmation of a well-qualified nominee.

Here are the facts: President Obama and Eric Holder made it clear that while no one is above the law, the administration is going to move forward, not back. The goal to investigate the Bush administration does not come from the Obama administration but from others such as retired major general Antonio Taguba, who led the U.S. Army's official investigation into the Abu Ghraib prison scandal.

Here is what General Taguba recently said:

> The Commander in Chief and those under him authorized a systematic regime of torture. . . . there is no longer any doubt as to whether the [Bush] administration has committed war crimes.

In the words of General Taguba:

> The only question that remains to be answered is whether those who ordered the use of torture will be held to account.

Indeed, the facts are troubling. Former President Bush and former Vice President Cheney have acknowledged authorizing the use of waterboarding which the United States had previously prosecuted as a war crime. Susan Crawford, the Bush administration official who ran the Guantanamo military commissions, said that the so-called 20th 9/11 hijacker cannot be prosecuted because ''his treatment met the legal definition of torture.''

Now it appears some Republicans are holding up Eric Holder's nomination because of the problems of the previous administration. A headline in the Washington Post this last Sunday highlighted the irony. It said: ''Bush Doctrine Stalls Holder Confirmation.'' Apparently, some Republicans are opposing Eric Holder because of their concern that former Bush administration officials may be prosecuted for committing war crimes.

Here is what the junior Senator from Texas said:

> I want some assurances that we're not going to be engaging in witch hunts.

But Mr. Holder has made it clear in his testimony there will be no witch hunts. He testified:

> We will follow the evidence, the facts, the law, and let that take us where it should. But I think President-elect Obama has said it well. We don't want to criminalize policy differences that might exist between the outgoing administration and the administration that is about to take over.

The junior Senator from Texas also expressed concerns about Eric Holder's ''intentions . . . with regard to intelligence personnel who were operating in good faith based upon their understanding of what the law was.'' But Mr. Holder has made his intentions clear. He testified:

> It is, and should be, exceedingly difficult to prosecute those who carry out policies in a reasonable and good faith belief that they are lawful based on assurances from the Department of Justice itself.

What more would you expect a man aspiring to be Attorney General to say? It certainly would be inappropriate to seek an advance commitment from any nominee for Attorney General that they will definitely not investigate allegations of potential criminal activity. No responsible Attorney General would ever say that, nor should that person be confirmed if they made that statement.

Senator LINDSEY GRAHAM, another Republican member of the Judiciary Committee, recognizes that fact. Senator GRAHAM, also a military lawyer still serving, said:

> Making a commitment that we'll never prosecute someone is probably not the right way to proceed.

He went on to say:

> I don't expect [Holder] to rule it in or rule it out. In individual cases if there's allegations of mistreatment, judges can handle that and you can determine what course to take.

I think Senator LINDSEY GRAHAM has hit the nail on the head. I hope no one will use this false specter of a witch hunt as an excuse to oppose a fine nominee.

I say to my colleagues, if you have an objection to Eric Holder based on his qualifications, vote against him. But don't oppose him because the previous administration may have been guilty of wrongdoing which may lead to a prosecution. There are too many hypotheticals in that position. In fact, these misdeeds are the reasons we need Eric Holder's leadership.

Here is what President Obama has said about the need to reform the Justice Department:

> It's time that we had a Department of Justice that upholds the rule of law and American values, instead of finding ways to enable a President to subvert them. No more political parsing or legal loopholes.

I think Eric Holder is the right person to fill the vision of President Obama. After 8 years of a Justice Department that too many times put politics before principle, we now have a chance to confirm a nominee with strong bipartisan support who can restore the Department to its rightful role as guardian of our fundamental rights.

I urge my colleagues to support Eric Holder's nomination.

AMENDMENT NO. 39

Mr. DURBIN. Mr. President, I ask unanimous consent that the pending Baucus amendment No. 39 be agreed to, the motion to reconsider be laid upon the table, and the bill, as thus amended, be considered as original text for the purpose of further amendment.

The PRESIDING OFFICER. Without objection, it is so ordered.

Mr. DURBIN. Mr. President, I ask unanimous consent that when the Senate resumes consideration of H.R. 2 on Wednesday, the time until 11 a.m. be for debate with respect to McConnell, et al., amendment No. 40, with the time equally divided and controlled between the majority and Republican leaders or their designees; that no amendments be in order to the amendment prior to a vote in relation to the amendment; that at 11 a.m. the Senate proceed to vote in relation to the McConnell amendment, No. 40; provided further, if the McConnell amendment is agreed to, the bill, as thus amended, be considered as original text for the purpose of further amendments.

The PRESIDING OFFICER. Without objection, it is so ordered.

MORNING BUSINESS

Mr. DURBIN. I ask unanimous consent the Senate proceed to a period of morning business, with Senators permitted to speak for up to 10 minutes each.

The PRESIDING OFFICER. Without objection, it is so ordered.

FURTHER CHANGES TO S. CON. RES. 70

Mr. CONRAD. Mr. President, section 227 of S. Con. Res. 70, the 2009 Budget resolution, permits the chairman of the Senate Budget Committee to revise the allocations, aggregates, and other appropriate levels in the resolution for

legislation making improvements in health care, including, under subsection (a), legislation that reauthorizes the State Children's Health Insurance Program, SCHIP. The revisions are contingent on certain conditions being met, including that such legislation not worsen the deficit over the period of the total of fiscal years 2008 through 2013 or the period of the total of fiscal years 2008 through 2018. In addition, section 227 limits the amount of the adjustment in outlays to no more than $50 billion over the period of the total of fiscal years 2008 through 2013.

I find that Senate amendment No. 39, an amendment in the nature of a substitute to H.R. 2, the Children's Health Insurance Program Reauthorization Act of 2009, satisfies the conditions of the reserve fund to improve America's health. Therefore, pursuant to section 227, I am adjusting the aggregates in the 2009 budget resolution, as well as the allocation provided to the Senate Finance Committee.

I ask unanimous consent that the following revisions to S. Con. Res. 70 be printed in the RECORD.

There being no objection, the material was ordered to be printed in the RECORD, as follows:

CONCURRENT RESOLUTION ON THE BUDGET FOR FISCAL YEAR 2009—S. CON. RES. 70; FURTHER REVISIONS TO THE CONFERENCE AGREEMENT PURSUANT TO SECTION 227 DEFICIT-NEUTRAL RESERVE FUND TO IMPROVE AMERICA'S HEALTH

[In billions of dollars]

Section 101	
(1)(A) Federal Revenues:	
FY 2008	1,875.401
FY 2009	2,033.468
FY 2010	2,212.116
FY 2011	2,420.408
FY 2012	2,513.164
FY 2013	2,633.975
(1)(B) Change in Federal Revenues:	
FY 2008	−3.999
FY 2009	−63.931
FY 2010	28.718
FY 2011	−7.662
FY 2012	−144.431
FY 2013	−116.244
(2) New Budget Authority:	
FY 2008	2,564.237
FY 2009	2,548.889
FY 2010	2,574.071
FY 2011	2,701.088
FY 2012	2,744.638
FY 2013	2,871.918
(3) Budget Outlays:	
FY 2008	2,466.678
FY 2009	2,575.667
FY 2010	2,630.249
FY 2011	2,718.860
FY 2012	2,728.215
FY 2013	2,861.791

CONCURRENT RESOLUTION ON THE BUDGET FOR FISCAL YEAR 2009—S. CON. RES. 70; FURTHER REVISIONS TO THE CONFERENCE AGREEMENT PURSUANT TO SECTION 227 DEFICIT-NEUTRAL RESERVE FUND TO IMPROVE AMERICA'S HEALTH

[In millions of dollars]

Current Allocation to Senate Finance Committee	
FY 2008 Budget Authority	1,102,801
FY 2008 Outlays	1,104,781
FY 2009 Budget Authority	1,092,354
FY 2009 Outlays	1,093,724
FY 2009–2013 Budget Authority	6,161,994
FY 2009–2013 Outlays	6,170,488
Adjustments	
FY 2008 Budget Authority	0
FY 2008 Outlays	0
FY 2009 Budget Authority	10,621
FY 2009 Outlays	2,387
FY 2009–2013 Budget Authority	50,062
FY 2009–2013 Outlays	32,819
Revised Allocation to Senate Finance Committee	
FY 2008 Budget Authority	1,102,801
FY 2008 Outlays	1,104,781
FY 2009 Budget Authority	1,102,975
FY 2009 Outlays	1,096,111
FY 2009–2013 Budget Authority	6,212,056
FY 2009–2013 Outlays	6,203,307

GEITHNER NOMINATION

Mr. KOHL. Mr. President, yesterday the Senate confirmed Timothy Geithner as the Secretary of Treasury with my support. Mr. Geithner has the experience and the knowledge to lead the country through these economic hard times.

The Treasury Department is facing an uphill battle to provide appropriate monetary policy and regulations to get our economy back on track. Congress has been working with Federal Reserve and the Treasury Department to find ways to jump-start our economy. Congress recently approved the release of the second half of the TARP funds and is working with the new administration to create an effective economic stimulus package. I am pleased that President Obama and Mr. Geithner have committed themselves to restructuring the TARP but stress the importance of reforms which increase accountability, transparency, and help homeowners. Furthermore, the Treasury Secretary must implement meaningful and effective policies to avoid another system-wide failure and promote long-term economic stability. Mr. Geithner's career in the Treasury Department and the Federal Reserve Bank of New York has made him well qualified for the difficult task at hand.

Mr. SPECTER. Mr. President, I have sought recognition to discuss my vote against the nomination of Mr. Timothy F. Geithner to be Secretary of the Treasury.

I was originally inclined to support the nomination to enable President Obama to get his team together and begin addressing the economic crisis. As I have said publicly, I want to be supportive of President Obama and I understand the importance of assembling his full economic team to address the critical problems facing our Nation's economy. After considerable thought, I have decided I cannot support this nomination. I have since taken a close look at the circumstances of Mr. Geithner's failure to pay Social Security and Medicare payroll taxes from 2001 to 2004 while an employee at the International Monetary Fund—IMF. Then, I spoke to Finance Committee ranking member CHUCK GRASSLEY who provided some additional insight. Based on those factors, I decided to vote against Mr. Geithner.

International organizations such as the IMF are exempt from the employer contribution of payroll taxes, so U.S. citizens who work there are required to pay their portion as if they are self-employed. During an IRS audit conducted in 2006, it was discovered that Mr. Geithner failed to pay these taxes and he then paid what was owed for tax years 2003 and 2004. Despite having made the same error in previous years, he did not pay for 2001 and 2002 because the statute of limitations had expired. Only after the non-payment was discovered during the vetting process by the Obama transition team in late-2008 did Mr. Geithner finally pay for tax years 2001 and 2002.

Mr. Geithner was paid an extra sum, or tax allowance, by the IMF with the expectation that he would use it to pay the IRS for his payroll tax liabilities. According to remarks by Senator GRASSLEY at Mr. Geithner's confirmation hearing, ''Furthermore, the nominee received a tax allowance from the IMF to pay the difference between the 'self-employed' and 'employed' obligations of his Social Security tax.'' At his confirmation hearing, Mr. Geithner acknowledged receiving various documents detailing his obligations as an American employee at the IMF. The IMF provides its employees with a tax manual at the time they are hired that includes information describing how to pay self-employment taxes. Page 2 of the document states, ''U.S. citizens who are staff members are required to pay U.S. tax are entitled to receive tax allowances.'' Page 12 of the document states, ''Employees of international organizations are considered self-employed for purposes of social security taxes. As such, they must pay both the employer's and the employee's share of social security taxes. The Fund gives you a tax allowance for the employer's share of social security taxes only. You are responsible for the employee's portion of this tax.'' Mr. Geithner signed a document each year in order to receive this extra tax allowance. At the end of the tax allowance form are the words, ''I hereby certify that all the information contained herein is true to the best of my knowledge and belief and that I will pay the taxes for which I have received tax allowance payments

from the Fund.'' Also, the IMF provides its employees with detailed statements of their liabilities.

These errors set a bad example for other taxpayers when the Government seeks to collect back taxes. We can be assured that the precedent set by Mr. Geithner's neglect will be cited repeatedly by future offenders. Mr. Geithner's conduct would be problemsome on the confirmation of any high-level officers, but especially so for Secretary of the Treasury. The Secretary has within his jurisdiction the Internal Revenue Service which is responsible for collecting taxes. With the full Senate confirming Mr. Geithner, it is a virtual certainty that other taxpayers will cite his situation as a reason or excuse for their not having paid taxes. If the issue of failure to pay taxes goes to court in either civil or criminal proceedings, it will be an obvious defense or argument by defense counsel in mitigation or defense.

President Obama has placed ethics reform as a top priority for his administration. In his inaugural address, he said, ''Those of us who manage the public's dollars will be held to account, to spend wisely, reform bad habits, and do our business in the light of day, because only then can we restore the vital trust between a people and their government.'' That is the appropriate tone to set an example, especially for young people, where in the past election there has been a resurgence of interest in voting and government. We ought to do everything we can to maintain that interest and momentum.

ECONOMIC STIMULUS

Mr. SPECTER. Mr. President, I also wish to discuss the precarious state of our United States economy, which is facing one of the most dire economic crises in history. As a member of the Senate Appropriations Committee, I understand that it is imperative that the Federal Government use all means at its disposal to address these problems.

It is critical as we move forward that the Appropriations Committee and the Senate focus on spending our Nation's dollars on worthwhile projects, which both benefit the American people on their merits and will also lead to an increase in jobs.

To this end, I wish to highlight a few projects in my home State of Pennsylvania which appear to have significant potential to stimulate economic investment, as well as return our unemployed workers to the workforce.

The fastest way to put people to work on transportation infrastructure projects is to finance highway repairs. These repairs support construction jobs that can start immediately. Additionally, infrastructure repairs ensure an acceptable level of safety and reliability on existing highway networks, which is critical in a State like Pennsylvania that has 6,000 structurally-deficient bridges.

According to the Pennsylvania Department of Transportation, Pennsylvania could obligate $1.5 billion on 313 shovel-ready highway repair projects. These projects all focus on Pennsylvania's bridge deficiencies, pavement needs and safety concerns, as well as create jobs and achieve meaningful infrastructure improvements. Additionally, all of the highway infrastructure repairs can be put out to bid within 6 months, with construction starting shortly thereafter.

The Pennsylvania Department of Transportation has also provided me with a list of 147 public transportation projects totaling $700 million that, according to transit agencies around the State, are ready to begin. The projects include replacing catenary pole involved in electrified train service, station improvements, alternative fuel bus purchases and intermodal centers.

The Port of Pittsburgh Commission in Pennsylvania has identified over $580 million in shovel-ready project work that could be started in 6 months, of which $430 million could be completed in 2 years and the remaining $150 million could be completed in 3 years.

The largest share of that money would be applied to the Lower Monongahela Improvement Project for Locks and Dams 2–3–4, a project 5 years behind the original completion date of 2004. Without investment from the economic stimulus, the project will not otherwise be completed until the 2019–2022 period. Stimulus funding could result in a working, reliable chamber, a major improvement over the current schedule. Funding can also be provided for emergency repairs to Emsworth Dam.

These projects would add or preserve tens of thousands of high-skilled, high-paying jobs for the southwest Pennsylvania region, including permanent employees at facilities that depend on river transportation, such as U.S. Steel's Clairton Coke Works, ArcelorMital's Coke Works, Eastman Materials, Welland Chemical, Kinder Morgan, Ashland Petroleum, Consol Energy and the Elrama Power Plant.

Previous delays have resulted in increasing costs, interruptions to service and benefits foregone. The U.S. Army Corps of Engineers calculates that the region has already lost over $1.2 billion in benefits that can never be recuperated.

Health care is one of the largest drivers of our economy and a worthwhile investment in the physical and economic health of the country.

In 2002, the Northeastern Pennsylvania Medical Education Development Consortium was formed to explore the feasibility of locating a new medical college in northeastern Pennsylvania. A 2006 feasibility study made the need for a medical school clear. This region of Pennsylvania has shortages of physicians in many specialties and over one-third of the practicing physicians are expected to retire in the next decade.

To address this critical need, the Commonwealth Medical College is scheduled to open in 2009 and has already received investments of $35 million from the Pennsylvania Redevelopment Assistance Capital Program and $25 million from Blue Cross of Northeastern Pennsylvania, as well as State, Federal, and private philanthropic sources.

Additional funding will be used to support construction of the college, which will attract medical and biomedical research to northeastern Pennsylvania, improving the local and regional economy, as well as the health of the population. Over the next 20 years, the Commonwealth Medical College is expected to greatly increase the number of physicians in the area, add $70 million to the local economy and create 1,000 jobs.

This project also has national implications, as the research conducted there will focus on healthcare conditions affecting the aging population, including research on cardiovascular disease and diabetes.

There are numerous higher education projects throughout the Commonwealth of Pennsylvania which exemplify the types of activities that this country should target as it searches for an effective means to stimulate the economy. These meritorious projects provide necessary infrastructure improvements to many colleges and universities in my home State, while at the same time creating a myriad of new jobs and stimulating the economy. It is my understanding that all of these projects are ready for construction within 6 months or sooner.

Specifically, the Pennsylvania State System of Higher Education, which represents 14 public universities in my home State, provided me with a list of 47 projects totaling $445 million. These programs focus on new building construction, renovations to existing buildings and energy conservation measures. The Pennsylvania Commission for Community Colleges, which represents the 14 community colleges throughout Pennsylvania, also provided me with a list of 34 projects totaling $128 million. Selected projects include building renovation and construction, public safety programs, infrastructure repairs and upgrades, and new resources for education and training.

In regard to the private colleges and universities in Pennsylvania, the Association of Independent Colleges and Universities of Pennsylvania, which represents 86 private institutions, provided me with a list of 42 projects totaling $385 million. Many of these projects focus on the construction of new academic buildings, the renovation and expansion of training facilities and improvements to existing infrastructure.

In many cities and small towns in Pennsylvania aging sewer pipes and treatment plants are malfunctioning, leading to sewage contamination of local freshwater. In many areas across Pennsylvania, and the country, water

infrastructure is 50, 60 years old or much older.

Throughout Pennsylvania the need for funding is great, because without it many of my constituents, a significant number of whom are retired and on a fixed income, are facing sewer rate increases of up to 100 percent. An investment in water infrastructure is a wise one, as it will lead to construction jobs in areas where jobs are often hard to come by, while relieving a significant financial burden on residents.

In western Pennsylvania, the Allegheny County Sanitary Authority, which services communities in and around Pittsburgh, is assisting municipalities in that region seeking to meet clean water compliance standards. Currently, the Pittsburgh region is facing its largest and most costly public works project thus far, the rehabilitation and long-term maintenance of 4,000 miles of sewers that serve nearly one million residents in the area. Additionally, in central Pennsylvania, the Borough of Philipsburg's outdated storm and wastewater collection system overflows during periods of heavy rain. The cost of modernizing this sewer system is significant, but it is necessary.

While these are just two examples of water and sewer projects in Pennsylvania, an investment in wastewater infrastructure would create construction jobs, and ease the financial burden on the residents in many economically disadvantaged regions of Pennsylvania.

The Environmental Protection Agency's Brownfields Remediation Grant Program provides funding for private developers to take real property business sites with environmental concerns and clean them up in order to redevelop. Redeveloping this land creates space for new businesses—with new jobs—to expand in areas that might not otherwise be available. Pennsylvania alone has an estimated 150,000 acres of brownfields with great potential for re-use.

Brownfields cleanups create jobs not only through the workers needed to do the cleanups themselves, but subsequently with the new businesses that occupy the property. I recently met with a developer in Pennsylvania who is prepared to immediately undertake cleanup projects totaling $283 million in my home State. Combined, his projects could create an estimated 322,225 new jobs in Pennsylvania.

For every $1 invested into brownfields cleanups, an estimated $15–20 are immediately returned to the economy in the form of job creation and State and Federal tax revenue. Jobs created by brownfields cleanups—both before and after—are taken by locally available workers, stimulating local economies. This is exactly the result we should be requiring from every program in the stimulus package.

These projects include cleanups in Bensalem, King of Prussia, Lehman Township, Bridgeport, Frazer, Norristown, Malvern, Limerick, Conshohocken, West Norriton, and Bala Cynwyd, Pennsylvania. These are all areas in Pennsylvania that could certainly use targeted economic development. I understand that there is a question over how fast this money can be spent, and I agree that money from the stimulus be put to use as soon as possible after passage of the bill. However, the developers with whom I have spoken have all assured me that brownfields funding can be used within the 120 day benchmark to determine shovel-ready projects. Programs, such as this one, should be the focus of the stimulus.

I recently met with a group of Pennsylvania State Senators and Representatives who expressed their concern over cleanup efforts in the Chesapeake Bay Watershed, a large watershed which covers much of Pennsylvania, Maryland, and Virginia. Cleanup efforts from agricultural runoff and other environmental impacts can be expensive. The Watershed Rehabilitation Program can mediate some of the enormous costs to individual landowners—often small business farmers—who are tasked with the cleanup of their own property.

These cleanup efforts will require labor—stimulating the workforce while simultaneously making our environment a cleaner place for our children and grandchildren.

Military construction projects funded through the stimulus must be identified as priorities by military leadership and be at or near design completion so that construction can be started in short order. These projects must help modernize our military support structure and defense capabilities. The following projects are both shovel-ready and of vital importance to the State, the military and the Nation.

The End Item Shipping and Receiving Facility at Letterkenny Army Depot is a perfect example of a shovel ready project that will create construction work for Pennsylvanians and will enhance Letterkenny's capability to support the movement of military equipment. The identified site is on Federal land, close to utilities, next to rail and ground transportation and in the depot industrial area. Design is complete and Congress authorized $7.5 million for the facility in the John Warner National Defense Authorization Act for 2007—P.L. 109–365. Regrettably, this valuable project failed to move forward and additional funding is needed to complete the project at this time.

Another vital military construction project is the Hermitage Readiness Center, in Hermitage, PA. When complete, the facility will support 128 Pennsylvania Army National Guard members who are currently housed in substandard and undersized buildings. This project is a high priority for the Pennsylvania Adjutant General, as land has been acquired and the design is 99 percent complete. I am told that construction could be started within 3 months, creating construction jobs almost immediately.

A third military construction project is the Combined Surface Maintenance Shop at the Fort Indiantown Gap Vehicle Paint Prep Facility in Annville, PA. This facility will reduce hazardous waste associated with paint operations, create safer working conditions, increase productivity and reduce costs. I understand that land and environmental reviews are complete and the design is 75-percent complete, allowing for construction within 3 or 4 months, were funds to be made available.

Vital funding in the economic stimulus bill will allow us to improve the care we provide to our veterans. According to the Pennsylvania Department of Military and Veterans Affairs, necessary improvements to the Southeastern Veterans' Center in Spring City, PA, could commence with $17 million in Federal funding. A new long term health care facility would replace the ten substandard modular units currently on the premises of the Southeastern Veterans' Center. This proposed project will include the construction, furnishing and equipping of a multi-story facility with the capacity to provide skilled nursing care and dementia care for 120 residents. Further, this project will provide appropriate housing for the veterans and will enable the Southeastern Veterans' Center to entirely vacate the substandard modular units, while reducing costly maintenance.

In addition to major construction projects, I understand that Pennsylvania has nearly $119 million in non-recurring maintenance and minor construction projects that are needed and could be completed in Fiscal Year 2009 were funds made available at this time. The importance of these smaller projects should not be ignored, as many of them hold the potential to impact positively the lives of our veterans in short order.

Providing funds in the economic stimulus package for construction and maintenance projects at national parks could have a stimulating affect on the economy and put people to work. Among the projects in Pennsylvania that could benefit from economic stimulus funding is the Flight 93 National Memorial, which will honor the 40 passengers and crewmembers of United Airlines Flight 93 who gave their lives to save countless others on September 11, 2001. I have worked with members of the Pennsylvania delegation to secure funding for this most important project in the annual appropriations bills. However, it is my understanding that an additional $6.2 million is required for the first phase of construction to commence.

Additionally, according to the Congressional Research Service, recent estimates suggest that the National Park Service has a deferred maintenance backlog of almost $10 billion. Deferred maintenance projects often include important construction work on buildings, trails, recreation sites and other

infrastructure within the parks. For example, according to Gettysburg National Military Park officials, the current maintenance backlog at the park would cost $55 million to complete. In addition, there are deferred maintenance projects at Valley Forge National Historical Park, Independence National Historical Park and the Delaware Water Gap National Recreation Area Park, among others.

Funding these projects will not only put people to work, but will go a long way to support the ongoing efforts to preserve, protect and enhance our country's most precious and historically significant national treasures.

In conclusion, while I would like to hear further from the administration and other economic experts to give us guidance on addressing the current economic crisis, the projects which I have outlined in Pennsylvania are the kind of expenditures that will provide the most realistic opportunity to stimulate the economy.

TRIBUTE TO SENATORS

KEN SALAZAR

Mr. HATCH. Mr. President, I stand before the Senate today to voice my great respect and hope in the Senator from Colorado, the Honorable Ken Salazar, who has recently left this Chamber in order to serve as Secretary of the Interior under the Obama administration. It is with sorrow that I say goodbye to my good friend who has served with honor and dedication since 2005. Although Ken only served for a few years in the Senate, he has left his mark on us all and will be remembered for his dedication and service not only to his country but to Utah's neighbor the great State of Colorado.

Ken Salazar's personal history is a testament to his character and accomplishments. His family first settled in America just over 400 years ago, 12 generations back. Ken's parents knew the value of teaching their eight children about hard work and dedication, and from them he learned the worth of industry on his family's ranch growing up. Those early years on the ranch taught Ken about the importance of hard work, integrity, and dedication. It is also from these early experiences that Ken grew to love the beauty of the natural resources our Nation has to offer.

I am confident that the years of experience Mr. Salazar has worked on environmental policy in the West will serve him well in his new position as Secretary of the Interior. He has a deep-rooted passion for clean, renewable, and affordable energy as well as protecting our country's precious natural resources. I believe he will take quite naturally to his new role as our Nation's top public lands manager, and we will be well served by his sensitivity to those natural treasures we value the most.

In short, Ken Salazar has the experience and the passion required for the role he has taken on as Secretary. I thank him for his excellent service in the Senate and look forward to seeing good things from him in the coming years.

AFRICA

Mr. FEINGOLD. Mr. President, in recent years more and more observers have noted Africa's failing states, ungoverned spaces and pirate-infested waters, and the threat they pose to our own national security. I have long raised these concerns on this Senate floor and I am pleased that they are receiving increasing attention. However, it is not enough to simply acknowledge Africa's security challenges; nor is it sufficient to shift resources toward them, although that is a good start. We must institute long-term strategies to further our national security goals while developing sustainable partnerships with Africans that advance our mutual interests and support nascent democratic institutions.

As a 16-year member and the current chairman of the Subcommittee on African Affairs, I have closely followed U.S. policy toward the continent for many years. Too often, I have found that our approach has been driven by short-sighted tactics designed to buy influence or react to crises. In the absence of comprehensive interagency strategies, these tactics often undermine long-term efforts to build civilian institutions and strengthen the rule of law. This must change if we are to successfully pursue our strategic objectives on the African continent. It remains critical—and long overdue—that the United States develop a carefully planned and long-term approach to both promoting stability and combating terrorism in Africa. I would like to offer some thoughts today on key components of such an approach.

During our December recess, I traveled to the headquarters of the new Africa Command in Stuttgart, Germany and discussed a range of issues with senior officials there. Although I have been focused on AFRICOM since its inception—and on the idea of such a command prior to that—I was reminded during my trip of the very important and strategic roles that AFRICOM, if advanced properly, can play. These roles include helping to develop effective, well-disciplined militaries that adhere to civilian rule, strengthening regional peacekeeping missions, and supporting postconflict demobilization and disarmament processes. If carried out properly, AFRICOM's work can complement that of the State Department, USAID, and other U.S. Government agencies working on the continent and help contribute to lasting peace and stability across Africa.

It is because of the significant need for this important work that we must support AFRICOM, while also working to ensure that it adheres to its defined military mandate and defers to the State Department as the lead on policy matters. The challenge for AFRICOM is to strike the right balance with our civilian agencies and not become our primary representation throughout Africa. Serious work remains to be done in ensuring that the Command is operating within comprehensive interagency national security strategies and squarely under the authority of our Chiefs of Mission. I also remain concerned that AFRICOM has been unable to adequately convey its role within a larger policy framework to Congress, to the American people or to African governments and regional organizations—perhaps its most important partners.

It is true that the Command's initial rollout was fraught with mistakes and the Command understandably received a cool reception on the continent, among civilian agencies and here in Congress. But I am confident from my recent meetings that the staff in Stuttgart has recognized and is learning from these setbacks. Rather than merely criticizing, we in Congress should work across the spectrum of agencies here in Washington as well as with AFRICOM's leadership to help craft a combatant command that is doing the right job, for the right reasons and can thus be adequately resourced. In the months ahead, I intend to use my role as chairman of the Subcommittee on African Affairs to do just that.

I hope, however, that no one thinks for a minute that military tools alone are sufficient to transform the underlying causes of violence and instability in Africa. To promote long-term stability, it is crucial that we strike a better balance between our military relationships and our support for civilian institutions and the rule of law.

Achieving that balance is no small task and it will only be possible if we invest seriously in new institutional capacities for our civilian agencies on the continent. This begins with ensuring our embassies have the Foreign Service officers and resources they need to do the job properly. We cannot continue to shortchange our embassies across Africa while we focus on one or two other locations around the world. We need to make sure our embassies have sufficient resources to meet the challenges of today, and to identify the challenges of tomorrow. And we need to make sure our presence includes the right kind of people—trained political and economic officers who can get out and about to do their job.

By expanding our diplomatic presence in Africa, including outside the capitals, we increase our ability to learn about the continent—its governments, its people and its cultures. Right now, we do not have the necessary human resources or expertise on the African continent to gather this information and anticipate emerging crises or fully understand existing ones. Diplomatic reporting and open source collection in Africa are a critical complement to the clandestine work of the

intelligence community, and I have long called for more resources for both. I have also called for an integrated, interagency collection and analysis strategy, which is why Senator Hagel and I last year introduced legislation to establish an independent commission to address this long-term, systematic problem. This legislation was passed by the Intelligence Committee last year and, although Senator Hagel has retired, I intend to reintroduce this legislation this year.

Developing these capacities and a balanced approach is in our national security interest and is necessary if we are to better address areas of concern in Africa. At present, there are several devastating crises that we cannot ignore, including in Congo, Nigeria, the Sahel, Sudan and Zimbabwe. But I believe one region stands out for its particular significance to our national security, and that is the Horn of Africa and specifically the deepening crisis in Somalia. I would like to spend the rest of my remarks discussing the situation in this region, where the need for a carefully planned and long-term approach is particularly urgent.

During my December trip, I also visited Djibouti. There, I met with many leading figures in Somalia, including the Prime Minister of the Somali Transitional Federal Government, the leadership of the opposition Alliance for the Re-Liberation of Somalia, the UN Special Representative for Somalia, the President of Somaliland and members of Somalia's civil society. I also met with Djiboutian government officials and members of civil society, as well as with our diplomats working on Somalia out of both Djibouti and Nairobi, who are extraordinary and deeply committed individuals.

Tragically, the situation in Somalia continues to get worse. Six months ago I stood on the Senate floor to discuss Somalia's humanitarian crisis—the worst in the world. According to a local human rights group, an estimated 16,000 people have been killed since the start of 2007, with over 28,000 people wounded and more than one million displaced. USAID now estimates that 3.2 million people—soon to be half of the population—are in need of emergency assistance, including hundreds of thousands of refugees in neighboring countries. The stories and images of human suffering coming out of Somalia are horrifying.

In addition to the humanitarian impact, I am deeply concerned by the potential impact of this crisis on our national security. With the Ethiopian army withdrawing, the transitional government remains deadlocked, new militias are forming, and existing ones continue to gain new territory. And while the Somalis are a moderate people, the terrorist group al Shabab has grown in ranks and expanded its reach. Moreover, just last month, several senior officials, including CIA Director Hayden and Joint Chiefs Chairman Mullen, said that al-Qaida is extending its reach in Somalia to revitalize its operations.

The Bush administration's approach to Somalia—endorsing the Ethiopian invasion, backing an unpopular transitional government and launching periodic military strikes in the absence of a broader coherent strategy—was an abject failure. Without a carefully crafted strategy for Somalia, we have long relied on short-sighted tactics and a ''manhunt'' approach, rather than investing fully in efforts to promote a sustainable peace and help build legitimate and inclusive institutions. The result has been increased anti-Americanism, which helps enable extremist groups to effectively recruit and operate.

With the Obama administration now in office, there is a critical opportunity, as well as an urgent need, to identify the lessons of this failed policy and signal a break from the past. One of my top priorities is to work with the Obama administration to develop a new comprehensive interagency strategy to bring stability to Somalia and the wider Horn of Africa. Support for the Djibouti process should continue, but we need to be far sighted about what it will take to translate diplomatic initiatives into security for the people of Somalia. That effort must include efforts from the ground up to build legitimate and inclusive governance institutions that respond to the needs of ordinary Somalis. For only when those institutions take hold will we finally be able to limit the appeal of violent extremism and achieve sustainable peace and security—and bolster our own national security.

IDAHOANS SPEAK OUT ON HIGH ENERGY PRICES

Mr. CRAPO. Mr. President, in mid-June, I asked Idahoans to share with me how high energy prices are affecting their lives, and they responded by the hundreds. The stories, numbering well over 1,200, are heartbreaking and touching. While energy prices have dropped in recent weeks, the concerns expressed remain very relevant. To respect the efforts of those who took the opportunity to share their thoughts, I am submitting every e-mail sent to me through an address set up specifically for this purpose to the CONGRESSIONAL RECORD. This is not an issue that will be easily resolved, but it is one that deserves immediate and serious attention, and Idahoans deserve to be heard. Their stories not only detail their struggles to meet everyday expenses, but also have suggestions and recommendations as to what Congress can do now to tackle this problem and find solutions that last beyond today. I ask unanimous consent to have today's letters printed in the RECORD.

There being no objection, the material was ordered to be printed in the RECORD, as follows:

You are asking Idahoans to write about gas prices? You mean you do not know? I think Washington D.C. may as well be registered as another planet because I think your colleagues are so far from reality of the rest of the people it is absolutely outrageous.

Your colleague Barbara Boxer of California said that she wants Americans to use alternative routes of transportation and that it is a good thing that gas prices force people to take the bus, ride bikes, or walk to their destination because it helps reduce global warming.

I have something to say to you and to Boxer and you can tell her for me.

I am a driver for a living. I deliver products right here in Boise. I have to drive I have no choice. I am also a salesman, and a night supervisor. To Senator Boxer, I live in Idaho. I do not have the option of riding the bus. I cannot walk my deliveries or ride my bike with my products? Is she insane?

I find it absolutely insulting for her to talk down to me like that. She and her liberal Senators love these high gas prices because they want to use it as an excuse to make us live how they want us to live to fight so-called global warming, while she and Al Gore fly in jets. That's Eco-Socialism in my opinion.

Senator Crapo, I have three jobs. Three jobs. And I am still having problems fueling up. I have had to open credit card accounts for the first time in my life. And my debt is still going up.

You'd think with three jobs and three paychecks for one person. I am not married no kids. I would be starving with fuel prices if I had a family. I am just barely paying my bills on time as they are, to about $1500 a month not including gas prices.

Starting in 2005 till 2007, I did very well financially, I was saving up and putting money away in my savings account. I loved myself for putting money away. This month in June I had to take one-quarter of my life savings out of my bank to pay for bills including gas because the price skyrocketed from $3 to $4 a gallon in one month.

This is outrageous. I am so angry at Congress right now. . . You have no idea.

I think it is 80 percent the Government's fault for this and 20 percent the oil companies. The only thing the oil companies are doing wrong is speculating the price of oil for really dumb reasons. Like if you so much as sneeze the price would go up in panic.

Congress has done this because you refuse to drill for oil in ANWR to save a deer called caribou! Congress is more worried about a stupid deer than they are about my life? More worried about the mating season of the caribou than they are about the economy? My jobs? My gas prices? My bills? My lifestyle? I am sorry I thought you were the people's Congress? Not the caribou's congress! Do we have an animal congress I should know about?

You won't allow drilling off shore? Well did you know that China is drilling for oil off the coast of Florida? But we cannot? Why? This is outrageous.

Do not listen to those radical environmentalists. They were wrong about the second ice age in the 70s. When I was kid in school in the 1980's, my teachers told me by the year 1999 New York would be underwater and Los Angeles would be a bunch of Islands. It has not happened. Of course the earth's temperature changes and jumps over time. The earth's climate changes all the time, has been since the earth cooled and formed. The earth's temperature does not stay the same all the time. There are so many scientists and people who disagree with Al Gore, but if we disagree we are labeled ''flat-earthers'' and ''Holocaust Deniers.'' How dare Al Gore tell me that I have no first amendment right to disagree with him on climate change.

My question for the Republican Party is this. Why did you not approve drilling for oil

when you had Congress lock, stock, and barrel? In 2002, I cheered when the GOP took back the Senate and we had both Houses plus the White House. I yelled, ''Yes! At last we can get some real work done!'' But what have you done with those four years of three Branches with GOP? Nothing! You took your voters for granted and then you were surprised when you lost in 2006.

I have spoken to many Republicans, Moderates, Independents, Moderate Democrats, and Conservatives who are seriously thinking of either staying home or voting Democrat based on the GOP's laziness. Although I do not trust Democrats with the economy, why should we the voters reward Republicans? Give us a reason? Answer . . . gas prices! Point out that it is the Dems who want the price high! Even Barack Obama admitted that he wanted it to go high just not so fast.

Senator Crapo. You want to help me? A person with three jobs and struggling with gas prices? I have not had a vacation since March of 2007! I can't even take a one day vacation to Jackpot anymore! Senator Crapo I work all seven days a week! I get no weekends! And I still struggle to pay gas prices! About $15 a day! Not a week! A day!

Drill here! Drill now! Drill in ANWR! Drill in America!

Tell your friends drill.

AARON BANKS, *Boise.*

Hi. Thank you Senator for your sincere concern for Idaho Residents.

I am 58 next month, and on disability from a very severe fire I was trapped in several years ago.

Though I do get an income, this is where it goes:

Receive $625.00 a month

1. $200.00 a month mobile home space rent
2. $156.00 a month mortgage payments for my mobile home . . . which without the owner of the mobile home, I would not be on my way to being a first time home owner!
3. $48.00 a month mobile home insurance
4. $40.00 a month vehicle insurance . . . it is a 1988 Plymouth Voyager van that I have had since 1988.
5. $39.00 phone bill . . . which was supposed to reduced several months ago through my social worker, an still remains at the normal price and I do not have long distance.
6. $30–40 electricity monthly . . . do not have an air conditioner for summer but do open my windows and use my ceiling fans that helps.
7. $125–and up in winter for gas to run my heater monthly . . . that is after I receive fuel assistance which for some reason only lasts 1–2 months and only use the heater to warm up the area so can start my wood stove which is usually one–half hour.

So if I am lucky, all I can afford to do is put up to $20.00 a month in gas which gives me almost 1/4 tank and that has to last the month.

I have medical problems that mean many trips to the doctor and pharmacy, and with such a low amount of gas I have to depend on others for rides when I run out of gas.

Thank you for your sincere concern and we are all hoping and praying that gas will once again come down to where people like me can afford to purchase more.

LORETTA LOWERRE, *Nampa.*

First of all, I am disappointed that you provide prefixes for all kinds of people except the only class of people (with one exception—MSgt) that have official (not courteous) titles in these United States—the military. My title is Colonel.

Second, from your letter on gas prices that you sent me, you are starting to understand that the Congress holds most of the blame for high oil (and thus gas) prices. Congress has failed to act in the thirty years since the last gas crisis, continually failing to take responsible action to make sure domestic supplies are developed and used to reduce dependence on foreign oil.

It should be clear that the single most deleterious action of Congress over the last forty years was the Environmental Protection Act. It has desperately needed revision since the early seventies and because it was not, the economic impact on America has been extreme. The inability to build domestic gas refineries, increase domestic oil production and take advantage of resources in ANWR are only a few of the unintended and disastrous impacts of that act. An environmentalist has only to write a single letter to cause the price of any such proposal to escalade exponentially. The latest case of the proposed nuclear reactor in Idaho is an example. One man writing one letter can cause the waste of hundreds of thousands of dollars to ''prove'' the lack of environmental impacts of such a proposal.

The price of a house in Idaho has risen by 10–15 percent, for instance, because of the ludicrous and technically flawed environmental studies and reactions on the spotted owl.

Still no action in Congress to alleviate the situation. We simply need someone to stand up and take the actions necessary to replace political correctness with what used to be common sense.

So the bottom line, Senator, is that Congress bears the responsibility to stop passing stupid laws and start reigning in those that are hurting the nation's ability to do the right things rather than the politically correct things. Do you have the courage to start?

ROBERT KEENAN, *Meridian.*

You asked what the high gas prices are doing to me. It has become very difficult to even do normal things. I cannot afford to go up town and buy necessary things. Since I am on Social Security Disability my sister and I have been living off my money. Since my sister does not have a car and I cannot afford to buy one for her, nor could I afford the gas. She would love to go to work. How would she get there? Idaho, and particularly this area has a really horrible public transportation system. It truly is a disgrace to our state. My sister walks as much as possible. Our nation needs to stop depending on foreign oil. I love all the animals and have tried to protect them as much as possible, but we need to start taking care of our families first.

The oil companies are making over the profit margin; that is disgusting by itself. I do not trust one thing they say or do. Therefore, we need to have alternative fuel. The wind can run electricity. The air can fuel a car, water can do both, after seeing the pictures of a car that runs on air. America, the greatest country in the world needs to step up to the plate. Oil companies need to step up to the plate before they become the dinosaurs. Therefore, we need to drill. Do it. Many families like mine are being devastated by the high gasoline prices which makes high food prices we cannot afford. Thank you for your time.

MARIAN RUHLING, *Nampa.*

Hello—This is in response to a solicitation from Senator Crapo regarding personal stories on how high energy prices are affecting lives.

Greed is the source of most of the world's evil. I know I sound like an ideologue, but please read on.

It is hard to disaggregate the effects of the high cost of energy from other economic hits our family is experiencing. When construction activity slowed in Valley and Adams County, wage earning families left our valleys looking for jobs elsewhere. So long, Tamarack?

The resulting reduced school enrollment (now compounded by the end of Craig-Wyden) in our districts led me to being one of the teachers RIF'd from the Council School District. Fortunately, I found work part-time in the McCall School District. Unfortunately, this 70 mile, round-trip commute (in my 2000 140,000+ mile Dodge AWD Caravan—needed for unpredictable roads) costs me $9.00–$12.00 a trip! I would like to buy a more fuel efficient Subaru—but I cannot afford to.)

My school-age children suffer because programs are being severely reduced—Shop and Art are gone. Some high school courses will only be offered every other year. Summer school for poor learners is truncated. Field trips? Sports? Are you kidding? Both are severely reduced. How can our small-town children go out and experience the world when there isn't even money for gas?

As consumers, our family lives so far from ''the source'' that not only gas, but also milk and other basic commodities seem to cost at least 25 percent more than they did a year ago. Last year I was able to find milk for $2.29 gallon; now milk costs close to $4.00/gallon. Healthy bread costs close to $4.00/loaf. As a family, we certainly have not received a COLA to offset these price increases.

As middle-class professionals (my husband is a forester) and as parents, the drain on our budget means belt-tightening for any of ''fun things'' like vacation trips. Additionally, we have experienced a health crisis (and have met our catastrophic limits). I now must commute to Fruitland (140 miles round trip) every 2 weeks for chemo; in the fall I will need to commute 5 days a week for radiation for 6 weeks! (My doctor cavalierly denied me two prescriptions for drugs since they are also available OTC. ''They only cost a few dollars. '' He casually shrugged off my request for RXs. Well, the two drugs cost more than $30 altogether. I do not think that the upper-middle-class and upper-class have a clue that there is an exponential difference between a few bucks (a latte) and $30—a chance to visit a museum or movie, or halfway fill up a gas tank to make it to a chemo session!)

I believe that our tax system rewards the rich on the backs of the poor and middle class. I believe that oil companies and owners of stocks are making fortunes as the little guy suffers.

I believe we should take global warning seriously and allow tax credits for the development of alternative energy. We need to take recycling very seriously. We also need to be a world economic partner on a fair playing field (Kyoto convention), quit out-sourcing to countries that do not provide the labor protections we do to our workers, and build respectful relationships among all peoples and all cultures—as a first step to world peace and understanding and a step away from the ugliness of war.

I also believe that limiting population growth and sharing the world's resource's equably is the only way we will ever establish peace on earth.

Locally, for our family, what have been the effects of high energy costs? Higher food and medical costs, loss of job, reduced school programs for my children, dwindled savings, ''making do'' with older cars and housing needs, fewer amenities, no vacation.

Glad you asked.

LYNN, *Fruitvale.*

I read your letter sent out today.

Glad to hear that at least one of our Senators in Washington gets it. I hope there are

more of you in DC that can support the policies you want to support in your letter.

We do need to start drilling again in the US and Off-Shore. We need to make sure that we take precautions to avoid damage to the environment. We cannot sacrifice one for the other. But we must start drilling again, and do so in a respective manner of Mother Nature.

And we are going to need some new refining capability. Again, do it new technology and with respect to our environment. Build it in Eastern Idaho—we have the space and we could use the jobs and economic boost. Tough to get oil here, but if they need a place for it, bring it here.

We must start the nuclear programs again. We need to build some new reactors soon. I do not know for sure, but I am betting some of our older reactors are getting long in the tooth, and if they go off the grid, then what happens? Besides we need more power and money spent to renew our grid system.

We need to take a serious look at Ethanol. I am not sure it is all it is being promoted to be. I am not sure the benefits outweigh all of the costs. With the flooding in the Midwest, I wonder what the cost of corn will be now? But it is not just food issues, but the processing issues as well.

Wind Power should be promoted as well. But a Nuclear Power Plant is much easier on the eyes than 1000 wind towers, and not as susceptible to the changes in the wind.

Coal alternatives should be looked at as well. We need to check if the benefits we can gain from technology like coal gasification are valid and have low impact. Some of the claims you hear and read about look promising. But as I am learning with Ethanol, there may be some significant costs to chase this type of technology.

But the short of it—we need to develop our energy and become more independent. The amount of jobs created would be incredible in the process. You want a better health care system and less unemployment and less government care programs—just set the energy companies loose (for a change) and see this economy rebound in a heartbeat. These energy companies can afford health care plans and benefits for their workers. Our current policies are killing us—and I really hope there are enough Senators and Representatives in DC to turn this around. We have been shooting ourselves in the foot for more than 20 years. Guess it took that long for the ''brain'' to finally realize the pain in doing so.

Good Luck.

STEPHEN KAISER, *Rigby*.

TRIBUTE TO ARDIS DUMETT

Mrs. MURRAY. Mr. President, I rise today to recognize Ardis Dumett for her 20 years of service to the U.S. Senate and the people of Washington State. Ardis has served on my staff for the last 16 years of her distinguished public career. For 4 years prior to her service in my office, she worked for the revered Senator Henry ''Scoop'' Jackson. On January 20, Ardis retired from my office. We are sad to see her go and hope that she enjoys her well-earned retirement.

Throughout her career, Ardis has been a thoughtful and dedicated public servant. Initially, as my constituent services director, she led by example in her commitment and compassion to the constituents of Washington State. Covering immigration and environmental casework, she ensured the people of my State were well served by their Federal Government.

As the director of special projects in my Seattle office, she worked on numerous issues on my behalf over the years, ranging from the environment and emergency response to tribes and the transfer of military property. She worked tirelessly to guarantee that our State's people and communities received a fair process—and often a successful outcome—when working with Federal agencies. Over the years I have received many notes from constituents thanking me for Ardis' diligent work.

I would like to thank Ardis for her years of service to me and the people of Washington State. Her career is a tremendous example of public service; and her dedication to her work is truly appreciated. I wish her all the best in her future endeavors.

ADDITIONAL STATEMENTS

UNI-CAPITOL WASHINGTON INTERNSHIP PROGRAMME 2009

• Mr. CRAPO. Mr. President, I am proud to be involved for a third year in the Uni-Capitol Washington Internship Programme, UCWIP, an exchange program in which outstanding college students from Australia's top universities compete to serve as interns for the U.S. Congress. The program is in its 10th year of bringing the Washington experience to our friends from Australia, firsthand. In addition to working in congressional offices, the program provides students with a number of other opportunities and activities including visits to historic sites, visits to government agencies, meetings with government leaders, and educational events.

This year, Nicholas Tam, a student from Melbourne University in Australia, is taking a 2-month hiatus from his law degree to help me serve Idaho constituents. Of the program, Nick says, ''Working with Senator CRAPO has been a gateway to developing a nuanced, sophisticated understanding of the United States and its precise position and role in the world. UCWIP has been culturally enriching and enhancing of my own professional development. It has been a real privilege to aid in the advancement of strong conservative principles whilst working here in the United States Senate.'' Nick is a terrific temporary addition to my staff and, like past interns, an intelligent individual, hard worker and personable.

Director Eric Federing and his wife Daphne have shown a decade of tireless commitment to enlarging the educational experience of Australian students. Now with 81 program alumni, this educational and highly successful exchange program has earned a rightful place among leading international academic exchange opportunities. I am honored to continue to participate in this well-crafted and successful program.•

MESSAGE FROM THE PRESIDENT

A message from the President of the United States was communicated to the Senate by Mrs. Neiman, one of his secretaries.

EXECUTIVE MESSAGE REFERRED

As in executive session the Presiding Officer laid before the Senate a message from the President of the United States submitting a nomination which was referred to the Committee on Foreign Relations.

(The nomination received today is printed at the end of the Senate proceedings.)

MESSAGE FROM THE HOUSE

At 4:52 p.m., a message from the House of Representatives, delivered by Mrs. Cole, one of its reading clerks, announced that the House has passed the following bill, without amendment:

S. 181. An act to amend title VII of the Civil Rights Act of 1964 and the Age Discrimination in Employment Act of 1967, and to modify the operation of the Americans with Disabilities Act of 1990 and the Rehabilitation Act of 1973, to clarify that a discriminatory compensation decision or other practice that is unlawful under such Acts occurs each time compensation is paid pursuant to the discriminatory compensation decision or other practice, and for other purposes.

The message also announced that the House has agreed to the following concurrent resolution, in which it requests the concurrence of the Senate:

H. Con. Res. 26. Concurrent resolution providing for an adjournment of the House.

EXECUTIVE AND OTHER COMMUNICATIONS

The following communications were laid before the Senate, together with accompanying papers, reports, and documents, and were referred as indicated:

EC–547. A communication from the General Counsel, Federal Housing Finance Agency, transmitting, pursuant to law, the report of a rule entitled ''Golden Parachute Payments'' (RIN2590–AA08) received in the Office of the President of the Senate on January 24, 2009; to the Committee on Banking, Housing, and Urban Affairs.

EC–548. A communication from the Chief of Staff, Media Bureau, Federal Communications Commission, transmitting, pursuant to law, the report of a rule entitled ''Amendment of Section 73.622(i), Final DTV Table of Allotments, Television Broadcast Stations; Rio Grande City, Texas'' (MB Docket No. 08–141) received in the Office of the President of the Senate on January 24, 2009; to the Committee on Commerce, Science, and Transportation.

EC–549. A communication from the Chief of Staff, Media Bureau, Federal Communications Commission, transmitting, pursuant to law, the report of a rule entitled ''Implementation of Short-term Analog Flash and Emergency Readiness Act; Establishment of DTV Transition 'Analog Nightlight' Program'' (MB Docket No. 08–255) received in the Office of the President of the Senate on January 24, 2009; to the Committee on Commerce, Science, and Transportation.

EC–550. A communication from the Acting Assistant Secretary, Office of Legislative Affairs, Department of State, transmitting, pursuant to law, a report relative to the certification to Congress on the effectiveness of

the Australia Group; to the Committee on Foreign Relations.

EC–551. A communication from the Principal Deputy Assistant Attorney General, Office of Legislative Affairs, Department of Justice, transmitting, pursuant to law, the quarterly report of the Department of Justice's Office of Privacy and Civil Liberties; to the Committee on the Judiciary.

EC–552. A communication from the Principal Deputy Assistant Attorney General, Office of Legislative Affairs, Department of Justice, transmitting, pursuant to law, a report entitled ''Secure Our Schools Program, FY 2008—Annual Report to Congress''; to the Committee on the Judiciary.

REPORTS OF COMMITTEES

The following reports of committees were submitted:

By Mr. INOUYE, from the Committee on Appropriations, without amendment:

S. 336. An original bill making supplemental appropriations for job preservation and creation, infrastructure investment, energy efficiency and science, assistance to the unemployed, and State and local fiscal stabilization, for the fiscal year ending September 30, 2009, and for other purposes (Rept. No. 111–3).

EXECUTIVE REPORTS OF COMMITTEES

The following executive reports of nominations were submitted:

By Mr. LEVIN for the Committee on Armed Services.

Air Force nominations beginning with Brigadier General Donald A. Haught and ending with Colonel William M. Ziegler, which nominations were received by the Senate and appeared in the Congressional Record on January 7, 2009.

Marine Corps nominations beginning with Brig. Gen. John M. Croley and ending with Brig. Gen. Tracy L. Garrett, which nominations were received by the Senate and appeared in the Congressional Record on January 8, 2009.

Army nominations beginning with Brigadier General Peter M. Aylward and ending with Colonel Michael T. White, which nominations were received by the Senate and appeared in the Congressional Record on January 14, 2009.

Mr. LEVIN. Mr. President, for the Committee on Armed Services I report favorably the following nomination lists which were printed in the RECORDs on the dates indicated, and ask unanimous consent, to save the expense of reprinting on the Executive Calendar that these nominations lie at the Secretary's desk for the information of Senators.

The PRESIDING OFFICER. Without objection, it is so ordered.

Air Force nomination of Edmund P. Zynda II, to be Major.

Air Force nomination of Daniel C. Gibson, to be Major.

Air Force nominations beginning with Donald L. Marshall and ending with Charles E. Peterson, which nominations were received by the Senate and appeared in the Congressional Record on January 7, 2009.

Air Force nominations beginning with Paul J. Cushman and ending with Luis F. Sambolin, which nominations were received by the Senate and appeared in the Congressional Record on January 7, 2009.

Air Force nominations beginning with Christopher S. Allen and ending with Deepa Hariprasad, which nominations were received by the Senate and appeared in the Congressional Record on January 7, 2009.

Air Force nomination of Ryan R. Pendleton, to be Lieutenant Colonel.

Air Force nomination of Howard L. Duncan, to be Lieutenant Colonel.

Air Force nominations beginning with Jeffrey R. Grunow and ending with Pamela T. Scott, which nominations were received by the Senate and appeared in the Congressional Record on January 7, 2009.

Air Force nomination of Eugene M. Gaspard, to be Colonel.

Air Force nominations beginning with Michael R. Powell and ending with Valerie R. Taylor, which nominations were received by the Senate and appeared in the Congressional Record on January 7, 2009.

Air Force nominations beginning with Mary Elizabeth Brown and ending with Gerald J. Laursen, which nominations were received by the Senate and appeared in the Congressional Record on January 7, 2009.

Air Force nominations beginning with Gary R. Califf and ending with C. Michael Padazinski, which nominations were received by the Senate and appeared in the Congressional Record on January 7, 2009.

Air Force nominations beginning with Stephen Scott Baker and ending with Phillip E. Parker, which nominations were received by the Senate and appeared in the Congressional Record on January 7, 2009.

Air Force nominations beginning with Joseph Allen Banna and ending with Joseph Tock, which nominations were received by the Senate and appeared in the Congressional Record on January 7, 2009.

Air Force nominations beginning with Keith A. Acree and ending with Steven L. Youssi, which nominations were received by the Senate and appeared in the Congressional Record on January 7, 2009.

Army nomination of Scott A. Gronewold, to be Colonel.

Army nominations beginning with Robert L. Kaspar, Jr. and ending with David K. Scales, which nominations were received by the Senate and appeared in the Congressional Record on January 7, 2009.

Army nomination of Emmett W. Mosley, to be Colonel.

Army nominations beginning with Andrew C. Meverden and ending with April M. Snyder, which nominations were received by the Senate and appeared in the Congressional Record on January 7, 2009.

Army nominations beginning with Douglas M. Coldwell and ending with Stephen Montaldi, which nominations were received by the Senate and appeared in the Congressional Record on January 7, 2009.

Army nomination of Thomas S. Carey, to be Major.

Army nomination of Scottie M. Eppler, to be Major.

Army nomination of Pierre R. Pierce, to be Major.

Army nominations beginning with Cheryl A. Creamer and ending with Aga E. Kirby, which nominations were received by the Senate and appeared in the Congressional Record on January 7, 2009.

Army nominations beginning with Kathryn A. Belill and ending with Suzanne R. Todd, which nominations were received by the Senate and appeared in the Congressional Record on January 7, 2009.

Army nominations beginning with Christopher Allen and ending with D060522, which nominations were received by the Senate and appeared in the Congressional Record on January 7, 2009.

Army nominations beginning with John L. Ament and ending with Wendy G. Woodall, which nominations were received by the Senate and appeared in the Congressional Record on January 7, 2009.

Army nominations beginning with Terryl L. Aitken and ending with Sarahtyah T. Wilson, which nominations were received by the Senate and appeared in the Congressional Record on January 7, 2009.

Marine Corps nomination of Matthew E. Sutton, to be Lieutenant Colonel.

Marine Corps nomination of Andrew N. Sullivan, to be Lieutenant Colonel.

Marine Corps nomination of Tracy G. Brooks, to be Lieutenant Colonel.

Marine Corps nominations beginning with Peter M. Barack, Jr. and ending with Jacob D. Leighty III, which nominations were received by the Senate and appeared in the Congressional Record on January 7, 2009.

Marine Corps nominations beginning with David G. Boone and ending with James A. Jones, which nominations were received by the Senate and appeared in the Congressional Record on January 7, 2009.

Marine Corps nominations beginning with William A. Burwell and ending with Balwindar K. Rawalayvandevoort, which nominations were received by the Senate and appeared in the Congressional Record on January 7, 2009.

Marine Corps nominations beginning with Kurt J. Hastings and ending with Calvin W. Smith, which nominations were received by the Senate and appeared in the Congressional Record on January 7, 2009.

Marine Corps nominations beginning with James P. Miller, Jr. and ending with Marc Tarter, which nominations were received by the Senate and appeared in the Congressional Record on January 7, 2009.

Marine Corps nomination of David S. Pummell, to be Major.

Marine Corps nomination of Robert M. Manning, to be Major.

Marine Corps nomination of Michael A. Symes, to be Major.

Marine Corps nomination of Paul A. Shirley, to be Major.

Marine Corps nomination of Richard D. Kohler, to be Major.

Marine Corps nominations beginning with Julie C. Hendrix and ending with Mauro Morales, which nominations were received by the Senate and appeared in the Congressional Record on January 7, 2009.

Marine Corps nominations beginning with Christopher N. Norris and ending with Samuel W. Spencer III, which nominations were received by the Senate and appeared in the Congressional Record on January 7, 2009.

Marine Corps nominations beginning with Anthony M. Nesbit and ending with Paul Zacharzuk, which nominations were received by the Senate and appeared in the Congressional Record on January 7, 2009.

Marine Corps nominations beginning with Gregory R. Biehl and ending with Bryan S. Teet, which nominations were received by the Senate and appeared in the Congressional Record on January 7, 2009.

Marine Corps nominations beginning with Travis R. Avent and ending with Gregg R. Edwards, which nominations were received by the Senate and appeared in the Congressional Record on January 7, 2009.

Marine Corps nominations beginning with Jose A. Falche and ending with Clennon Roe III, which nominations were received by the Senate and appeared in the Congressional Record on January 7, 2009.

Marine Corps nominations beginning with Keith D. Burgess and ending with Brian J. Spooner, which nominations were received by the Senate and appeared in the Congressional Record on January 7, 2009.

Marine Corps nominations beginning with Mark L. Hobin and ending with Terry G. Norris, which nominations were received by

the Senate and appeared in the Congressional Record on January 7, 2009.

Marine Corps nominations beginning with Kevin J. Anderson and ending with Edward P. Wojnaroski, Jr., which nominations were received by the Senate and appeared in the Congressional Record on January 7, 2009.

Navy nomination of Steven J. Shauberger, to be Lieutenant Commander.

Navy nomination of Karen M. Stokes, to be Lieutenant Commander.

Navy nominations beginning with Craig W. Aimone and ending with Matthew M. Wills, which nominations were received by the Senate and appeared in the Congressional Record on January 7, 2009.

(Nominations without an asterisk were reported with the recommendation that they be confirmed.)

INTRODUCTION OF BILLS AND JOINT RESOLUTIONS

The following bills and joint resolutions were introduced, read the first and second times by unanimous consent, and referred as indicated:

By Mr. DURBIN (for himself, Mr. WHITEHOUSE, Mr. AKAKA, Mr. BROWN, and Mr. SANDERS):

S. 330. A bill to amend title XVIII of the Social Security Act to deliver a meaningful benefit and lower prescription drug prices under the Medicare program; to the Committee on Finance.

By Mr. SCHUMER (for himself, Mr. SHELBY, Mr. DURBIN, Mrs. FEINSTEIN, Mr. BAYH, Mr. TESTER, Mr. GRAHAM, Mr. SESSIONS, and Mr. ROBERTS):

S. 331. A bill to increase the number of Federal law enforcement officials investigating and prosecuting financial fraud; to the Committee on the Judiciary.

By Mrs. FEINSTEIN (for herself and Mr. BROWNBACK):

S. 332. A bill to establish a comprehensive interagency response to reduce lung cancer mortality in a timely manner; to the Committee on Health, Education, Labor, and Pensions.

By Ms. MIKULSKI (for herself, Ms. STABENOW, Mr. CARDIN, and Mr. WEBB):

S. 333. A bill to amend the Internal Revenue Code of 1986 to allow an above-the-line deduction against individual income tax for interest on indebtedness and for State sales and excise taxes with respect to the purchase of certain motor vehicles; to the Committee on Finance.

By Mr. LUGAR:

S. 334. A bill to authorize the extension of nondiscriminatory treatment (normal trade relations treatment) to the products of Moldova; to the Committee on Finance.

By Mrs. GILLIBRAND:

S. 335. A bill to amend part D of title IV of the Social Security Act to repeal a fee imposed by States on certain child support collections; to the Committee on Finance.

By Mr. INOUYE:

S. 336. An original bill making supplemental appropriations for job preservation and creation, infrastructure investment, energy efficiency and science, assistance to the unemployed, and State and local fiscal stabilization, for the fiscal year ending September 30, 2009, and for other purposes; from the Committee on Appropriations; placed on the calendar.

SUBMISSION OF CONCURRENT AND SENATE RESOLUTIONS

The following concurrent resolutions and Senate resolutions were read, and referred (or acted upon), as indicated:

By Mr. VITTER (for himself and Ms. LANDRIEU):

S. Res. 22. A resolution recognizing the goals of Catholic Schools Week and honoring the valuable contributions of Catholic schools in the United States; considered and agreed to.

By Mr. CASEY (for himself, Mr. SPECTER, Ms. SNOWE, and Ms. COLLINS):

S. Res. 23. A resolution honoring the life of Andrew Wyeth; considered and agreed to.

ADDITIONAL COSPONSORS

S. 66

At the request of Mr. INOUYE, the name of the Senator from Maine (Ms. SNOWE) was added as a cosponsor of S. 66, a bill to amend title 10, United States Code, to permit former members of the Armed Forces who have a service-connected disability rated as total to travel on military aircraft in the same manner and to the same extent as retired members of the Armed Forces are entitled to travel on such aircraft.

S. 85

At the request of Mr. VITTER, the name of the Senator from Oklahoma (Mr. COBURN) was added as a cosponsor of S. 85, a bill to amend title X of the Public Health Service Act to prohibit family planning grants from being awarded to any entity that performs abortions.

S. 96

At the request of Mr. VITTER, the name of the Senator from Oklahoma (Mr. COBURN) was added as a cosponsor of S. 96, a bill to prohibit certain abortion-related discrimination in governmental activities.

S. 133

At the request of Mrs. FEINSTEIN, the name of the Senator from South Dakota (Mr. THUNE) was added as a cosponsor of S. 133, a bill to prohibit any recipient of emergency Federal economic assistance from using such funds for lobbying expenditures or political contributions, to improve transparency, enhance accountability, encourage responsible corporate governance, and for other purposes.

S. 213

At the request of Mrs. BOXER, the name of the Senator from New York (Mr. SCHUMER) was added as a cosponsor of S. 213, a bill to amend title 49, United States Code, to ensure air passengers have access to necessary services while on a grounded air carrier, and for other purposes.

S. 256

At the request of Mrs. FEINSTEIN, the name of the Senator from Arkansas (Mr. PRYOR) was added as a cosponsor of S. 256, a bill to enhance the ability to combat methamphetamine.

S. 271

At the request of Ms. CANTWELL, the names of the Senator from California (Mrs. BOXER), the Senator from Rhode Island (Mr. REED) and the Senator from Rhode Island (Mr. WHITEHOUSE) were added as cosponsors of S. 271, a bill to amend the Internal Revenue Code of 1986 to provide incentives to accelerate the production and adoption of plug-in electric vehicles and related component parts.

S. 298

At the request of Mr. ISAKSON, the names of the Senator from Texas (Mr. CORNYN) and the Senator from Idaho (Mr. RISCH) were added as cosponsors of S. 298, a bill to establish a Financial Markets Commission, and for other purposes.

S. 326

At the request of Mr. MCCONNELL, the name of the Senator from Wyoming (Mr. ENZI) was added as a cosponsor of S. 326, a bill to amend title XXI of the Social Security Act to reauthorize the State Children's Health Insurance Program through fiscal year 2013, and for other purposes.

S. 328

At the request of Mr. ROCKEFELLER, the names of the Senator from Arkansas (Mr. PRYOR), the Senator from Wisconsin (Mr. KOHL), the Senator from Vermont (Mr. SANDERS), the Senator from Pennsylvania (Mr. CASEY) and the Senator from Iowa (Mr. HARKIN) were added as cosponsors of S. 328, a bill to postpone the DTV transition date.

S. RES. 9

At the request of Mr. LUGAR, the name of the Senator from Oklahoma (Mr. INHOFE) was added as a cosponsor of S. Res. 9, a resolution commemorating 90 years of U.S.-Polish diplomatic relations, during which Poland has proven to be an exceptionally strong partner to the United States in advancing freedom around the world.

STATEMENTS ON INTRODUCED BILLS AND JOINT RESOLUTIONS

By Mr. DURBIN (for himself, Mr. WHITEHOUSE, Mr. AKAKA, Mr. BROWN, and Mr. SANDERS):

S. 330. A bill to amend title XVIII of the Social Security Act to deliver a meaningful benefit and lower prescription drug prices under the Medicare program; to the Committee on Finance.

Mr. DURBIN. Mr. President, in the 6 years since Congress passed the Medicare Modernization Act, life for seniors has become increasingly difficult. The majority of seniors live on a fixed income, but face the challenge of paying more with less as the costs for everything continue to rise. Housing costs, basic nutrition, and healthcare needs are more expensive.

The addition of a prescription drug benefit to Medicare was long overdue, and many senior citizens and people with disabilities are relieved to finally have drug coverage. But the drug benefit was not structured like the rest of Medicare. For all other Medicare benefits, seniors can choose whether to receive benefits directly through Medicare or through a private insurance plan. The overwhelming majority choose the Medicare-run option for their hospital and physician coverage.

Unfortunately, no such choice is available for prescription drugs. Medicare beneficiaries must enroll in a private insurance plan to obtain drug coverage and with that are subjected to the multiple changes drug plans are allowed to impose on seniors year after year.

Each drug plan has its own premium, cost-sharing requirements, list of covered drugs, and pharmacy network. After you have identified the right drug plan, you have to go through the whole process again at the end of the year because your plan may have changed the drugs it covers or added new restrictions on how to access covered drugs.

Seniors are having trouble identifying which of the dozens of private drug plans works best for them. The complexity of the program has made beneficiaries more vulnerable to aggressive and deceptive marketing practices as some insurers try to steer seniors into more profitable Medicare Advantage plans. Some seniors have been signed up for Medicare Advantage plans without their knowledge, and, unfortunately, there have also been dishonest insurance agents who have misrepresented what benefits would be covered. Anyone who has visited a senior center or spoken with an elderly relative knows that the complexity of the drug benefit has created much confusion.

Drug plans often do not tell beneficiaries that they can appeal a drug plan's decision to deny coverage for a drug, even though they are required to do so. Beneficiaries who do appeal soon find that it is a long and difficult process.

Multiple studies have shown that private drug plans have not been effective negotiators, which means seniors end up paying more than they should. A report by Avalere Health released in late 2008 revealed that the average beneficiary will see a 24 percent increase in their monthly premiums for 2009. The top 10 most popular plans by enrollment will increase their premiums by more than 30 percent.

Today, I am introducing the Medicare Prescription Drug Savings and Choice Act. The bill would create a Medicare-operated drug plan that would compete with private drug plans and would give the Health and Human Services Secretary leverage to negotiate with drug companies to lower drug prices.

The Health and Human Services Secretary would have the tools to negotiate with drug companies, including the use of drug formulary. The best medical evidence would determine which drugs are covered in the formulary, and the formulary would be used to promote safety, appropriate use of drugs, and value.

The bill would establish an appeals process that is efficient, imposes minimal administrative burdens, and ensures timely procurement of non-formulary drugs or non-preferred drugs when medically necessary.

This is the kind of drug plan that Medicare beneficiaries are looking for. According to a survey by the Kaiser Family Foundation, two-thirds of seniors want the option of getting drug coverage directly from Medicare, and over 80 percent favor allowing the Government to negotiate with drug companies for lower prices.

Seniors want the ability to choose a Medicare-administered drug plan and deserve a simpler, more dependable, and less costly program that prioritizes their needs. Let's give them this option—just as they have this choice with every other benefit covered by Medicare.

Mr. President, I ask unanimous consent that the text of the bill be printed in the RECORD.

There being no objection, the text of the bill was ordered to be printed in the RECORD, as follows:

S. 330

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

SECTION 1. SHORT TITLE.

This Act may be cited as the ''Medicare Prescription Drug Savings and Choice Act of 2009''.

SEC. 2. ESTABLISHMENT OF MEDICARE OPERATED PRESCRIPTION DRUG PLAN OPTION.

(a) IN GENERAL.—Subpart 2 of part D of the Social Security Act is amended by inserting after section 1860D–11 (42 U.S.C. 1395w–111) the following new section:

''MEDICARE OPERATED PRESCRIPTION DRUG PLAN OPTION

''SEC. 1860D–11A. (a) IN GENERAL.—Notwithstanding any other provision of this part, for each year (beginning with 2010), in addition to any plans offered under section 1860D–11, the Secretary shall offer one or more medicare operated prescription drug plans (as defined in subsection (c)) with a service area that consists of the entire United States and shall enter into negotiations in accordance with subsection (b) with pharmaceutical manufacturers to reduce the purchase cost of covered part D drugs for eligible part D individuals who enroll in such a plan.

''(b) NEGOTIATIONS.—Notwithstanding section 1860D–11(i), for purposes of offering a medicare operated prescription drug plan under this section, the Secretary shall negotiate with pharmaceutical manufacturers with respect to the purchase price of covered part D drugs in a Medicare operated prescription drug plan and shall encourage the use of more affordable therapeutic equivalents to the extent such practices do not override medical necessity as determined by the prescribing physician. To the extent practicable and consistent with the previous sentence, the Secretary shall implement strategies similar to those used by other Federal purchasers of prescription drugs, and other strategies, including the use of a formulary and formulary incentives in subsection (e), to reduce the purchase cost of covered part D drugs.

''(c) MEDICARE OPERATED PRESCRIPTION DRUG PLAN DEFINED.—For purposes of this part, the term 'medicare operated prescription drug plan' means a prescription drug plan that offers qualified prescription drug coverage and access to negotiated prices described in section 1860D–2(a)(1)(A). Such a plan may offer supplemental prescription drug coverage in the same manner as other qualified prescription drug coverage offered by other prescription drug plans.

''(d) MONTHLY BENEFICIARY PREMIUM.—

''(1) QUALIFIED PRESCRIPTION DRUG COVERAGE.—The monthly beneficiary premium for qualified prescription drug coverage and access to negotiated prices described in section 1860D–2(a)(1)(A) to be charged under a medicare operated prescription drug plan shall be uniform nationally. Such premium for months in 2010 and each succeeding year shall be based on the average monthly per capita actuarial cost of offering the medicare operated prescription drug plan for the year involved, including administrative expenses.

''(2) SUPPLEMENTAL PRESCRIPTION DRUG COVERAGE.—Insofar as a medicare operated prescription drug plan offers supplemental prescription drug coverage, the Secretary may adjust the amount of the premium charged under paragraph (1).

''(e) USE OF A FORMULARY AND FORMULARY INCENTIVES.—

''(1) IN GENERAL.—With respect to the operation of a medicare operated prescription drug plan, the Secretary shall establish and apply a formulary (and may include formulary incentives described in paragraph (2)(C)(ii)) in accordance with this subsection in order to—

''(A) increase patient safety;

''(B) increase appropriate use and reduce inappropriate use of drugs; and

''(C) reward value.

''(2) DEVELOPMENT OF INITIAL FORMULARY.—

''(A) IN GENERAL.—In selecting covered part D drugs for inclusion in a formulary. the Secretary shall consider clinical benefit and price.

''(B) ROLE OF AHRQ.—The Director of the Agency for Healthcare Research and Quality shall be responsible for assessing the clinical benefit of covered part D drugs and making recommendations to the Secretary regarding which drugs should be included in the formulary. In conducting such assessments and making such recommendations, the Director shall—

''(i) consider safety concerns including those identified by the Federal Food and Drug Administration;

''(ii) use available data and evaluations, with priority given to randomized controlled trials, to examine clinical effectiveness, comparative effectiveness, safety, and enhanced compliance with a drug regimen;

''(iii) use the same classes of drugs developed by United States Pharmacopeia for this part;

''(iv) consider evaluations made by—

''(I) the Director under section 1013 of Medicare Prescription Drug, Improvement, and Modernization Act of 2003;

''(II) other Federal entities, such as the Secretary of Veterans Affairs; and

''(III) other private and public entities, such as the Drug Effectiveness Review Project and Medicaid programs; and

''(v) recommend to the Secretary—

''(I) those drugs in a class that provide a greater clinical benefit, including fewer safety concerns or less risk of side-effects, than another drug in the same class that should be included in the formulary;

''(II) those drugs in a class that provide less clinical benefit, including greater safety concerns or a greater risk of side-effects, than another drug in the same class that should be excluded from the formulary; and

''(III) drugs in a class with same or similar clinical benefit for which it would be appropriate for the Secretary to competitively bid (or negotiate) for placement on the formulary.

''(C) CONSIDERATION OF AHRQ RECOMMENDATIONS.—

''(i) IN GENERAL.—The Secretary, after taking into consideration the recommendations under subparagraph (B)(v), shall establish a

formulary, and formulary incentives, to encourage use of covered part D drugs that—

''(I) have a lower cost and provide a greater clinical benefit than other drugs;

''(II) have a lower cost than other drugs with same or similar clinical benefit; and

''(III) drugs that have the same cost but provide greater clinical benefit than other drugs.

''(ii) FORMULARY INCENTIVES.—The formulary incentives under clause (i) may be in the form of one or more of the following:

''(I) Tiered copayments.

''(II) Reference pricing.

''(III) Prior authorization.

''(IV) Step therapy.

''(V) Medication therapy management.

''(VI) Generic drug substitution.

''(iii) FLEXIBILITY.—In applying such formulary incentives the Secretary may decide not to impose any cost-sharing for a covered part D drug for which—

''(I) the elimination of cost sharing would be expected to increase compliance with a drug regimen; and

''(II) compliance would be expected to produce savings under part A or B or both.

''(3) LIMITATIONS ON FORMULARY.—In any formulary established under this subsection, the formulary may not be changed during a year, except—

''(A) to add a generic version of a covered part D drug that entered the market;

''(B) to remove such a drug for which a safety problem is found; and

''(C) to add a drug that the Secretary identifies as a drug which treats a condition for which there has not previously been a treatment option or for which a clear and significant benefit has been demonstrated over other covered part D drugs.

''(4) ADDING DRUGS TO THE INITIAL FORMULARY.—

''(A) USE OF ADVISORY COMMITTEE.—The Secretary shall establish and appoint an advisory committee (in this paragraph referred to as the 'advisory committee')—

''(i) to review petitions from drug manufacturers, health care provider organizations, patient groups, and other entities for inclusion of a drug in, or other changes to, such formulary; and

''(ii) to recommend any changes to the formulary established under this subsection.

''(B) COMPOSITION.—The advisory committee shall be composed of 9 members and shall include representatives of physicians, pharmacists, and consumers and others with expertise in evaluating prescription drugs. The Secretary shall select members based on their knowledge of pharmaceuticals and the Medicare population. Members shall be deemed to be special Government employees for purposes of applying the conflict of interest provisions under section 208 of title 18, United States Code, and no waiver of such provisions for such a member shall be permitted.

''(C) CONSULTATION.—The advisory committee shall consult, as necessary, with physicians who are specialists in treating the disease for which a drug is being considered.

''(D) REQUEST FOR STUDIES.—The advisory committee may request the Agency for Healthcare Research and Quality or an academic or research institution to study and make a report on a petition described in subparagraph (A)(ii) in order to assess—

''(i) clinical effectiveness;

''(ii) comparative effectiveness;

''(iii) safety; and

''(iv) enhanced compliance with a drug regimen.

''(E) RECOMMENDATIONS.—The advisory committee shall make recommendations to the Secretary regarding—

''(i) whether a covered part D drug is found to provide a greater clinical benefit, including fewer safety concerns or less risk of side-effects, than another drug in the same class that is currently included in the formulary and should be included in the formulary;

''(ii) whether a covered part D drug is found to provide less clinical benefit, including greater safety concerns or a greater risk of side-effects, than another drug in the same class that is currently included in the formulary and should not be included in the formulary; and

''(iii) whether a covered part D drug has the same or similar clinical benefit to a drug in the same class that is currently included in the formulary and whether the drug should be included in the formulary.

''(F) LIMITATIONS ON REVIEW OF MANUFACTURER PETITIONS.—The advisory committee shall not review a petition of a drug manufacturer under subparagraph (A)(ii) with respect to a covered part D drug unless the petition is accompanied by the following:

''(i) Raw data from clinical trials on the safety and effectiveness of the drug.

''(ii) Any data from clinical trials conducted using active controls on the drug or drugs that are the current standard of care.

''(iii) Any available data on comparative effectiveness of the drug.

''(iv) Any other information the Secretary requires for the advisory committee to complete its review.

''(G) RESPONSE TO RECOMMENDATIONS.—The Secretary shall review the recommendations of the advisory committee and if the Secretary accepts such recommendations the Secretary shall modify the formulary established under this subsection accordingly. Nothing in this section shall preclude the Secretary from adding to the formulary a drug for which the Director of the Agency for Healthcare Research and Quality or the advisory committee has not made a recommendation.

''(H) NOTICE OF CHANGES.—The Secretary shall provide timely notice to beneficiaries and health professionals about changes to the formulary or formulary incentives.

''(f) INFORMING BENEFICIARIES.—The Secretary shall take steps to inform beneficiaries about the availability of a Medicare operated drug plan or plans including providing information in the annual handbook distributed to all beneficiaries and adding information to the official public Medicare website related to prescription drug coverage available through this part.

''(g) APPLICATION OF ALL OTHER REQUIREMENTS FOR PRESCRIPTION DRUG PLANS.—Except as specifically provided in this section, any Medicare operated drug plan shall meet the same requirements as apply to any other prescription drug plan, including the requirements of section 1860D–4(b)(1) relating to assuring pharmacy access).''.

(b) CONFORMING AMENDMENTS.—

(1) Section 1860D–3(a) of the Social Security Act (42 U.S.C. 1395w–103(a)) is amended by adding at the end the following new paragraph:

''(4) AVAILABILITY OF THE MEDICARE OPERATED PRESCRIPTION DRUG PLAN.—A medicare operated prescription drug plan (as defined in section 1860D–11A(c)) shall be offered nationally in accordance with section 1860D–11A.''.

(2)(A) Section 1860D–3 of the Social Security Act (42 U.S.C. 1395w–103) is amended by adding at the end the following new subsection:

''(c) PROVISIONS ONLY APPLICABLE IN 2006, 2007, 2008, AND 2009.—The provisions of this section shall only apply with respect to 2006, 2007, 2008, and 2009.''.

(B) Section 1860D–11(g) of such Act (42 U.S.C. 1395w–111(g)) is amended by adding at the end the following new paragraph:

''(8) NO AUTHORITY FOR FALLBACK PLANS AFTER 2009.—A fallback prescription drug plan shall not be available after December 31, 2009.''.

(3) Section 1860D–13(c)(3) of such Act (42 U.S.C. 1395w–113(c)(3)) is amended—

(A) in the heading, by inserting ''AND MEDICARE OPERATED PRESCRIPTION DRUG PLANS'' after ''FALLBACK PLANS''; and

(B) by inserting ''or a medicare operated prescription drug plan'' after ''a fallback prescription drug plan''.

(4) Section 1860D–16(b)(1) of such Act (42 U.S.C.1395w–116(b)(1)) is amended—

(A) in subparagraph (C), by striking ''and'' after the semicolon at the end;

(B) in subparagraph (D), by striking the period at the end and inserting ''; and''; and

(C) by adding at the end the following new subparagraph:

''(E) payments for expenses incurred with respect to the operation of medicare operated prescription drug plans under section 1860D–11A.''.

(5) Section 1860D–41(a) of such Act (42 U.S.C. 1395w–151(a)) is amended by adding at the end the following new paragraph:

''(19) MEDICARE OPERATED PRESCRIPTION DRUG PLAN.—The term 'medicare operated prescription drug plan' has the meaning given such term in section 1860D–11A(c).''.

(c) EFFECTIVE DATE.—The amendments made by this section shall take effect as if included in the enactment of section 101 of the Medicare Prescription Drug, Improvement, and Modernization Act of 2003.

SEC. 3. IMPROVED APPEALS PROCESS UNDER THE MEDICARE OPERATED PRESCRIPTION DRUG PLAN.

Section 1860D–4(h) of the Social Security Act (42 U.S.C. 1305w–104(h)) is amended by adding at the end the following new paragraph:

''(4) APPEALS PROCESS FOR MEDICARE OPERATED PRESCRIPTION DRUG PLAN.—

''(A) IN GENERAL.—The Secretary shall develop a well-defined process for appeals for denials of benefits under this part under the medicare operated prescription drug plan. Such process shall be efficient, impose minimal administrative burdens, and ensure the timely procurement of non-formulary drugs or exemption from formulary incentives when medically necessary. Medical necessity shall be based on professional medical judgment, the medical condition of the beneficiary, and other medical evidence. Such appeals process shall include—

''(i) an initial review and determination made by the Secretary; and

''(ii) for appeals denied during the initial review and determination, the option of an external review and determination by an independent entity selected by the Secretary.

''(B) CONSULTATION IN DEVELOPMENT OF PROCESS.—In developing the appeals process under subparagraph (A), the Secretary shall consult with consumer and patient groups, as well as other key stakeholders to ensure the goals described in subparagraph (A) are achieved.''.

By Mrs. FEINSTEIN (for herself and Mr. BROWNBACK):

S. 332. A bill to establish a comprehensive interagency response to reduce lung cancer mortality in a timely manner; to the Committee on Health, Education, Labor, and Pensions.

Mrs. FEINSTEIN. Mr. President, I rise to introduce the Lung Cancer Mortality Reduction Act, calling for a new effort to combat this often deadly form of cancer. I am pleased to be joined by Senator BROWNBACK, the Co-Chair of

the Senate Cancer Coalition, and a strong voice on a variety of cancer issues.

This bill will renew and improve the Federal Government's efforts to combat lung cancer. It will affirm the goal of a 50 percent reduction in lung cancer mortality by 2015.

It will authorize a Lung Cancer Mortality Reduction Program, with interagency coordination, to develop and implement a plan to meet this goal.

It will authorize $75 million for lung cancer research programs in the National Heart Lung Blood Institute, National Institute of Biomedical Imaging and Bioengineering, National Institute of Environmental Health Sciences, and Centers for Disease Control.

It will create a new incentive program in the Food and Drug Administration to be modeled on the Orphan Drug Act for the development of chemoprevention drugs for lung cancer and precancerous lung disease. These are drugs that could prevent precancer from progressing into full-blown disease.

It will improve coordination disparity programs to ensure that the burdens of lung cancer on minority populations are addressed.

We have made great strides against many types of cancer in the last several decades. However, these gains are uneven.

When the National Cancer Act was passed in 1971, lung cancer had a 5-year survival rate of only 12 percent. After decades of research efforts and scientific advances, this survival rate remains only 15 percent. In contrast, the 5-year survival rates of breast, prostate, and colon cancer have risen to 89 percent, 99 percent and 65 percent respectively.

A lung cancer diagnosis can be devastating. The average life expectancy following a lung cancer diagnosis is only 9 months.

This is because far too many patients are not diagnosed with lung cancer until it has progressed to the later stages. Lung cancer can be hard to diagnose, and symptoms may at first appear to be other illnesses. As a result, only 16 percent of lung cancer patients are diagnosed when their cancer is still localized, and is the most treatable.

Lung cancer still lacks early detection technology, to find cancer when it is most treatable. Mammograms can find breast cancer, and colonoscopies can find dangerous colon polyps. But there is no equivalent test for lung cancer at this time.

Under this legislation, the National Cancer Institute has clear authority to work with other institutes on this early detection research. Coordination between all branches of the National Institutes of Health, including those with expertise on lungs, imaging, and cancer will be necessary to make this long overdue progress.

Lung cancer lags behind other cancers, in part, due to stigma from smoking. Make no mistake, tobacco use causes the majority of lung cancer cases. Tobacco cessation is a critical component of reducing lung cancer mortality. Less smoking means less lung cancer. Period.

But tobacco use does not fully explain lung cancer. Approximately 15 percent of the people who die from lung cancer never smoked. A study published in the Journal of Clinical Oncology in 2007 tracked the incidence of lung cancer in 1 million people ages 40 to 79. It found that about 20 percent of female lung cancer patients were nonsmokers and 8 percent of male patients were nonsmokers.

These patients may have been exposed to second hand smoke, or they may have been exposed to radon, asbestos, chromium, or other chemicals. There could be other causes and associations that have not yet been discovered, genetic predispositions or other environmental exposures.

Dana Reeve put a face on these statistics, with her brave fight against lung cancer. Dana Reeve was a nonsmoker, and still was diagnosed with lung cancer at the age of 44. She died a mere 7 months later, leaving a young son.

Dana Reeve's story shows that smoking cannot fully explain lung cancer. Everyone in this country could stop smoking today, and yet we would still face a lung cancer epidemic. According to the Lung Cancer Alliance, over 60 percent of new lung cancer cases occur in those who never smoked, or who quit smoking.

I believe that we have the expertise and technology to make serious progress against this deadly cancer, and to reach the goal of halving lung cancer mortality by 2015.

We need this legislation to ensure that our Government's resources are focused on this mission in the most efficient way possible.

Agency efforts must be coordinated, and every part of the National Institutes of Health that may have some ideas to lend should be participating. That is what the Lung Cancer Mortality Reduction Program will accomplish.

We can do better for Americans diagnosed with lung cancer. I ask my colleagues to support this legislation.

Mr. President, I ask unanimous consent that the text of the bill be printed in the RECORD.

There being no objection, the text of the bill was ordered to be printed in the RECORD, as follows:

S. 332

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

SECTION 1. SHORT TITLE.

This Act may be cited as the ''Lung Cancer Mortality Reduction Act of 2009''.

SEC. 2. FINDINGS.

Congress makes the following findings:

(1) Lung cancer is the leading cause of cancer death for both men and women, accounting for 28 percent of all cancer deaths.

(2) Lung cancer kills more people annually than breast cancer, prostate cancer, colon cancer, liver cancer, melanoma, and kidney cancer combined.

(3) Since the enactment of the National Cancer Act of 1971 (Public Law 92–218; 85 Stat. 778), coordinated and comprehensive research has raised the 5-year survival rates for breast cancer to 88 percent, for prostate cancer to 99 percent, and for colon cancer to 64 percent.

(4) However, the 5-year survival rate for lung cancer is still only 15 percent and a similar coordinated and comprehensive research effort is required to achieve increases in lung cancer survivability rates.

(5) Sixty percent of lung cancer cases are now diagnosed as nonsmokers or former smokers.

(6) Two-thirds of nonsmokers diagnosed with lung cancer are women.

(7) Certain minority populations, such as African-American males, have disproportionately high rates of lung cancer incidence and mortality, notwithstanding their similar smoking rate.

(8) Members of the baby boomer generation are entering their sixties, the most common age at which people develop lung cancer.

(9) Tobacco addiction and exposure to other lung cancer carcinogens such as Agent Orange and other herbicides and battlefield emissions are serious problems among military personnel and war veterans.

(10) Significant and rapid improvements in lung cancer mortality can be expected through greater use and access to lung cancer screening tests for at-risk individuals.

(11) Additional strategies are necessary to further enhance the existing tests and therapies available to diagnose and treat lung cancer in the future.

(12) The August 2001 Report of the Lung Cancer Progress Review Group of the National Cancer Institute stated that funding for lung cancer research was ''far below the levels characterized for other common malignancies and far out of proportion to its massive health impact''.

(13) The Report of the Lung Cancer Progress Review Group identified as its ''highest priority'' the creation of integrated, multidisciplinary, multi-institutional research consortia organized around the problem of lung cancer.

(14) The United States must enhance its response to the issues raised in the Report of the Lung Cancer Progress Review Group, and this can be accomplished through the establishment of a coordinated effort designed to reduce the lung cancer mortality rate by 50 percent by 2016 and through targeted funding to support this coordinated effort.

SEC. 3. SENSE OF THE SENATE CONCERNING INVESTMENT IN LUNG CANCER RESEARCH.

It is the sense of the Senate that—

(1) lung cancer mortality reduction should be made a national public health priority; and

(2) a comprehensive mortality reduction program coordinated by the Secretary of Health and Human Services is justified and necessary to adequately address and reduce lung cancer mortality.

SEC. 4. LUNG CANCER MORTALITY REDUCTION PROGRAM.

(a) IN GENERAL.—Subpart 1 of part C of title IV of the Public Health Service Act (42 U.S.C. 285 et seq.) is amended by adding at the end the following:

''SEC. 417G. LUNG CANCER MORTALITY REDUCTION PROGRAM.

''(a) IN GENERAL.—Not later than 6 months after the date of enactment of the Lung Cancer Mortality Reduction Act of 2009, the Secretary, in consultation with the Secretary of Defense, the Secretary of Veterans Affairs, the Director of the National Institutes of

Health, the Director of the Centers for Disease Control and Prevention, the Commissioner of the Food and Drug Administration, the Administrator of the Centers for Medicare & Medicaid Services, the Director of the National Center on Minority Health and Health Disparities, and other members of the Lung Cancer Advisory Board established under section 6 of the Lung Cancer Mortality Reduction Act of 2009, shall implement a comprehensive program to achieve a 50 percent reduction in the mortality rate of lung cancer by 2016.

''(b) REQUIREMENTS.—The program implemented under subsection (a) shall include at least the following:

''(1) With respect to the National Institutes of Health—

''(A) a strategic review and prioritization by the National Cancer Institute of research grants to achieve the goal of the program in reducing lung cancer mortality;

''(B) the provision of funds to enable the Airway Biology and Disease Branch of the National Heart, Lung, and Blood Institute to expand its research programs to include predispositions to lung cancer, the interrelationship between lung cancer and other pulmonary and cardiac disease, and the diagnosis and treatment of these interrelationships;

''(C) the provision of funds to enable the National Institute of Biomedical Imaging and Bioengineering to expand its Quantum Grant Program and Image-Guided Interventions programs to expedite the development of computer assisted diagnostic, surgical, treatment, and drug testing innovations to reduce lung cancer mortality; and

''(D) the provision of funds to enable the National Institute of Environmental Health Sciences to implement research programs relative to lung cancer incidence.

''(2) With respect to the Food and Drug Administration—

''(A) the establishment of a lung cancer mortality reduction drug program under subchapter G of chapter V of the Federal Food, Drug, and Cosmetic Act; and

''(B) compassionate access activities under section 561 of the Federal Food, Drug, and Cosmetic Act (21 U.S.C. 360bbb).

''(3) With respect to the Centers for Disease Control and Prevention, the establishment of a lung cancer mortality reduction program under section 1511.

''(4) With respect to the Agency for Healthcare Research and Quality, the conduct of a biannual review of lung cancer screening, diagnostic and treatment protocols, and the issuance of updated guidelines.

''(5) The cooperation and coordination of all minority and health disparity programs within the Department of Health and Human Services to ensure that all aspects of the Lung Cancer Mortality Reduction Program adequately address the burden of lung cancer on minority and rural populations.

''(6) The cooperation and coordination of all tobacco control and cessation programs within agencies of the Department of Health and Human Services to achieve the goals of the Lung Cancer Mortality Reduction Program with particular emphasis on the coordination of drug and other cessation treatments with early detection protocols.

''(c) AUTHORIZATION OF APPROPRIATIONS.—There is authorized to be appropriated to carry out this section—

''(1) $25,000,000 for fiscal year 2010 for the activities described in subsection (b)(1)(B), and such sums as may be necessary for each of fiscal years 2011 through 2014;

''(2) $25,000,000 for fiscal year 2010 for the activities described in subsection (b)(1)(C), and such sums as may be necessary for each of fiscal years 2011 through 2014;

''(3) $10,000,000 for fiscal year 2010 for the activities described in subsection (b)(1)(D), and such sums as may be necessary for each of fiscal years 2011 through 2014; and

''(4) $15,000,000 for fiscal year 2010 for the activities described in subsection (b)(3), and such sums as may be necessary for each of fiscal years 2011 through 2014.''.

(b) FOOD, DRUG, AND COSMETIC ACT.—Chapter V of the Federal Food, Drug, and Cosmetic Act (21 U.S.C. 351 et seq.) is amended by adding at the end the following:

''Subchapter G—Lung Cancer Mortality Reduction Programs

''SEC. 581. LUNG CANCER MORTALITY REDUCTION PROGRAM.

''(a) IN GENERAL.—The Secretary shall implement a program to provide incentives of the type provided for in subchapter B of this chapter for the development of chemoprevention drugs for precancerous conditions of the lung, drugs for targeted therapeutic treatments and vaccines for lung cancer, and new agents to curtail or prevent nicotine addiction. The Secretary shall model the program implemented under this section on the program provided for under subchapter B of this chapter with respect to certain drugs.

''(b) APPLICATION OF PROVISIONS.—The Secretary shall apply the provisions of subchapter B of this chapter to drugs, biological products, and devices for the prevention or treatment of lung cancer, including drugs, biological products, and devices for chemoprevention of precancerous conditions of the lungs, vaccination against the development of lung cancer, and therapeutic treatment for lung cancer.

''(c) BOARD.—The Board established under section 6 of the Lung Cancer Mortality Reduction Act of 2009 shall monitor the program implemented under this section.''.

(c) ACCESS TO UNAPPROVED THERAPIES.—Section 561(e) of the Federal Food, Drug, and Cosmetic Act (21 U.S.C. 360bbb(e)) is amended by inserting before the period the following: ''and shall include providing compassionate access to drugs, biological products, and devices under the program under section 581, with substantial consideration being given to whether the totality of information available to the Secretary regarding the safety and effectiveness of an investigational drug, as compared to the risk of morbidity and death from the disease, indicates that a patient may obtain more benefit than risk if treated with the drug, biological product, or device.''.

(d) CDC.—Title XV of the Public Health Service Act (42 U.S.C. 300k et seq.) is amended by adding at the end the following:

''SEC. 1511. LUNG CANCER MORTALITY REDUCTION PROGRAM.

''(a) IN GENERAL.—The Secretary shall establish and implement an early disease research and management program targeted at the high incidence and mortality rates among minority and low-income populations.

''(b) AUTHORIZATION OF APPROPRIATIONS.—There is authorized to be appropriated, such sums as may be necessary to carry out this section.''.

SEC. 5. DEPARTMENT OF DEFENSE AND THE DEPARTMENT OF VETERANS AFFAIRS.

The Secretary of Defense and the Secretary of Veterans Affairs shall coordinate with the Secretary of Health and Human Services—

(1) in the development of the Lung Cancer Mortality Reduction Program under section 417E of part C of title IV of the Public Health Service Act, as amended by section 4;

(2) in the implementation within the Department of Defense and the Department of Veterans Affairs of an early detection and disease management research program for military personnel and veterans whose smoking history and exposure to carcinogens during active duty service has increased their risk for lung cancer; and

(3) in the implementation of coordinated care programs for military personnel and veterans diagnosed with lung cancer.

SEC. 6. LUNG CANCER ADVISORY BOARD.

(a) IN GENERAL.—The Secretary of Health and Human Services shall establish a Lung Cancer Advisory Board (referred to in this section as the ''Board'') to monitor the programs established under this Act (and the amendments made by this Act), and provide annual reports to Congress concerning benchmarks, expenditures, lung cancer statistics, and the public health impact of such programs.

(b) COMPOSITION.—The Board shall be composed of—

(1) the Secretary of Health and Human Services;

(2) the Secretary of Defense;

(3) the Secretary of Veterans Affairs; and

(4) two representatives each from the fields of—

(A) clinical medicine focused on lung cancer;

(B) lung cancer research;

(C) imaging;

(D) drug development; and

(E) lung cancer advocacy,

to be appointed by the Secretary of Health and Human Services.

SEC. 7. AUTHORIZATION OF APPROPRIATIONS.

For the purpose of carrying out the programs under this Act (and the amendments made by this Act), there is authorized to be appropriated such sums as may be necessary for each of fiscal years 2010 through 2014.

By Mr. LUGAR:

S. 334. A bill to authorize the extension of nondiscriminatory treatment (normal trade relations treatment) to the products of Moldova; to the Committee on Finance.

Mr. LUGAR. Mr. President, I rise today to introduce legislation designed to extend permanent normal trade relations to Moldova. Moldova is still subject to the provisions of the Jackson-Vanik amendment to the Trade Act of 1974, which sanctions nations for failure to comply with freedom of emigration requirements. This bill would repeal permanently the application of Jackson-Vanik to Moldova.

Moldova is a small country located in Europe between Ukraine and Romania. Throughout the Cold War it was a part of the Soviet Union. It gained its independence from the Soviet Union on August 27, 1991. The United States has supported Moldova in its journey toward democracy and sovereignty.

The United States enjoys good relations with Moldova and has encouraged Moldovan efforts to integrate with Euro-Atlantic institutions. Moldova has been selected to participate in the Eastern Partnership, an initiative proposed by the European Union in 2008, which will facilitate the creation of free trade agreements, energy security plans, and closer economic ties between the EU and Moldova.

Since declaring independence from the Soviet Union in 1992, Moldova has enacted a series of democratic and free market reforms. In 2001, Moldova became a member of the World Trade Organization. Furthermore, Moldovan

President Vladimir Voronin has recently expressed his desire to sign an accord to strengthen relations between Moldova and the European Union this year. Until the United States terminates application of Jackson-Vanik on Moldova, the U.S. will not benefit from Moldova's market access commitments nor can it resort to WTO dispute resolution mechanisms. While all other WTO members currently enjoy these benefits, the U.S. does not.

The Republic of Moldova has been evaluated every year and granted normal trade relations with the United States through annual presidential waivers from the effects of Jackson-Vanik. The Moldovan constitution guarantees its citizens the right to emigrate and this right is respected in practice. Most emigration restrictions were eliminated in 1991 and virtually no problems with emigration have been reported in the 16 years since independence. More specifically, Moldova does not impose emigration restrictions on members of the Jewish community. Synagogues function openly and without harassment. As a result, the administration finds that Moldova is in full compliance with Jackson-Vanik's provisions.

Since declaring independence from the Soviet Union in 1992, Moldova has enacted a series of democratic and free market reforms. Parliamentary elections in 2005 and local elections in 2007 generally complied with international standards for democratic elections.

Moldova has also contributed constructively towards a resolution of the long-standing separatist conflict in the country's Transniestria region, most recently by proposing a series of confidence-building measures and working groups. In addition, trade increased between the two parties by 30 percent in 2007.

The United States and Moldova have established a strong record of achievement in security cooperation. In 1997 the Nunn-Lugar Cooperative Threat Reduction Program responded to a Moldovan request for assistance. The U.S. purchased and secured 14 nuclear-capable MiG–29Cs from Moldova. These fighter aircraft were built by the former Soviet Union to launch nuclear weapons. Moldova expressed concern that these aircraft were unsecure due to the lack of funds and equipment necessary to ensure they were not stolen or smuggled out of the country. Specifically, emissaries from Iran had shown great interest and had attempted to acquire the aircraft. These planes were not destroyed. They were disassembled and shipped to Wright Patterson Air Force Base because they can be used by American experts for research purposes.

Moldova has made small, but important, troop contributions in Iraq. These contributions include significant demining capabilities and contingents of combat troops. I am pleased that the United States remains prepared to assist in weapons and ammunition disposal and force relocation assistance to help deal with the costs of military realignments in Moldova and to assist with military downsizing and reforms.

One of the areas where we can deepen U.S.-Moldovan relations is bilateral trade. In light of its adherence to freedom of emigration requirements, compliance with threat reduction and cooperation in the global war on terrorism, the products of Moldova should not be subject to the sanctions of Jackson-Vanik. The U.S. must remain committed and engaged in assisting Moldova in pursuing economic and development reforms. The government in Chisinau still has important work to do in these critical areas. The support and encouragement of the U.S. and the international community will be key to encouraging the Government of Moldova to take the necessary steps to initiate reform. The permanent waiver of Jackson-Vanik and establishment of permanent normal trade relations will be the foundation on which further progress in a burgeoning economic and energy partnership can be made.

I am hopeful that my colleagues will join me in supporting this important legislation. It is essential that we act promptly to bolster this important relationship and promote stability in this region.

SUBMITTED RESOLUTIONS

SENATE RESOLUTION 22—RECOGNIZING THE GOALS OF CATHOLIC SCHOOLS WEEK AND HONORING THE VALUABLE CONTRIBUTIONS OF CATHOLIC SCHOOLS IN THE UNITED STATES

Mr. VITTER (for himself and Ms. LANDRIEU) submitted the following resolution; which was considered and agreed to:

S. RES. 22

Whereas Catholic schools in the United States have received international acclaim for academic excellence while providing students with lessons that extend far beyond the classroom;

Whereas Catholic schools present a broad curriculum that emphasizes the lifelong development of moral, intellectual, physical, and social values in the young people of the United States;

Whereas Catholic schools in the United States today educate 2,270,913 students and maintain a student-to-teacher ratio of 14 to 1;

Whereas the faculty members of Catholic schools teach a highly diverse body of students;

Whereas the graduation rate for all Catholic school students is 95 percent;

Whereas 83 percent of Catholic high school graduates go on to college;

Whereas Catholic schools produce students strongly dedicated to their faith, values, families, and communities by providing an intellectually stimulating environment rich in spiritual character and moral development; and

Whereas in the 1972 pastoral message concerning Catholic education, the National Conference of Catholic Bishops stated, ''Education is one of the most important ways by which the Church fulfills its commitment to the dignity of the person and building of community. Community is central to education ministry, both as a necessary condition and an ardently desired goal. The educational efforts of the Church, therefore, must be directed to forming persons-in-community; for the education of the individual Christian is important not only to his solitary destiny, but also the destinies of the many communities in which he lives.'': Now, therefore, be it

Resolved, That the Senate—

(1) recognizes the goals of Catholic Schools Week, an event cosponsored by the National Catholic Educational Association and the United States Conference of Catholic Bishops that recognizes the vital contributions of thousands of Catholic elementary and secondary schools in the United States; and

(2) commends Catholic schools, students, parents, and teachers across the United States for their ongoing contributions to education, and for the vital role they play in promoting and ensuring a brighter, stronger future for the United States.

SENATE RESOLUTION 23—HONORING THE LIFE OF ANDREW WYETH

Mr. CASEY (for himself, Mr. SPECTER, Ms. SNOWE, and Ms. COLLINS) submitted the following resolution; which was considered and agreed to:

S. RES. 23

Whereas Andrew Wyeth was one of the most popular American artists of the twentieth century, whose paintings presented to the world his impressions of rural American landscapes and lives;

Whereas Andrew Wyeth was born in Chadds Ford, Pennsylvania on July 12, 1917, where he spent much of his life and where today stands the Brandywine River Museum, a museum dedicated to the works of the Wyeth family;

Whereas Andrew Wyeth died the morning of January 16, 2009, at the age of 91, in his home in Chadds Ford, Pennsylvania;

Whereas it is the intent of the Senate to recognize and pay tribute to the life of Andrew Wyeth, his passion for painting, his contribution to the world of art, and his deep understanding of the human condition;

Whereas Andrew Wyeth was born the son of famed illustrator N.C. Wyeth and grew up surrounded by artists in an environment that encouraged imagination and free-thinking;

Whereas Andrew Wyeth became an icon who focused his work on family and friends in Chadds Ford and in coastal Maine, where he spent his summers and where he met Christina Olson, the subject of his famed painting 'Christina's World';

Whereas Andrew Wyeth's paintings were immensely popular among the public but sometimes disparaged by critics for their lack of color and bleak landscapes portraying isolation and alienation;

Whereas Andrew Wyeth's works could be controversial, as they sparked dialogue and disagreement in the art world concerning the natures of realism and modernism;

Whereas Andrew Wyeth was immensely patriotic and an independent thinker who broke with many of his peers on the issues of the day;

Whereas Andrew Wyeth was a beloved figure in Chadds Ford and had his own seat at the corner table of the Chadds Ford Inn, where reproductions of his art line the walls;

Whereas Andrew Wyeth received the Presidential Medal of Freedom in 1963 and the Congressional Gold Medal of Honor in 1988;

Whereas Andrew Wyeth let it be known that he lived to paint and never lost his simplicity and caring for people despite his immense fame and successful career; and

Whereas the passing of Andrew Wyeth is a great loss to the world of art, and his life should be honored with highest praise and appreciation for his paintings which remain with us although he is gone: Now, therefore, be it

Resolved, That the Senate—

(1) recognizes Andrew Wyeth as a treasure of the United States and one of the most popular artists of the twentieth century; and

(2) recognizes the outstanding contributions of Andrew Wyeth to the art world and to the community of Chadds Ford, Pennsylvania.

AMENDMENTS SUBMITTED AND PROPOSED

SA 39. Mr. REID (for Mr. BAUCUS) proposed an amendment to the bill H.R. 2, to amend title XXI of the Social Security Act to extend and improve the Children's Health Insurance Program, and for other purposes.

SA 40. Mr. MCCONNELL (for himself, Mr. KYL, Mr. VITTER, Mr. CHAMBLISS, Mr. BUNNING, Mr. GREGG, Mr. COBURN, Mr. BURR, Mr. ISAKSON, Mr. GRAHAM, Mr. INHOFE, Mr. CORNYN, Mr. BROWNBACK, Mr. COCHRAN, Mr. ENSIGN, Mr. THUNE, Mr. DEMINT, Mr. BENNETT, Mr. BARRASSO, Mr. ENZI, and Mr. WICKER) submitted an amendment intended to be proposed by him to the bill H.R. 2, supra.

SA 41. Mr. GRASSLEY (for himself, Mr. HATCH, Mr. ROBERTS, Mr. VITTER, and Mr. CHAMBLISS) submitted an amendment intended to be proposed by him to the bill H.R. 2, supra.

SA 42. Mr. DEMINT submitted an amendment intended to be proposed by him to the bill H.R. 2, supra; which was ordered to lie on the table.

SA 43. Mr. DEMINT submitted an amendment intended to be proposed to amendment SA 39 proposed by Mr. REID (for Mr. BAUCUS) to the bill H.R. 2, supra.

SA 44. Mr. DEMINT (for himself and Mr. VITTER) submitted an amendment intended to be proposed by him to the bill H.R. 2, supra; which was ordered to lie on the table.

SA 45. Mr. HATCH (for himself, Mr. GRASSLEY, and Mr. WICKER) proposed an amendment to amendment SA 39 proposed by Mr. REID (for Mr. BAUCUS) to the bill H.R. 2, supra.

SA 46. Mr. KYL submitted an amendment intended to be proposed by him to the bill H.R. 2, supra; which was ordered to lie on the table.

SA 47. Mr. COBURN (for himself and Mr. THUNE) submitted an amendment intended to be proposed by him to the bill H.R. 2, supra; which was ordered to lie on the table.

SA 48. Mr. COBURN submitted an amendment intended to be proposed by him to the bill H.R. 2, supra; which was ordered to lie on the table.

SA 49. Mr. COBURN submitted an amendment intended to be proposed by him to the bill H.R. 2, supra; which was ordered to lie on the table.

SA 50. Mr. COBURN submitted an amendment intended to be proposed by him to the bill H.R. 2, supra; which was ordered to lie on the table.

SA 51. Mr. GRASSLEY submitted an amendment intended to be proposed by him to the bill H.R. 2, supra; which was ordered to lie on the table.

SA 52. Mr. GRASSLEY submitted an amendment intended to be proposed by him to the bill H.R. 2, supra; which was ordered to lie on the table.

SA 53. Mr. GRASSLEY submitted an amendment intended to be proposed by him to the bill H.R. 2, supra; which was ordered to lie on the table.

SA 54. Mr. GRASSLEY submitted an amendment intended to be proposed by him to the bill H.R. 2, supra; which was ordered to lie on the table.

SA 55. Mr. GRASSLEY submitted an amendment intended to be proposed by him to the bill H.R. 2, supra; which was ordered to lie on the table.

SA 56. Mr. GRASSLEY submitted an amendment intended to be proposed by him to the bill H.R. 2, supra; which was ordered to lie on the table.

SA 57. Mr. GRASSLEY submitted an amendment intended to be proposed by him to the bill H.R. 2, supra; which was ordered to lie on the table.

SA 58. Mr. WEBB (for himself, Mrs. HAGAN, and Mr. SANDERS) submitted an amendment intended to be proposed by him to the bill H.R. 2, supra; which was ordered to lie on the table.

SA 59. Mr. VITTER submitted an amendment intended to be proposed by him to the bill H.R. 2, supra; which was ordered to lie on the table.

SA 60. Mr. WICKER (for himself and Mr. COCHRAN) submitted an amendment intended to be proposed by him to the bill H.R. 2, supra; which was ordered to lie on the table.

SA 61. Mr. BINGAMAN submitted an amendment intended to be proposed by him to the bill H.R. 2, supra; which was ordered to lie on the table.

SA 62. Mr. BINGAMAN submitted an amendment intended to be proposed by him to the bill H.R. 2, supra; which was ordered to lie on the table.

SA 63. Mr. BINGAMAN submitted an amendment intended to be proposed by him to the bill H.R. 2, supra; which was ordered to lie on the table.

SA 64. Mr. BINGAMAN submitted an amendment intended to be proposed by him to the bill H.R. 2, supra; which was ordered to lie on the table.

SA 65. Mr. MARTINEZ (for himself, Mr. VITTER, Mr. WICKER, Mr. BUNNING, Mr. ENZI, Mr. COBURN, Mr. JOHANNS, Mr. BROWNBACK, Mr. INHOFE, Mr. CHAMBLISS, and Mr. DEMINT) submitted an amendment intended to be proposed by him to the bill H.R. 2, supra; which was ordered to lie on the table.

SA 66. Mr. CORNYN submitted an amendment intended to be proposed by him to the bill H.R. 2, supra; which was ordered to lie on the table.

SA 67. Mr. CORNYN submitted an amendment intended to be proposed by him to the bill H.R. 2, supra; which was ordered to lie on the table.

SA 68. Mr. GRASSLEY submitted an amendment intended to be proposed by him to the bill H.R. 2, supra; which was ordered to lie on the table.

SA 69. Mr. GRASSLEY submitted an amendment intended to be proposed by him to the bill H.R. 2, supra; which was ordered to lie on the table.

SA 70. Mr. GRASSLEY submitted an amendment intended to be proposed by him to the bill H.R. 2, supra; which was ordered to lie on the table.

SA 71. Mr. GRASSLEY submitted an amendment intended to be proposed by him to the bill H.R. 2, supra; which was ordered to lie on the table.

SA 72. Mr. GRASSLEY submitted an amendment intended to be proposed by him to the bill H.R. 2, supra; which was ordered to lie on the table.

SA 73. Mr. GRASSLEY submitted an amendment intended to be proposed by him to the bill H.R. 2, supra; which was ordered to lie on the table.

TEXT OF AMENDMENTS

SA 39. Mr. REID (for Mr. BAUCUS) proposed an amendment to the bill H.R. 2, to amend title XXI of the Social Security Act to extend and improve the Children's Health Insurance Program, and for other purposes; as follows:

Strike all after the enacting clause and insert the following:

SECTION 1. SHORT TITLE; AMENDMENTS TO SOCIAL SECURITY ACT; REFERENCES; TABLE OF CONTENTS.

(a) SHORT TITLE.—This Act may be cited as the ''Children's Health Insurance Program Reauthorization Act of 2009''.

(b) AMENDMENTS TO SOCIAL SECURITY ACT.—Except as otherwise specifically provided, whenever in this Act an amendment is expressed in terms of an amendment to or repeal of a section or other provision, the reference shall be considered to be made to that section or other provision of the Social Security Act.

(c) REFERENCES TO CHIP; MEDICAID; SECRETARY.—In this Act:

(1) CHIP.—The term ''CHIP'' means the State Children's Health Insurance Program established under title XXI of the Social Security Act (42 U.S.C. 1397aa et seq.).

(2) MEDICAID.—The term ''Medicaid'' means the program for medical assistance established under title XIX of the Social Security Act (42 U.S.C. 1396 et seq.).

(3) SECRETARY.—The term ''Secretary'' means the Secretary of Health and Human Services.

(d) TABLE OF CONTENTS.—The table of contents of this Act is as follows:

Sec. 1. Short title; amendments to Social Security Act; references; table of contents.
Sec. 2. Purpose.
Sec. 3. General effective date; exception for State legislation; contingent effective date; reliance on law.

TITLE I—FINANCING

Subtitle A—Funding

Sec. 101. Extension of CHIP.
Sec. 102. Allotments for States and territories for fiscal years 2009 through 2013.
Sec. 103. Child Enrollment Contingency Fund.
Sec. 104. CHIP performance bonus payment to offset additional enrollment costs resulting from enrollment and retention efforts.
Sec. 105. Two-year initial availability of CHIP allotments.
Sec. 106. Redistribution of unused allotments.
Sec. 107. Option for qualifying States to receive the enhanced portion of the CHIP matching rate for Medicaid coverage of certain children.
Sec. 108. One-time appropriation.
Sec. 109. Improving funding for the territories under CHIP and Medicaid.

Subtitle B—Focus on Low-Income Children and Pregnant Women

Sec. 111. State option to cover low-income pregnant women under CHIP through a State plan amendment.
Sec. 112. Phase-out of coverage for nonpregnant childless adults under CHIP; conditions for coverage of parents.
Sec. 113. Elimination of counting Medicaid child presumptive eligibility costs against title XXI allotment.

Sec. 114. Limitation on matching rate for States that propose to cover children with effective family income that exceeds 300 percent of the poverty line.
Sec. 115. State authority under Medicaid.
TITLE II—OUTREACH AND ENROLLMENT
Subtitle A—Outreach and Enrollment Activities
Sec. 201. Grants and enhanced administrative funding for outreach and enrollment.
Sec. 202. Increased outreach and enrollment of Indians.
Sec. 203. State option to rely on findings from an Express Lane agency to conduct simplified eligibility determinations.
Subtitle B—Reducing Barriers to Enrollment
Sec. 211. Verification of declaration of citizenship or nationality for purposes of eligibility for Medicaid and CHIP.
Sec. 212. Reducing administrative barriers to enrollment.
Sec. 213. Model of Interstate coordinated enrollment and coverage process.
Sec. 214. Permitting States to ensure coverage without a 5-year delay of certain children and pregnant women under the Medicaid program and CHIP.
TITLE III—REDUCING BARRIERS TO PROVIDING PREMIUM ASSISTANCE
Subtitle A—Additional State Option for Providing Premium Assistance
Sec. 301. Additional State option for providing premium assistance.
Sec. 302. Outreach, education, and enrollment assistance.
Subtitle B—Coordinating Premium Assistance With Private Coverage
Sec. 311. Special enrollment period under group health plans in case of termination of Medicaid or CHIP coverage or eligibility for assistance in purchase of employment-based coverage; coordination of coverage.
TITLE IV—STRENGTHENING QUALITY OF CARE AND HEALTH OUTCOMES
Sec. 401. Child health quality improvement activities for children enrolled in Medicaid or CHIP.
Sec. 402. Improved availability of public information regarding enrollment of children in CHIP and Medicaid.
Sec. 403. Application of certain managed care quality safeguards to CHIP.
TITLE V—IMPROVING ACCESS TO BENEFITS
Sec. 501. Dental benefits.
Sec. 502. Mental health parity in CHIP plans.
Sec. 503. Application of prospective payment system for services provided by Federally-qualified health centers and rural health clinics.
Sec. 504. Premium grace period.
Sec. 505. Clarification of coverage of services provided through school-based health centers.
Sec. 506. Medicaid and CHIP Payment and Access Commission.
TITLE VI—PROGRAM INTEGRITY AND OTHER MISCELLANEOUS PROVISIONS
Subtitle A—Program Integrity and Data Collection
Sec. 601. Payment error rate measurement (''PERM'').
Sec. 602. Improving data collection.
Sec. 603. Updated Federal evaluation of CHIP.
Sec. 604. Access to records for IG and GAO audits and evaluations.
Sec. 605. No Federal funding for illegal aliens; disallowance for unauthorized expenditures.
Subtitle B—Miscellaneous Health Provisions
Sec. 611. Deficit Reduction Act technical corrections.
Sec. 612. References to title XXI.
Sec. 613. Prohibiting initiation of new health opportunity account demonstration programs.
Sec. 614. Adjustment in computation of Medicaid FMAP to disregard an extraordinary employer pension contribution.
Sec. 615. Clarification treatment of regional medical center.
Sec. 616. Extension of Medicaid DSH allotments for Tennessee and Hawaii.
Sec. 617. GAO report on Medicaid managed care payment rates.
Subtitle C—Other Provisions
Sec. 621. Outreach regarding health insurance options available to children.
Sec. 622. Sense of the Senate regarding access to affordable and meaningful health insurance coverage.
TITLE VII—REVENUE PROVISIONS
Sec. 701. Increase in excise tax rate on tobacco products.
Sec. 702. Administrative improvements.
Sec. 703. Treasury study concerning magnitude of tobacco smuggling in the United States.
Sec. 704. Time for payment of corporate estimated taxes.

SEC. 2. PURPOSE.

It is the purpose of this Act to provide dependable and stable funding for children's health insurance under titles XXI and XIX of the Social Security Act in order to enroll all six million uninsured children who are eligible, but not enrolled, for coverage today through such titles.

SEC. 3. GENERAL EFFECTIVE DATE; EXCEPTION FOR STATE LEGISLATION; CONTINGENT EFFECTIVE DATE; RELIANCE ON LAW.

(a) GENERAL EFFECTIVE DATE.—Unless otherwise provided in this Act, subject to subsections (b) through (d), this Act (and the amendments made by this Act) shall take effect on April 1, 2009, and shall apply to child health assistance and medical assistance provided on or after that date.

(b) EXCEPTION FOR STATE LEGISLATION.—In the case of a State plan under title XIX or State child health plan under XXI of the Social Security Act, which the Secretary of Health and Human Services determines requires State legislation in order for the respective plan to meet one or more additional requirements imposed by amendments made by this Act, the respective plan shall not be regarded as failing to comply with the requirements of such title solely on the basis of its failure to meet such an additional requirement before the first day of the first calendar quarter beginning after the close of the first regular session of the State legislature that begins after the date of enactment of this Act. For purposes of the previous sentence, in the case of a State that has a 2-year legislative session, each year of the session shall be considered to be a separate regular session of the State legislature.

(c) COORDINATION OF CHIP FUNDING FOR FISCAL YEAR 2009.—Notwithstanding any other provision of law, insofar as funds have been appropriated under section 2104(a)(11), 2104(k), or 2104(l) of the Social Security Act, as amended by section 201 of Public Law 110–173, to provide allotments to States under CHIP for fiscal year 2009—

(1) any amounts that are so appropriated that are not so allotted and obligated before April 1, 2009 are rescinded; and

(2) any amount provided for CHIP allotments to a State under this Act (and the amendments made by this Act) for such fiscal year shall be reduced by the amount of such appropriations so allotted and obligated before such date.

(d) RELIANCE ON LAW.—With respect to amendments made by this Act (other than title VII) that become effective as of a date—

(1) such amendments are effective as of such date whether or not regulations implementing such amendments have been issued; and

(2) Federal financial participation for medical assistance or child health assistance furnished under title XIX or XXI, respectively, of the Social Security Act on or after such date by a State in good faith reliance on such amendments before the date of promulgation of final regulations, if any, to carry out such amendments (or before the date of guidance, if any, regarding the implementation of such amendments) shall not be denied on the basis of the State's failure to comply with such regulations or guidance.

TITLE I—FINANCING

Subtitle A—Funding

SEC. 101. EXTENSION OF CHIP.

Section 2104(a) (42 U.S.C. 1397dd(a)) is amended—

(1) in paragraph (10), by striking ''and'' at the end;

(2) by amending paragraph (11), by striking ''each of fiscal years 2008 and 2009'' and inserting ''fiscal year 2008''; and

(3) by adding at the end the following new paragraphs:

''(12) for fiscal year 2009, $10,562,000,000;

''(13) for fiscal year 2010, $12,520,000,000;

''(14) for fiscal year 2011, $13,459,000,000;

''(15) for fiscal year 2012, $14,982,000,000; and

''(16) for fiscal year 2013, for purposes of making 2 semi-annual allotments—

''(A) $2,850,000,000 for the period beginning on October 1, 2012, and ending on March 31, 2013, and

''(B) $2,850,000,000 for the period beginning on April 1, 2013, and ending on September 30, 2013.''.

SEC. 102. ALLOTMENTS FOR STATES AND TERRITORIES FOR FISCAL YEARS 2009 THROUGH 2013.

Section 2104 (42 U.S.C. 1397dd) is amended—

(1) in subsection (b)(1), by striking ''subsection (d)'' and inserting ''subsections (d) and (m)'';

(2) in subsection (c)(1), by striking ''subsection (d)'' and inserting ''subsections (d) and (m)(4)''; and

(3) by adding at the end the following new subsection:

''(m) ALLOTMENTS FOR FISCAL YEARS 2009 THROUGH 2013.—

''(1) FOR FISCAL YEAR 2009.—

''(A) FOR THE 50 STATES AND THE DISTRICT OF COLUMBIA.—Subject to the succeeding provisions of this paragraph and paragraph (4), the Secretary shall allot for fiscal year 2009 from the amount made available under subsection (a)(12), to each of the 50 States and the District of Columbia 110 percent of the highest of the following amounts for such State or District:

''(i) The total Federal payments to the State under this title for fiscal year 2008, multiplied by the allotment increase factor determined under paragraph (5) for fiscal year 2009.

''(ii) The amount allotted to the State for fiscal year 2008 under subsection (b), multiplied by the allotment increase factor determined under paragraph (5) for fiscal year 2009.

''(iii) The projected total Federal payments to the State under this title for fiscal year 2009, as determined on the basis of the February 2009 projections certified by the State to the Secretary by not later than March 31, 2009.

''(B) FOR THE COMMONWEALTHS AND TERRITORIES.—Subject to the succeeding provisions of this paragraph and paragraph (4), the Secretary shall allot for fiscal year 2009 from the amount made available under subsection (a)(12) to each of the commonwealths and territories described in subsection (c)(3) an amount equal to the highest amount of Federal payments to the commonwealth or territory under this title for any fiscal year occurring during the period of fiscal years 1999 through 2008, multiplied by the allotment increase factor determined under paragraph (5) for fiscal year 2009, except that subparagraph (B) thereof shall be applied by substituting 'the United States' for 'the State'.

''(C) ADJUSTMENT FOR QUALIFYING STATES.—In the case of a qualifying State described in paragraph (2) of section 2105(g), the Secretary shall permit the State to submit a revised projection described in subparagraph (A)(iii) in order to take into account changes in such projections attributable to the application of paragraph (4) of such section.

''(2) FOR FISCAL YEARS 2010 THROUGH 2012.—

''(A) IN GENERAL.—Subject to paragraphs (4) and (6), from the amount made available under paragraphs (13) through (15) of subsection (a) for each of fiscal years 2010 through 2012, respectively, the Secretary shall compute a State allotment for each State (including the District of Columbia and each commonwealth and territory) for each such fiscal year as follows:

''(i) GROWTH FACTOR UPDATE FOR FISCAL YEAR 2010.—For fiscal year 2010, the allotment of the State is equal to the sum of—

''(I) the amount of the State allotment under paragraph (1) for fiscal year 2009; and

''(II) the amount of any payments made to the State under subsection (k), (l), or (n) for fiscal year 2009,

multiplied by the allotment increase factor under paragraph (5) for fiscal year 2010.

''(ii) REBASING IN FISCAL YEAR 2011.—For fiscal year 2011, the allotment of the State is equal to the Federal payments to the State that are attributable to (and countable towards) the total amount of allotments available under this section to the State in fiscal year 2010 (including payments made to the State under subsection (n) for fiscal year 2010 as well as amounts redistributed to the State in fiscal year 2010), multiplied by the allotment increase factor under paragraph (5) for fiscal year 2011.

''(iii) GROWTH FACTOR UPDATE FOR FISCAL YEAR 2012.—For fiscal year 2012, the allotment of the State is equal to the sum of—

''(I) the amount of the State allotment under clause (ii) for fiscal year 2011; and

''(II) the amount of any payments made to the State under subsection (n) for fiscal year 2011,

multiplied by the allotment increase factor under paragraph (5) for fiscal year 2012.

''(3) FOR FISCAL YEAR 2013.—

''(A) FIRST HALF.—Subject to paragraphs (4) and (6), from the amount made available under subparagraph (A) of paragraph (16) of subsection (a) for the semi-annual period described in such paragraph, increased by the amount of the appropriation for such period under section 108 of the Children's Health Insurance Program Reauthorization Act of 2009, the Secretary shall compute a State allotment for each State (including the District of Columbia and each commonwealth and territory) for such semi-annual period in an amount equal to the first half ratio (described in subparagraph (D)) of the amount described in subparagraph (C).

''(B) SECOND HALF.—Subject to paragraphs (4) and (6), from the amount made available under subparagraph (B) of paragraph (16) of subsection (a) for the semi-annual period described in such paragraph, the Secretary shall compute a State allotment for each State (including the District of Columbia and each commonwealth and territory) for such semi-annual period in an amount equal to the amount made available under such subparagraph, multiplied by the ratio of—

''(i) the amount of the allotment to such State under subparagraph (A); to

''(ii) the total of the amount of all of the allotments made available under such subparagraph.

''(C) FULL YEAR AMOUNT BASED ON REBASED AMOUNT.—The amount described in this subparagraph for a State is equal to the Federal payments to the State that are attributable to (and countable towards) the total amount of allotments available under this section to the State in fiscal year 2012 (including payments made to the State under subsection (n) for fiscal year 2012 as well as amounts redistributed to the State in fiscal year 2012), multiplied by the allotment increase factor under paragraph (5) for fiscal year 2013.

''(D) FIRST HALF RATIO.—The first half ratio described in this subparagraph is the ratio of—

''(i) the sum of—

''(I) the amount made available under subsection (a)(16)(A); and

''(II) the amount of the appropriation for such period under section 108 of the Children's Health Insurance Program Reauthorization Act of 2009; to

''(ii) the sum of the—

''(I) amount described in clause (i); and

''(II) the amount made available under subsection (a)(16)(B).

''(4) PRORATION RULE.—If, after the application of this subsection without regard to this paragraph, the sum of the allotments determined under paragraph (1), (2), or (3) for a fiscal year (or, in the case of fiscal year 2013, for a semi-annual period in such fiscal year) exceeds the amount available under subsection (a) for such fiscal year or period, the Secretary shall reduce each allotment for any State under such paragraph for such fiscal year or period on a proportional basis.

''(5) ALLOTMENT INCREASE FACTOR.—The allotment increase factor under this paragraph for a fiscal year is equal to the product of the following:

''(A) PER CAPITA HEALTH CARE GROWTH FACTOR.—1 plus the percentage increase in the projected per capita amount of National Health Expenditures from the calendar year in which the previous fiscal year ends to the calendar year in which the fiscal year involved ends, as most recently published by the Secretary before the beginning of the fiscal year.

''(B) CHILD POPULATION GROWTH FACTOR.—1 plus the percentage increase (if any) in the population of children in the State from July 1 in the previous fiscal year to July 1 in the fiscal year involved, as determined by the Secretary based on the most recent published estimates of the Bureau of the Census before the beginning of the fiscal year involved, plus 1 percentage point.

''(6) INCREASE IN ALLOTMENT TO ACCOUNT FOR APPROVED PROGRAM EXPANSIONS.—In the case of one of the 50 States or the District of Columbia that—

''(A) has submitted to the Secretary, and has approved by the Secretary, a State plan amendment or waiver request relating to an expansion of eligibility for children or benefits under this title that becomes effective for a fiscal year (beginning with fiscal year 2010 and ending with fiscal year 2013); and

''(B) has submitted to the Secretary, before the August 31 preceding the beginning of the fiscal year, a request for an expansion allotment adjustment under this paragraph for such fiscal year that specifies—

''(i) the additional expenditures that are attributable to the eligibility or benefit expansion provided under the amendment or waiver described in subparagraph (A), as certified by the State and submitted to the Secretary by not later than August 31 preceding the beginning of the fiscal year; and

''(ii) the extent to which such additional expenditures are projected to exceed the allotment of the State or District for the year,

subject to paragraph (4), the amount of the allotment of the State or District under this subsection for such fiscal year shall be increased by the excess amount described in subparagraph (B)(i). A State or District may only obtain an increase under this paragraph for an allotment for fiscal year 2010 or fiscal year 2012.

''(7) AVAILABILITY OF AMOUNTS FOR SEMI-ANNUAL PERIODS IN FISCAL YEAR 2013.—Each semi-annual allotment made under paragraph (3) for a period in fiscal year 2013 shall remain available for expenditure under this title for periods after the end of such fiscal year in the same manner as if the allotment had been made available for the entire fiscal year.''.

SEC. 103. CHILD ENROLLMENT CONTINGENCY FUND.

Section 2104 (42 U.S.C. 1397dd), as amended by section 102, is amended by adding at the end the following new subsection:

''(n) CHILD ENROLLMENT CONTINGENCY FUND.—

''(1) ESTABLISHMENT.—There is hereby established in the Treasury of the United States a fund which shall be known as the 'Child Enrollment Contingency Fund' (in this subsection referred to as the 'Fund'). Amounts in the Fund shall be available without further appropriations for payments under this subsection.

''(2) DEPOSITS INTO FUND.—

''(A) INITIAL AND SUBSEQUENT APPROPRIATIONS.—Subject to subparagraphs (B) and (D), out of any money in the Treasury of the United States not otherwise appropriated, there are appropriated to the Fund—

''(i) for fiscal year 2009, an amount equal to 20 percent of the amount made available under paragraph (12) of subsection (a) for the fiscal year; and

''(ii) for each of fiscal years 2010 through 2012 (and for each of the semi-annual allotment periods for fiscal year 2013), such sums as are necessary for making payments to eligible States for such fiscal year or period, but not in excess of the aggregate cap described in subparagraph (B).

''(B) AGGREGATE CAP.—The total amount available for payment from the Fund for each of fiscal years 2010 through 2012 (and for each of the semi-annual allotment periods for fiscal year 2013), taking into account deposits made under subparagraph (C), shall not exceed 20 percent of the amount made available under subsection (a) for the fiscal year or period.

''(C) INVESTMENT OF FUND.—The Secretary of the Treasury shall invest, in interest bearing securities of the United States, such currently available portions of the Fund as are not immediately required for payments from the Fund. The income derived from these investments constitutes a part of the Fund.

''(D) AVAILABILITY OF EXCESS FUNDS FOR PERFORMANCE BONUSES.—Any amounts in excess of the aggregate cap described in subparagraph (B) for a fiscal year or period shall be made available for purposes of carrying out section 2105(a)(3) for any succeeding fiscal year and the Secretary of the Treasury shall reduce the amount in the Fund by the amount so made available.

''(3) CHILD ENROLLMENT CONTINGENCY FUND PAYMENTS.—

''(A) IN GENERAL.—If a State's expenditures under this title in fiscal year 2009, fiscal year 2010, fiscal year 2011, fiscal year 2012, or a semi-annual allotment period for fiscal year 2013, exceed the total amount of allotments available under this section to the State in the fiscal year or period (determined without regard to any redistribution it receives under subsection (f) that is available for expenditure during such fiscal year or period, but including any carryover from a previous fiscal year) and if the average monthly unduplicated number of children enrolled under the State plan under this title (including children receiving health care coverage through funds under this title pursuant to a waiver under section 1115) during such fiscal year or period exceeds its target average number of such enrollees (as determined under subparagraph (B)) for that fiscal year or period, subject to subparagraph (D), the Secretary shall pay to the State from the Fund an amount equal to the product of—

''(i) the amount by which such average monthly caseload exceeds such target number of enrollees; and

''(ii) the projected per capita expenditures under the State child health plan (as determined under subparagraph (C) for the fiscal year), multiplied by the enhanced FMAP (as defined in section 2105(b)) for the State and fiscal year involved (or in which the period occurs).

''(B) TARGET AVERAGE NUMBER OF CHILD ENROLLEES.—In this paragraph, the target average number of child enrollees for a State—

''(i) for fiscal year 2009 is equal to the monthly average unduplicated number of children enrolled in the State child health plan under this title (including such children receiving health care coverage through funds under this title pursuant to a waiver under section 1115) during fiscal year 2008 increased by the population growth for children in that State for the year ending on June 30, 2007 (as estimated by the Bureau of the Census) plus 1 percentage point; or

''(ii) for a subsequent fiscal year (or semi-annual period occurring in a fiscal year) is equal to the target average number of child enrollees for the State for the previous fiscal year increased by the child population growth factor described in subsection (m)(5)(B) for the State for the prior fiscal year.

''(C) PROJECTED PER CAPITA EXPENDITURES.—For purposes of subparagraph (A)(ii), the projected per capita expenditures under a State child health plan—

''(i) for fiscal year 2009 is equal to the average per capita expenditures (including both State and Federal financial participation) under such plan for the targeted low-income children counted in the average monthly caseload for purposes of this paragraph during fiscal year 2008, increased by the annual percentage increase in the projected per capita amount of National Health Expenditures (as estimated by the Secretary) for 2009; or

''(ii) for a subsequent fiscal year (or semi-annual period occurring in a fiscal year) is equal to the projected per capita expenditures under such plan for the previous fiscal year (as determined under clause (i) or this clause) increased by the annual percentage increase in the projected per capita amount of National Health Expenditures (as estimated by the Secretary) for the year in which such subsequent fiscal year ends.

''(D) PRORATION RULE.—If the amounts available for payment from the Fund for a fiscal year or period are less than the total amount of payments determined under subparagraph (A) for the fiscal year or period, the amount to be paid under such subparagraph to each eligible State shall be reduced proportionally.

''(E) TIMELY PAYMENT; RECONCILIATION.—Payment under this paragraph for a fiscal year or period shall be made before the end of the fiscal year or period based upon the most recent data for expenditures and enrollment and the provisions of subsection (e) of section 2105 shall apply to payments under this subsection in the same manner as they apply to payments under such section.

''(F) CONTINUED REPORTING.—For purposes of this paragraph and subsection (f), the State shall submit to the Secretary the State's projected Federal expenditures, even if the amount of such expenditures exceeds the total amount of allotments available to the State in such fiscal year or period.

''(G) APPLICATION TO COMMONWEALTHS AND TERRITORIES.—No payment shall be made under this paragraph to a commonwealth or territory described in subsection (c)(3) until such time as the Secretary determines that there are in effect methods, satisfactory to the Secretary, for the collection and reporting of reliable data regarding the enrollment of children described in subparagraphs (A) and (B) in order to accurately determine the commonwealth's or territory's eligibility for, and amount of payment, under this paragraph.''.

SEC. 104. CHIP PERFORMANCE BONUS PAYMENT TO OFFSET ADDITIONAL ENROLLMENT COSTS RESULTING FROM ENROLLMENT AND RETENTION EFFORTS.

Section 2105(a) (42 U.S.C. 1397ee(a)) is amended by adding at the end the following new paragraphs:

''(3) PERFORMANCE BONUS PAYMENT TO OFFSET ADDITIONAL MEDICAID AND CHIP CHILD ENROLLMENT COSTS RESULTING FROM ENROLLMENT AND RETENTION EFFORTS.—

''(A) IN GENERAL.—In addition to the payments made under paragraph (1), for each fiscal year (beginning with fiscal year 2009 and ending with fiscal year 2013), the Secretary shall pay from amounts made available under subparagraph (E), to each State that meets the condition under paragraph (4) for the fiscal year, an amount equal to the amount described in subparagraph (B) for the State and fiscal year. The payment under this paragraph shall be made, to a State for a fiscal year, as a single payment not later than the last day of the first calendar quarter of the following fiscal year.

''(B) AMOUNT FOR ABOVE BASELINE MEDICAID CHILD ENROLLMENT COSTS.—Subject to subparagraph (E), the amount described in this subparagraph for a State for a fiscal year is equal to the sum of the following amounts:

''(i) FIRST TIER ABOVE BASELINE MEDICAID ENROLLEES.—An amount equal to the number of first tier above baseline child enrollees (as determined under subparagraph (C)(i)) under title XIX for the State and fiscal year, multiplied by 15 percent of the projected per capita State Medicaid expenditures (as determined under subparagraph (D)) for the State and fiscal year under title XIX.

''(ii) SECOND TIER ABOVE BASELINE MEDICAID ENROLLEES.—An amount equal to the number of second tier above baseline child enrollees (as determined under subparagraph (C)(ii)) under title XIX for the State and fiscal year, multiplied by 62.5 percent of the projected per capita State Medicaid expenditures (as determined under subparagraph (D)) for the State and fiscal year under title XIX.

''(C) NUMBER OF FIRST AND SECOND TIER ABOVE BASELINE CHILD ENROLLEES; BASELINE NUMBER OF CHILD ENROLLEES.—For purposes of this paragraph:

''(i) FIRST TIER ABOVE BASELINE CHILD ENROLLEES.—The number of first tier above baseline child enrollees for a State for a fiscal year under title XIX is equal to the number (if any, as determined by the Secretary) by which—

''(I) the monthly average unduplicated number of qualifying children (as defined in subparagraph (F)) enrolled during the fiscal year under the State plan under title XIX, respectively; exceeds

''(II) the baseline number of enrollees described in clause (iii) for the State and fiscal year under title XIX, respectively;

but not to exceed 10 percent of the baseline number of enrollees described in subclause (II).

''(ii) SECOND TIER ABOVE BASELINE CHILD ENROLLEES.—The number of second tier above baseline child enrollees for a State for a fiscal year under title XIX is equal to the number (if any, as determined by the Secretary) by which—

''(I) the monthly average unduplicated number of qualifying children (as defined in subparagraph (F)) enrolled during the fiscal year under title XIX as described in clause (i)(I); exceeds

''(II) the sum of the baseline number of child enrollees described in clause (iii) for the State and fiscal year under title XIX, as described in clause (i)(II), and the maximum number of first tier above baseline child enrollees for the State and fiscal year under title XIX, as determined under clause (i).

''(iii) BASELINE NUMBER OF CHILD ENROLLEES.—Subject to subparagraph (H), the baseline number of child enrollees for a State under title XIX—

''(I) for fiscal year 2009 is equal to the monthly average unduplicated number of qualifying children enrolled in the State plan under title XIX during fiscal year 2007 increased by the population growth for children in that State from 2007 to 2008 (as estimated by the Bureau of the Census) plus 4 percentage points, and further increased by the population growth for children in that State from 2008 to 2009 (as estimated by the Bureau of the Census) plus 4 percentage points;

''(II) for each of fiscal years 2010, 2011, and 2012, is equal to the baseline number of child enrollees for the State for the previous fiscal year under title XIX, increased by the population growth for children in that State from the calendar year in which the respective fiscal year begins to the succeeding calendar year (as estimated by the Bureau of the Census) plus 3.5 percentage points;

''(III) for each of fiscal years 2013, 2014, and 2015, is equal to the baseline number of child enrollees for the State for the previous fiscal year under title XIX, increased by the population growth for children in that State from the calendar year in which the respective fiscal year begins to the succeeding calendar year (as estimated by the Bureau of the Census) plus 3 percentage points; and

''(IV) for a subsequent fiscal year is equal to the baseline number of child enrollees for the State for the previous fiscal year under title XIX, increased by the population growth for children in that State from the calendar year in which the fiscal year involved begins to the succeeding calendar year (as estimated by the Bureau of the Census) plus 2 percentage points.

''(D) PROJECTED PER CAPITA STATE MEDICAID EXPENDITURES.—For purposes of subparagraph (B), the projected per capita State Medicaid expenditures for a State and fiscal year under title XIX is equal to the average

per capita expenditures (including both State and Federal financial participation) for children under the State plan under such title, including under waivers but not including such children eligible for assistance by virtue of the receipt of benefits under title XVI, for the most recent fiscal year for which actual data are available (as determined by the Secretary), increased (for each subsequent fiscal year up to and including the fiscal year involved) by the annual percentage increase in per capita amount of National Health Expenditures (as estimated by the Secretary) for the calendar year in which the respective subsequent fiscal year ends and multiplied by a State matching percentage equal to 100 percent minus the Federal medical assistance percentage (as defined in section 1905(b)) for the fiscal year involved.

''(E) AMOUNTS AVAILABLE FOR PAYMENTS.—

''(i) INITIAL APPROPRIATION.—Out of any money in the Treasury not otherwise appropriated, there are appropriated $3,225,000,000 for fiscal year 2009 for making payments under this paragraph, to be available until expended.

''(ii) TRANSFERS.—Notwithstanding any other provision of this title, the following amounts shall also be available, without fiscal year limitation, for making payments under this paragraph:

''(I) UNOBLIGATED NATIONAL ALLOTMENT.—

''(aa) FISCAL YEARS 2009 THROUGH 2012.—As of December 31 of fiscal year 2009, and as of December 31 of each succeeding fiscal year through fiscal year 2012, the portion, if any, of the amount appropriated under subsection (a) for such fiscal year that is unobligated for allotment to a State under subsection (m) for such fiscal year or set aside under subsection (a)(3) or (b)(2) of section 2111 for such fiscal year.

''(bb) FIRST HALF OF FISCAL YEAR 2013.—As of December 31 of fiscal year 2013, the portion, if any, of the sum of the amounts appropriated under subsection (a)(16)(A) and under section 108 of the Children's Health Insurance Reauthorization Act of 2009 for the period beginning on October 1, 2012, and ending on March 31, 2013, that is unobligated for allotment to a State under subsection (m) for such fiscal year or set aside under subsection (b)(2) of section 2111 for such fiscal year.

''(cc) SECOND HALF OF FISCAL YEAR 2013.—As of June 30 of fiscal year 2013, the portion, if any, of the amount appropriated under subsection (a)(16)(B) for the period beginning on April 1, 2013, and ending on September 30, 2013, that is unobligated for allotment to a State under subsection (m) for such fiscal year or set aside under subsection (b)(2) of section 2111 for such fiscal year.

''(II) UNEXPENDED ALLOTMENTS NOT USED FOR REDISTRIBUTION.—As of November 15 of each of fiscal years 2010 through 2013, the total amount of allotments made to States under section 2104 for the second preceding fiscal year (third preceding fiscal year in the case of the fiscal year 2006, 2007, and 2008 allotments) that is not expended or redistributed under section 2104(f) during the period in which such allotments are available for obligation.

''(III) EXCESS CHILD ENROLLMENT CONTINGENCY FUNDS.—As of October 1 of each of fiscal years 2010 through 2013, any amount in excess of the aggregate cap applicable to the Child Enrollment Contingency Fund for the fiscal year under section 2104(n).

''(IV) UNEXPENDED TRANSITIONAL COVERAGE BLOCK GRANT FOR NONPREGNANT CHILDLESS ADULTS.—As of October 1, 2011, any amounts set aside under section 2111(a)(3) that are not expended by September 30, 2011.

''(iii) PROPORTIONAL REDUCTION.—If the sum of the amounts otherwise payable under this paragraph for a fiscal year exceeds the amount available for the fiscal year under this subparagraph, the amount to be paid under this paragraph to each State shall be reduced proportionally.

''(F) QUALIFYING CHILDREN DEFINED.—

''(i) IN GENERAL.—For purposes of this subsection, subject to clauses (ii) and (iii), the term 'qualifying children' means children who meet the eligibility criteria (including income, categorical eligibility, age, and immigration status criteria) in effect as of July 1, 2008, for enrollment under title XIX, taking into account criteria applied as of such date under title XIX pursuant to a waiver under section 1115.

''(ii) LIMITATION.—A child described in clause (i) who is provided medical assistance during a presumptive eligibility period under section 1920A shall be considered to be a 'qualifying child' only if the child is determined to be eligible for medical assistance under title XIX.

''(iii) EXCLUSION.—Such term does not include any children for whom the State has made an election to provide medical assistance under paragraph (4) of section 1903(v).

''(G) APPLICATION TO COMMONWEALTHS AND TERRITORIES.—The provisions of subparagraph (G) of section 2104(n)(3) shall apply with respect to payment under this paragraph in the same manner as such provisions apply to payment under such section.

''(H) APPLICATION TO STATES THAT IMPLEMENT A MEDICAID EXPANSION FOR CHILDREN AFTER FISCAL YEAR 2008.—In the case of a State that provides coverage under section 115 of the Children's Health Insurance Program Reauthorization Act of 2009 for any fiscal year after fiscal year 2008—

''(i) any child enrolled in the State plan under title XIX through the application of such an election shall be disregarded from the determination for the State of the monthly average unduplicated number of qualifying children enrolled in such plan during the first 3 fiscal years in which such an election is in effect; and

''(ii) in determining the baseline number of child enrollees for the State for any fiscal year subsequent to such first 3 fiscal years, the baseline number of child enrollees for the State under title XIX for the third of such fiscal years shall be the monthly average unduplicated number of qualifying children enrolled in the State plan under title XIX for such third fiscal year.

''(4) ENROLLMENT AND RETENTION PROVISIONS FOR CHILDREN.—For purposes of paragraph (3)(A), a State meets the condition of this paragraph for a fiscal year if it is implementing at least 5 of the following enrollment and retention provisions (treating each subparagraph as a separate enrollment and retention provision) throughout the entire fiscal year:

''(A) CONTINUOUS ELIGIBILITY.—The State has elected the option of continuous eligibility for a full 12 months for all children described in section 1902(e)(12) under title XIX under 19 years of age, as well as applying such policy under its State child health plan under this title.

''(B) LIBERALIZATION OF ASSET REQUIREMENTS.—The State meets the requirement specified in either of the following clauses:

''(i) ELIMINATION OF ASSET TEST.—The State does not apply any asset or resource test for eligibility for children under title XIX or this title.

''(ii) ADMINISTRATIVE VERIFICATION OF ASSETS.—The State—

''(I) permits a parent or caretaker relative who is applying on behalf of a child for medical assistance under title XIX or child health assistance under this title to declare and certify by signature under penalty of perjury information relating to family assets for purposes of determining and redetermining financial eligibility; and

''(II) takes steps to verify assets through means other than by requiring documentation from parents and applicants except in individual cases of discrepancies or where otherwise justified.

''(C) ELIMINATION OF IN-PERSON INTERVIEW REQUIREMENT.—The State does not require an application of a child for medical assistance under title XIX (or for child health assistance under this title), including an application for renewal of such assistance, to be made in person nor does the State require a face-to-face interview, unless there are discrepancies or individual circumstances justifying an in-person application or face-to-face interview.

''(D) USE OF JOINT APPLICATION FOR MEDICAID AND CHIP.—The application form and supplemental forms (if any) and information verification process is the same for purposes of establishing and renewing eligibility for children for medical assistance under title XIX and child health assistance under this title.

''(E) AUTOMATIC RENEWAL (USE OF ADMINISTRATIVE RENEWAL).—

''(i) IN GENERAL.—The State provides, in the case of renewal of a child's eligibility for medical assistance under title XIX or child health assistance under this title, a preprinted form completed by the State based on the information available to the State and notice to the parent or caretaker relative of the child that eligibility of the child will be renewed and continued based on such information unless the State is provided other information. Nothing in this clause shall be construed as preventing a State from verifying, through electronic and other means, the information so provided.

''(ii) SATISFACTION THROUGH DEMONSTRATED USE OF EX PARTE PROCESS.—A State shall be treated as satisfying the requirement of clause (i) if renewal of eligibility of children under title XIX or this title is determined without any requirement for an in-person interview, unless sufficient information is not in the State's possession and cannot be acquired from other sources (including other State agencies) without the participation of the applicant or the applicant's parent or caretaker relative.

''(F) PRESUMPTIVE ELIGIBILITY FOR CHILDREN.—The State is implementing section 1920A under title XIX as well as, pursuant to section 2107(e)(1), under this title.

''(G) EXPRESS LANE.—The State is implementing the option described in section 1902(e)(13) under title XIX as well as, pursuant to section 2107(e)(1), under this title.

''(H) PREMIUM ASSISTANCE SUBSIDIES.—The State is implementing the option of providing premium assistance subsidies under section 2105(c)(10) or section 1906A.''.

SEC. 105. TWO-YEAR INITIAL AVAILABILITY OF CHIP ALLOTMENTS.

Section 2104(e) (42 U.S.C. 1397dd(e)) is amended to read as follows:

''(e) AVAILABILITY OF AMOUNTS ALLOTTED.—

''(1) IN GENERAL.—Except as provided in paragraph (2), amounts allotted to a State pursuant to this section—

''(A) for each of fiscal years 1998 through 2008, shall remain available for expenditure by the State through the end of the second succeeding fiscal year; and

''(B) for fiscal year 2009 and each fiscal year thereafter, shall remain available for expenditure by the State through the end of the succeeding fiscal year.

''(2) AVAILABILITY OF AMOUNTS REDISTRIBUTED.—Amounts redistributed to a State under subsection (f) shall be available for expenditure by the State through the end of

the fiscal year in which they are redistributed.''.

SEC. 106. REDISTRIBUTION OF UNUSED ALLOTMENTS.

(a) BEGINNING WITH FISCAL YEAR 2007.—

(1) IN GENERAL.—Section 2104(f) (42 U.S.C. 1397dd(f)) is amended—

(A) by striking ''The Secretary'' and inserting the following:

''(1) IN GENERAL.—The Secretary'';

(B) by striking ''States that have fully expended the amount of their allotments under this section.'' and inserting ''States that the Secretary determines with respect to the fiscal year for which unused allotments are available for redistribution under this subsection, are shortfall States described in paragraph (2) for such fiscal year, but not to exceed the amount of the shortfall described in paragraph (2)(A) for each such State (as may be adjusted under paragraph (2)(C)).''; and

(C) by adding at the end the following new paragraph:

''(2) SHORTFALL STATES DESCRIBED.—

''(A) IN GENERAL.—For purposes of paragraph (1), with respect to a fiscal year, a shortfall State described in this subparagraph is a State with a State child health plan approved under this title for which the Secretary estimates on the basis of the most recent data available to the Secretary, that the projected expenditures under such plan for the State for the fiscal year will exceed the sum of—

''(i) the amount of the State's allotments for any preceding fiscal years that remains available for expenditure and that will not be expended by the end of the immediately preceding fiscal year;

''(ii) the amount (if any) of the child enrollment contingency fund payment under subsection (n); and

''(iii) the amount of the State's allotment for the fiscal year.

''(B) PRORATION RULE.—If the amounts available for redistribution under paragraph (1) for a fiscal year are less than the total amounts of the estimated shortfalls determined for the year under subparagraph (A), the amount to be redistributed under such paragraph for each shortfall State shall be reduced proportionally.

''(C) RETROSPECTIVE ADJUSTMENT.—The Secretary may adjust the estimates and determinations made under paragraph (1) and this paragraph with respect to a fiscal year as necessary on the basis of the amounts reported by States not later than November 30 of the succeeding fiscal year, as approved by the Secretary.''.

(2) EFFECTIVE DATE.—The amendments made by paragraph (1) shall apply to redistribution of allotments made for fiscal year 2007 and subsequent fiscal years.

(b) REDISTRIBUTION OF UNUSED ALLOTMENTS FOR FISCAL YEAR 2006.—Section 2104(k) (42 U.S.C. 1397dd(k)) is amended—

(1) in the subsection heading, by striking ''THE FIRST 2 QUARTERS OF'';

(2) in paragraph (1), by striking ''the first 2 quarters of''; and

(3) in paragraph (6)—

(A) by striking ''the first 2 quarters of''; and

(B) by striking ''March 31'' and inserting ''September 30''.

SEC. 107. OPTION FOR QUALIFYING STATES TO RECEIVE THE ENHANCED PORTION OF THE CHIP MATCHING RATE FOR MEDICAID COVERAGE OF CERTAIN CHILDREN.

(a) IN GENERAL.—Section 2105(g) (42 U.S.C. 1397ee(g)) is amended—

(1) in paragraph (1)(A), as amended by section 201(b)(1) of Public Law 110–173—

(A) by inserting ''subject to paragraph (4),'' after ''Notwithstanding any other provision of law,''; and

(B) by striking ''2008, or 2009'' and inserting ''or 2008''; and

(2) by adding at the end the following new paragraph:

''(4) OPTION FOR ALLOTMENTS FOR FISCAL YEARS 2009 THROUGH 2013.—

''(A) PAYMENT OF ENHANCED PORTION OF MATCHING RATE FOR CERTAIN EXPENDITURES.—In the case of expenditures described in subparagraph (B), a qualifying State (as defined in paragraph (2)) may elect to be paid from the State's allotment made under section 2104 for any of fiscal years 2009 through 2013 (insofar as the allotment is available to the State under subsections (e) and (m) of such section) an amount each quarter equal to the additional amount that would have been paid to the State under title XIX with respect to such expenditures if the enhanced FMAP (as determined under subsection (b)) had been substituted for the Federal medical assistance percentage (as defined in section 1905(b)).

''(B) EXPENDITURES DESCRIBED.—For purposes of subparagraph (A), the expenditures described in this subparagraph are expenditures made after the date of the enactment of this paragraph and during the period in which funds are available to the qualifying State for use under subparagraph (A), for the provision of medical assistance to individuals residing in the State who are eligible for medical assistance under the State plan under title XIX or under a waiver of such plan and who have not attained age 19 (or, if a State has so elected under the State plan under title XIX, age 20 or 21), and whose family income equals or exceeds 133 percent of the poverty line but does not exceed the Medicaid applicable income level.''.

(b) REPEAL OF LIMITATION ON AVAILABILITY OF FISCAL YEAR 2009 ALLOTMENTS.—Paragraph (2) of section 201(b) of the Medicare, Medicaid, and SCHIP Extension Act of 2007 (Public Law 110-173) is repealed.

SEC. 108. ONE-TIME APPROPRIATION.

There is appropriated to the Secretary, out of any money in the Treasury not otherwise appropriated, $11,706,000,000 to accompany the allotment made for the period beginning on October 1, 2012, and ending on March 31, 2013, under section 2104(a)(16)(A) of the Social Security Act (42 U.S.C. 1397dd(a)(16)(A)) (as added by section 101), to remain available until expended. Such amount shall be used to provide allotments to States under paragraph (3) of section 2104(m) of the Social Security Act (42 U.S.C. 1397dd(i)), as added by section 102, for the first 6 months of fiscal year 2013 in the same manner as allotments are provided under subsection (a)(16)(A) of such section 2104 and subject to the same terms and conditions as apply to the allotments provided from such subsection (a)(16)(A).

SEC. 109. IMPROVING FUNDING FOR THE TERRITORIES UNDER CHIP AND MEDICAID.

Section 1108(g) (42 U.S.C. 1308(g)) is amended by adding at the end the following new paragraph:

''(4) EXCLUSION OF CERTAIN EXPENDITURES FROM PAYMENT LIMITS.—With respect to fiscal years beginning with fiscal year 2009, if Puerto Rico, the Virgin Islands, Guam, the Northern Mariana Islands, or American Samoa qualify for a payment under subparagraph (A)(i), (B), or (F) of section 1903(a)(3) for a calendar quarter of such fiscal year, the payment shall not be taken into account in applying subsection (f) (as increased in accordance with paragraphs (1), (2), and (3) of this subsection) to such commonwealth or territory for such fiscal year.''.

Subtitle B—Focus on Low-Income Children and Pregnant Women

SEC. 111. STATE OPTION TO COVER LOW-INCOME PREGNANT WOMEN UNDER CHIP THROUGH A STATE PLAN AMENDMENT.

(a) IN GENERAL.—Title XXI (42 U.S.C. 1397aa et seq.), as amended by section 112(a), is amended by adding at the end the following new section:

''SEC. 2112. OPTIONAL COVERAGE OF TARGETED LOW-INCOME PREGNANT WOMEN THROUGH A STATE PLAN AMENDMENT.

''(a) IN GENERAL.—Subject to the succeeding provisions of this section, a State may elect through an amendment to its State child health plan under section 2102 to provide pregnancy-related assistance under such plan for targeted low-income pregnant women.

''(b) CONDITIONS.—A State may only elect the option under subsection (a) if the following conditions are satisfied:

''(1) MINIMUM INCOME ELIGIBILITY LEVELS FOR PREGNANT WOMEN AND CHILDREN.—The State has established an income eligibility level—

''(A) for pregnant women under subsection (a)(10)(A)(i)(III), (a)(10)(A)(i)(IV), or (l)(1)(A) of section 1902 that is at least 185 percent (or such higher percent as the State has in effect with regard to pregnant women under this title) of the poverty line applicable to a family of the size involved, but in no case lower than the percent in effect under any such subsection as of July 1, 2008; and

''(B) for children under 19 years of age under this title (or title XIX) that is at least 200 percent of the poverty line applicable to a family of the size involved.

''(2) NO CHIP INCOME ELIGIBILITY LEVEL FOR PREGNANT WOMEN LOWER THAN THE STATE'S MEDICAID LEVEL.—The State does not apply an effective income level for pregnant women under the State plan amendment that is lower than the effective income level (expressed as a percent of the poverty line and considering applicable income disregards) specified under subsection (a)(10)(A)(i)(III), (a)(10)(A)(i)(IV), or (l)(1)(A) of section 1902, on the date of enactment of this paragraph to be eligible for medical assistance as a pregnant woman.

''(3) NO COVERAGE FOR HIGHER INCOME PREGNANT WOMEN WITHOUT COVERING LOWER INCOME PREGNANT WOMEN.—The State does not provide coverage for pregnant women with higher family income without covering pregnant women with a lower family income.

''(4) APPLICATION OF REQUIREMENTS FOR COVERAGE OF TARGETED LOW-INCOME CHILDREN.—The State provides pregnancy-related assistance for targeted low-income pregnant women in the same manner, and subject to the same requirements, as the State provides child health assistance for targeted low-income children under the State child health plan, and in addition to providing child health assistance for such women.

''(5) NO PREEXISTING CONDITION EXCLUSION OR WAITING PERIOD.—The State does not apply any exclusion of benefits for pregnancy-related assistance based on any preexisting condition or any waiting period (including any waiting period imposed to carry out section 2102(b)(3)(C)) for receipt of such assistance.

''(6) APPLICATION OF COST-SHARING PROTECTION.—The State provides pregnancy-related assistance to a targeted low-income woman consistent with the cost-sharing protections under section 2103(e) and applies the limitation on total annual aggregate cost sharing imposed under paragraph (3)(B) of such section to the family of such a woman.

''(7) NO WAITING LIST FOR CHILDREN.—The State does not impose, with respect to the

enrollment under the State child health plan of targeted low-income children during the quarter, any enrollment cap or other numerical limitation on enrollment, any waiting list, any procedures designed to delay the consideration of applications for enrollment, or similar limitation with respect to enrollment.

''(c) OPTION TO PROVIDE PRESUMPTIVE ELIGIBILITY.—A State that elects the option under subsection (a) and satisfies the conditions described in subsection (b) may elect to apply section 1920 (relating to presumptive eligibility for pregnant women) to the State child health plan in the same manner as such section applies to the State plan under title XIX.

''(d) DEFINITIONS.—For purposes of this section:

''(1) PREGNANCY-RELATED ASSISTANCE.—The term 'pregnancy-related assistance' has the meaning given the term 'child health assistance' in section 2110(a) with respect to an individual during the period described in paragraph (2)(A).

''(2) TARGETED LOW-INCOME PREGNANT WOMAN.—The term 'targeted low-income pregnant woman' means an individual—

''(A) during pregnancy and through the end of the month in which the 60-day period (beginning on the last day of her pregnancy) ends;

''(B) whose family income exceeds 185 percent (or, if higher, the percent applied under subsection (b)(1)(A)) of the poverty line applicable to a family of the size involved, but does not exceed the income eligibility level established under the State child health plan under this title for a targeted low-income child; and

''(C) who satisfies the requirements of paragraphs (1)(A), (1)(C), (2), and (3) of section 2110(b) in the same manner as a child applying for child health assistance would have to satisfy such requirements.

''(e) AUTOMATIC ENROLLMENT FOR CHILDREN BORN TO WOMEN RECEIVING PREGNANCY-RELATED ASSISTANCE.—If a child is born to a targeted low-income pregnant woman who was receiving pregnancy-related assistance under this section on the date of the child's birth, the child shall be deemed to have applied for child health assistance under the State child health plan and to have been found eligible for such assistance under such plan or to have applied for medical assistance under title XIX and to have been found eligible for such assistance under such title, as appropriate, on the date of such birth and to remain eligible for such assistance until the child attains 1 year of age. During the period in which a child is deemed under the preceding sentence to be eligible for child health or medical assistance, the child health or medical assistance eligibility identification number of the mother shall also serve as the identification number of the child, and all claims shall be submitted and paid under such number (unless the State issues a separate identification number for the child before such period expires).

''(f) STATES PROVIDING ASSISTANCE THROUGH OTHER OPTIONS.—

''(1) CONTINUATION OF OTHER OPTIONS FOR PROVIDING ASSISTANCE.—The option to provide assistance in accordance with the preceding subsections of this section shall not limit any other option for a State to provide—

''(A) child health assistance through the application of sections 457.10, 457.350(b)(2), 457.622(c)(5), and 457.626(a)(3) of title 42, Code of Federal Regulations (as in effect after the final rule adopted by the Secretary and set forth at 67 Fed. Reg. 61956–61974 (October 2, 2002)), or

''(B) pregnancy-related services through the application of any waiver authority (as in effect on June 1, 2008).

''(2) CLARIFICATION OF AUTHORITY TO PROVIDE POSTPARTUM SERVICES.—Any State that provides child health assistance under any authority described in paragraph (1) may continue to provide such assistance, as well as postpartum services, through the end of the month in which the 60-day period (beginning on the last day of the pregnancy) ends, in the same manner as such assistance and postpartum services would be provided if provided under the State plan under title XIX, but only if the mother would otherwise satisfy the eligibility requirements that apply under the State child health plan (other than with respect to age) during such period.

''(3) NO INFERENCE.—Nothing in this subsection shall be construed—

''(A) to infer congressional intent regarding the legality or illegality of the content of the sections specified in paragraph (1)(A); or

''(B) to modify the authority to provide pregnancy-related services under a waiver specified in paragraph (1)(B).''.

(b) ADDITIONAL CONFORMING AMENDMENTS.—

(1) NO COST SHARING FOR PREGNANCY-RELATED BENEFITS.—Section 2103(e)(2) (42 U.S.C. 1397cc(e)(2)) is amended—

(A) in the heading, by inserting ''**OR PREGNANCY-RELATED ASSISTANCE**'' after ''**PREVENTIVE SERVICES**''; and

(B) by inserting before the period at the end the following: ''or for pregnancy-related assistance''.

(2) NO WAITING PERIOD.—Section 2102(b)(1)(B) (42 U.S.C. 1397bb(b)(1)(B)) is amended—

(A) in clause (i), by striking '', and'' at the end and inserting a semicolon;

(B) in clause (ii), by striking the period at the end and inserting ''; and''; and

(C) by adding at the end the following new clause:

''(iii) may not apply a waiting period (including a waiting period to carry out paragraph (3)(C)) in the case of a targeted low-income pregnant woman provided pregnancy-related assistance under section 2112.''.

SEC. 112. PHASE-OUT OF COVERAGE FOR NONPREGNANT CHILDLESS ADULTS UNDER CHIP; CONDITIONS FOR COVERAGE OF PARENTS.

(a) PHASE-OUT RULES.—

(1) IN GENERAL.—Title XXI (42 U.S.C. 1397aa et seq.) is amended by adding at the end the following new section:

''SEC. 2111. PHASE-OUT OF COVERAGE FOR NONPREGNANT CHILDLESS ADULTS; CONDITIONS FOR COVERAGE OF PARENTS.

''(a) TERMINATION OF COVERAGE FOR NONPREGNANT CHILDLESS ADULTS.—

''(1) NO NEW CHIP WAIVERS; AUTOMATIC EXTENSIONS AT STATE OPTION THROUGH 2009.—Notwithstanding section 1115 or any other provision of this title, except as provided in this subsection—

''(A) the Secretary shall not on or after the date of the enactment of the Children's Health Insurance Program Reauthorization Act of 2009, approve or renew a waiver, experimental, pilot, or demonstration project that would allow funds made available under this title to be used to provide child health assistance or other health benefits coverage to a nonpregnant childless adult; and

''(B) notwithstanding the terms and conditions of an applicable existing waiver, the provisions of paragraph (2) shall apply for purposes of any period beginning on or after January 1, 2010, in determining the period to which the waiver applies, the individuals eligible to be covered by the waiver, and the amount of the Federal payment under this title.

''(2) TERMINATION OF CHIP COVERAGE UNDER APPLICABLE EXISTING WAIVERS AT THE END OF 2009.—

''(A) IN GENERAL.—No funds shall be available under this title for child health assistance or other health benefits coverage that is provided to a nonpregnant childless adult under an applicable existing waiver after December 31, 2009.

''(B) EXTENSION UPON STATE REQUEST.—If an applicable existing waiver described in subparagraph (A) would otherwise expire before January 1, 2010, notwithstanding the requirements of subsections (e) and (f) of section 1115, a State may submit, not later than September 30, 2009, a request to the Secretary for an extension of the waiver. The Secretary shall approve a request for an extension of an applicable existing waiver submitted pursuant to this subparagraph, but only through December 31, 2009.

''(C) APPLICATION OF ENHANCED FMAP.—The enhanced FMAP determined under section 2105(b) shall apply to expenditures under an applicable existing waiver for the provision of child health assistance or other health benefits coverage to a nonpregnant childless adult during the period beginning on the date of the enactment of this subsection and ending on December 31, 2009.

''(3) STATE OPTION TO APPLY FOR MEDICAID WAIVER TO CONTINUE COVERAGE FOR NONPREGNANT CHILDLESS ADULTS.—

''(A) IN GENERAL.—Each State for which coverage under an applicable existing waiver is terminated under paragraph (2)(A) may submit, not later than September 30, 2009, an application to the Secretary for a waiver under section 1115 of the State plan under title XIX to provide medical assistance to a nonpregnant childless adult whose coverage is so terminated (in this subsection referred to as a 'Medicaid nonpregnant childless adults waiver').

''(B) DEADLINE FOR APPROVAL.—The Secretary shall make a decision to approve or deny an application for a Medicaid nonpregnant childless adults waiver submitted under subparagraph (A) within 90 days of the date of the submission of the application. If no decision has been made by the Secretary as of December 31, 2009, on the application of a State for a Medicaid nonpregnant childless adults waiver that was submitted to the Secretary by September 30, 2009, the application shall be deemed approved.

''(C) STANDARD FOR BUDGET NEUTRALITY.—The budget neutrality requirement applicable with respect to expenditures for medical assistance under a Medicaid nonpregnant childless adults waiver shall—

''(i) in the case of fiscal year 2010, allow expenditures for medical assistance under title XIX for all such adults to not exceed the total amount of payments made to the State under paragraph (2)(B) for fiscal year 2009, increased by the percentage increase (if any) in the projected nominal per capita amount of National Health Expenditures for 2010 over 2009, as most recently published by the Secretary; and

''(ii) in the case of any succeeding fiscal year, allow such expenditures to not exceed the amount in effect under this subparagraph for the preceding fiscal year, increased by the percentage increase (if any) in the projected nominal per capita amount of National Health Expenditures for the calendar year that begins during the year involved over the preceding calendar year, as most recently published by the Secretary.

''(b) RULES AND CONDITIONS FOR COVERAGE OF PARENTS OF TARGETED LOW-INCOME CHILDREN.—

''(1) TWO-YEAR PERIOD; AUTOMATIC EXTENSION AT STATE OPTION THROUGH FISCAL YEAR 2011.—

''(A) NO NEW CHIP WAIVERS.—Notwithstanding section 1115 or any other provision of this title, except as provided in this subsection—

''(i) the Secretary shall not on or after the date of the enactment of the Children's Health Insurance Program Reauthorization Act of 2009 approve or renew a waiver, experimental, pilot, or demonstration project that would allow funds made available under this title to be used to provide child health assistance or other health benefits coverage to a parent of a targeted low-income child; and

''(ii) notwithstanding the terms and conditions of an applicable existing waiver, the provisions of paragraphs (2) and (3) shall apply for purposes of any fiscal year beginning on or after October 1, 2011, in determining the period to which the waiver applies, the individuals eligible to be covered by the waiver, and the amount of the Federal payment under this title.

''(B) EXTENSION UPON STATE REQUEST.—If an applicable existing waiver described in subparagraph (A) would otherwise expire before October 1, 2011, and the State requests an extension of such waiver, the Secretary shall grant such an extension, but only, subject to paragraph (2)(A), through September 30, 2011.

''(C) APPLICATION OF ENHANCED FMAP.—The enhanced FMAP determined under section 2105(b) shall apply to expenditures under an applicable existing waiver for the provision of child health assistance or other health benefits coverage to a parent of a targeted low-income child during the third and fourth quarters of fiscal year 2009 and during fiscal years 2010 and 2011.

''(2) RULES FOR FISCAL YEARS 2012 THROUGH 2013.—

''(A) PAYMENTS FOR COVERAGE LIMITED TO BLOCK GRANT FUNDED FROM STATE ALLOTMENT.—Any State that provides child health assistance or health benefits coverage under an applicable existing waiver for a parent of a targeted low-income child may elect to continue to provide such assistance or coverage through fiscal year 2012 or 2013, subject to the same terms and conditions that applied under the applicable existing waiver, unless otherwise modified in subparagraph (B).

''(B) TERMS AND CONDITIONS.—

''(i) BLOCK GRANT SET ASIDE FROM STATE ALLOTMENT.—If the State makes an election under subparagraph (A), the Secretary shall set aside for the State for each such fiscal year an amount equal to the Federal share of 110 percent of the State's projected expenditures under the applicable existing waiver for providing child health assistance or health benefits coverage to all parents of targeted low-income children enrolled under such waiver for the fiscal year (as certified by the State and submitted to the Secretary by not later than August 31 of the preceding fiscal year). In the case of fiscal year 2013, the set aside for any State shall be computed separately for each period described in subparagraphs (A) and (B) of section 2104(a)(16) and any reduction in the allotment for either such period under section 2104(m)(4) shall be allocated on a pro rata basis to such set aside.

''(ii) PAYMENTS FROM BLOCK GRANT.—The Secretary shall pay the State from the amount set aside under clause (i) for the fiscal year, an amount for each quarter of such fiscal year equal to the applicable percentage determined under clause (iii) or (iv) for expenditures in the quarter for providing child health assistance or other health benefits coverage to a parent of a targeted low-income child.

''(iii) ENHANCED FMAP ONLY IN FISCAL YEAR 2012 FOR STATES WITH SIGNIFICANT CHILD OUTREACH OR THAT ACHIEVE CHILD COVERAGE BENCHMARKS; FMAP FOR ANY OTHER STATES.—For purposes of clause (ii), the applicable percentage for any quarter of fiscal year 2012 is equal to—

''(I) the enhanced FMAP determined under section 2105(b) in the case of a State that meets the outreach or coverage benchmarks described in any of subparagraph (A), (B), or (C) of paragraph (3) for fiscal year 2011; or

''(II) the Federal medical assistance percentage (as determined under section 1905(b) without regard to clause (4) of such section) in the case of any other State.

''(iv) AMOUNT OF FEDERAL MATCHING PAYMENT IN 2013.—For purposes of clause (ii), the applicable percentage for any quarter of fiscal year 2013 is equal to—

''(I) the REMAP percentage if—

''(aa) the applicable percentage for the State under clause (iii) was the enhanced FMAP for fiscal year 2012; and

''(bb) the State met either of the coverage benchmarks described in subparagraph (B) or (C) of paragraph (3) for fiscal year 2012; or

''(II) the Federal medical assistance percentage (as so determined) in the case of any State to which subclause (I) does not apply. For purposes of subclause (I), the REMAP percentage is the percentage which is the sum of such Federal medical assistance percentage and a number of percentage points equal to one-half of the difference between such Federal medical assistance percentage and such enhanced FMAP.

''(v) NO FEDERAL PAYMENTS OTHER THAN FROM BLOCK GRANT SET ASIDE.—No payments shall be made to a State for expenditures described in clause (ii) after the total amount set aside under clause (i) for a fiscal year has been paid to the State.

''(vi) NO INCREASE IN INCOME ELIGIBILITY LEVEL FOR PARENTS.—No payments shall be made to a State from the amount set aside under clause (i) for a fiscal year for expenditures for providing child health assistance or health benefits coverage to a parent of a targeted low-income child whose family income exceeds the income eligibility level applied under the applicable existing waiver to parents of targeted low-income children on the date of enactment of the Children's Health Insurance Program Reauthorization Act of 2009.

''(3) OUTREACH OR COVERAGE BENCHMARKS.—For purposes of paragraph (2), the outreach or coverage benchmarks described in this paragraph are as follows:

''(A) SIGNIFICANT CHILD OUTREACH CAMPAIGN.—The State—

''(i) was awarded a grant under section 2113 for fiscal year 2011;

''(ii) implemented 1 or more of the enrollment and retention provisions described in section 2105(a)(4) for such fiscal year; or

''(iii) has submitted a specific plan for outreach for such fiscal year.

''(B) HIGH-PERFORMING STATE.—The State, on the basis of the most timely and accurate published estimates of the Bureau of the Census, ranks in the lowest ⅓ of States in terms of the State's percentage of low-income children without health insurance.

''(C) STATE INCREASING ENROLLMENT OF LOW-INCOME CHILDREN.—The State qualified for a performance bonus payment under section 2105(a)(3)(B) for the most recent fiscal year applicable under such section.

''(4) RULES OF CONSTRUCTION.—Nothing in this subsection shall be construed as prohibiting a State from submitting an application to the Secretary for a waiver under section 1115 of the State plan under title XIX to provide medical assistance to a parent of a targeted low-income child that was provided child health assistance or health benefits coverage under an applicable existing waiver.

''(c) APPLICABLE EXISTING WAIVER.—For purposes of this section—

''(1) IN GENERAL.—The term 'applicable existing waiver' means a waiver, experimental, pilot, or demonstration project under section 1115, grandfathered under section 6102(c)(3) of the Deficit Reduction Act of 2005, or otherwise conducted under authority that—

''(A) would allow funds made available under this title to be used to provide child health assistance or other health benefits coverage to—

''(i) a parent of a targeted low-income child;

''(ii) a nonpregnant childless adult; or

''(iii) individuals described in both clauses (i) and (ii); and

''(B) was in effect during fiscal year 2009.

''(2) DEFINITIONS.—

''(A) PARENT.—The term 'parent' includes a caretaker relative (as such term is used in carrying out section 1931) and a legal guardian.

''(B) NONPREGNANT CHILDLESS ADULT.—The term 'nonpregnant childless adult' has the meaning given such term by section 2107(f).''.

(2) CONFORMING AMENDMENTS.—

(A) Section 2107(f) (42 U.S.C. 1397gg(f)) is amended—

(i) by striking '', the Secretary'' and inserting '':

''(1) The Secretary'';

(ii) in the first sentence, by inserting ''or a parent (as defined in section 2111(c)(2)(A)), who is not pregnant, of a targeted low-income child'' before the period;

(iii) by striking the second sentence; and

(iv) by adding at the end the following new paragraph:

''(2) The Secretary may not approve, extend, renew, or amend a waiver, experimental, pilot, or demonstration project with respect to a State after the date of enactment of the Children's Health Insurance Program Reauthorization Act of 2009 that would waive or modify the requirements of section 2111.''.

(B) Section 6102(c) of the Deficit Reduction Act of 2005 (Public Law 109–171; 120 Stat. 131) is amended by striking ''Nothing'' and inserting ''Subject to section 2111 of the Social Security Act, as added by section 112 of the Children's Health Insurance Program Reauthorization Act of 2009, nothing''.

(b) GAO STUDY AND REPORT.—

(1) IN GENERAL.—The Comptroller General of the United States shall conduct a study of whether—

(A) the coverage of a parent, a caretaker relative (as such term is used in carrying out section 1931), or a legal guardian of a targeted low-income child under a State health plan under title XXI of the Social Security Act increases the enrollment of, or the quality of care for, children, and

(B) such parents, relatives, and legal guardians who enroll in such a plan are more likely to enroll their children in such a plan or in a State plan under title XIX of such Act.

(2) REPORT.—Not later than 2 years after the date of the enactment of this Act, the Comptroller General shall report the results of the study to the Committee on Finance of the Senate and the Committee on Energy and Commerce of the House of Representatives, including recommendations (if any) for changes in legislation.

SEC. 113. ELIMINATION OF COUNTING MEDICAID CHILD PRESUMPTIVE ELIGIBILITY COSTS AGAINST TITLE XXI ALLOTMENT.

(a) IN GENERAL.—Section 2105(a)(1) (42 U.S.C. 1397ee(a)(1)) is amended—

(1) in the matter preceding subparagraph (A), by striking ''(or, in the case of expenditures described in subparagraph (B), the Federal medical assistance percentage (as defined in the first sentence of section 1905(b)))''; and

(2) by striking subparagraph (B) and inserting the following new subparagraph:

''(B) [reserved]''.

(b) AMENDMENTS TO MEDICAID.—

(1) ELIGIBILITY OF A NEWBORN.—Section 1902(e)(4) (42 U.S.C. 1396a(e)(4)) is amended in the first sentence by striking ''so long as the child is a member of the woman's household and the woman remains (or would remain if pregnant) eligible for such assistance''.

(2) APPLICATION OF QUALIFIED ENTITIES TO PRESUMPTIVE ELIGIBILITY FOR PREGNANT WOMEN UNDER MEDICAID.—Section 1920(b) (42 U.S.C. 1396r–1(b)) is amended by adding after paragraph (2) the following flush sentence:

''The term 'qualified provider' also includes a qualified entity, as defined in section 1920A(b)(3).''.

SEC. 114. LIMITATION ON MATCHING RATE FOR STATES THAT PROPOSE TO COVER CHILDREN WITH EFFECTIVE FAMILY INCOME THAT EXCEEDS 300 PERCENT OF THE POVERTY LINE.

(a) FMAP APPLIED TO EXPENDITURES.—Section 2105(c) (42 U.S.C. 1397ee(c)) is amended by adding at the end the following new paragraph:

''(8) LIMITATION ON MATCHING RATE FOR EXPENDITURES FOR CHILD HEALTH ASSISTANCE PROVIDED TO CHILDREN WHOSE EFFECTIVE FAMILY INCOME EXCEEDS 300 PERCENT OF THE POVERTY LINE.—

''(A) FMAP APPLIED TO EXPENDITURES.—Except as provided in subparagraph (B), for fiscal years beginning with fiscal year 2009, the Federal medical assistance percentage (as determined under section 1905(b) without regard to clause (4) of such section) shall be substituted for the enhanced FMAP under subsection (a)(1) with respect to any expenditures for providing child health assistance or health benefits coverage for a targeted low-income child whose effective family income would exceed 300 percent of the poverty line but for the application of a general exclusion of a block of income that is not determined by type of expense or type of income.

''(B) EXCEPTION.—Subparagraph (A) shall not apply to any State that, on the date of enactment of the Children's Health Insurance Program Reauthorization Act of 2009, has an approved State plan amendment or waiver to provide, or has enacted a State law to submit a State plan amendment to provide, expenditures described in such subparagraph under the State child health plan.''.

(b) RULE OF CONSTRUCTION.—Nothing in the amendments made by this section shall be construed as—

(1) changing any income eligibility level for children under title XXI of the Social Security Act; or

(2) changing the flexibility provided States under such title to establish the income eligibility level for targeted low-income children under a State child health plan and the methodologies used by the State to determine income or assets under such plan.

SEC. 115. STATE AUTHORITY UNDER MEDICAID.

Notwithstanding any other provision of law, including the fourth sentence of subsection (b) of section 1905 of the Social Security Act (42 U.S.C. 1396d) or subsection (u) of such section, at State option, the Secretary shall provide the State with the Federal medical assistance percentage determined for the State for Medicaid with respect to expenditures described in section 1905(u)(2)(A) of such Act or otherwise made to provide medical assistance under Medicaid to a child who could be covered by the State under CHIP.

TITLE II—OUTREACH AND ENROLLMENT

Subtitle A—Outreach and Enrollment Activities

SEC. 201. GRANTS AND ENHANCED ADMINISTRATIVE FUNDING FOR OUTREACH AND ENROLLMENT.

(a) GRANTS.—Title XXI (42 U.S.C. 1397aa et seq.), as amended by section 111, is amended by adding at the end the following:

''SEC. 2113. GRANTS TO IMPROVE OUTREACH AND ENROLLMENT.

''(a) OUTREACH AND ENROLLMENT GRANTS; NATIONAL CAMPAIGN.—

''(1) IN GENERAL.—From the amounts appropriated under subsection (g), subject to paragraph (2), the Secretary shall award grants to eligible entities during the period of fiscal years 2009 through 2013 to conduct outreach and enrollment efforts that are designed to increase the enrollment and participation of eligible children under this title and title XIX.

''(2) TEN PERCENT SET ASIDE FOR NATIONAL ENROLLMENT CAMPAIGN.—An amount equal to 10 percent of such amounts shall be used by the Secretary for expenditures during such period to carry out a national enrollment campaign in accordance with subsection (h).

''(b) PRIORITY FOR AWARD OF GRANTS.—

''(1) IN GENERAL.—In awarding grants under subsection (a), the Secretary shall give priority to eligible entities that—

''(A) propose to target geographic areas with high rates of—

''(i) eligible but unenrolled children, including such children who reside in rural areas; or

''(ii) racial and ethnic minorities and health disparity populations, including those proposals that address cultural and linguistic barriers to enrollment; and

''(B) submit the most demonstrable evidence required under paragraphs (1) and (2) of subsection (c).

''(2) TEN PERCENT SET ASIDE FOR OUTREACH TO INDIAN CHILDREN.—An amount equal to 10 percent of the funds appropriated under subsection (g) shall be used by the Secretary to award grants to Indian Health Service providers and urban Indian organizations receiving funds under title V of the Indian Health Care Improvement Act (25 U.S.C. 1651 et seq.) for outreach to, and enrollment of, children who are Indians.

''(c) APPLICATION.—An eligible entity that desires to receive a grant under subsection (a) shall submit an application to the Secretary in such form and manner, and containing such information, as the Secretary may decide. Such application shall include—

''(1) evidence demonstrating that the entity includes members who have access to, and credibility with, ethnic or low-income populations in the communities in which activities funded under the grant are to be conducted;

''(2) evidence demonstrating that the entity has the ability to address barriers to enrollment, such as lack of awareness of eligibility, stigma concerns and punitive fears associated with receipt of benefits, and other cultural barriers to applying for and receiving child health assistance or medical assistance;

''(3) specific quality or outcomes performance measures to evaluate the effectiveness of activities funded by a grant awarded under this section; and

''(4) an assurance that the eligible entity shall—

''(A) conduct an assessment of the effectiveness of such activities against the performance measures;

''(B) cooperate with the collection and reporting of enrollment data and other information in order for the Secretary to conduct such assessments; and

''(C) in the case of an eligible entity that is not the State, provide the State with enrollment data and other information as necessary for the State to make necessary projections of eligible children and pregnant women.

''(d) DISSEMINATION OF ENROLLMENT DATA AND INFORMATION DETERMINED FROM EFFECTIVENESS ASSESSMENTS; ANNUAL REPORT.—The Secretary shall—

''(1) make publicly available the enrollment data and information collected and reported in accordance with subsection (c)(4)(B); and

''(2) submit an annual report to Congress on the outreach and enrollment activities conducted with funds appropriated under this section.

''(e) MAINTENANCE OF EFFORT FOR STATES AWARDED GRANTS; NO STATE MATCH REQUIRED.—In the case of a State that is awarded a grant under this section—

''(1) the State share of funds expended for outreach and enrollment activities under the State child health plan shall not be less than the State share of such funds expended in the fiscal year preceding the first fiscal year for which the grant is awarded; and

''(2) no State matching funds shall be required for the State to receive a grant under this section.

''(f) DEFINITIONS.—In this section:

''(1) ELIGIBLE ENTITY.—The term 'eligible entity' means any of the following:

''(A) A State with an approved child health plan under this title.

''(B) A local government.

''(C) An Indian tribe or tribal consortium, a tribal organization, an urban Indian organization receiving funds under title V of the Indian Health Care Improvement Act (25 U.S.C. 1651 et seq.), or an Indian Health Service provider.

''(D) A Federal health safety net organization.

''(E) A national, State, local, or community-based public or nonprofit private organization, including organizations that use community health workers or community-based doula programs.

''(F) A faith-based organization or consortia, to the extent that a grant awarded to such an entity is consistent with the requirements of section 1955 of the Public Health Service Act (42 U.S.C. 300x–65) relating to a grant award to nongovernmental entities.

''(G) An elementary or secondary school.

''(2) FEDERAL HEALTH SAFETY NET ORGANIZATION.—The term 'Federal health safety net organization' means—

''(A) a Federally-qualified health center (as defined in section 1905(l)(2)(B));

''(B) a hospital defined as a disproportionate share hospital for purposes of section 1923;

''(C) a covered entity described in section 340B(a)(4) of the Public Health Service Act (42 U.S.C. 256b(a)(4)); and

''(D) any other entity or consortium that serves children under a federally funded program, including the special supplemental nutrition program for women, infants, and children (WIC) established under section 17 of the Child Nutrition Act of 1966 (42 U.S.C. 1786), the Head Start and Early Head Start programs under the Head Start Act (42 U.S.C. 9801 et seq.), the school lunch program established under the Richard B. Russell National School Lunch Act, and an elementary or secondary school.

''(3) INDIANS; INDIAN TRIBE; TRIBAL ORGANIZATION; URBAN INDIAN ORGANIZATION.—The terms 'Indian', 'Indian tribe', 'tribal organization', and 'urban Indian organization' have the meanings given such terms in section 4 of the Indian Health Care Improvement Act (25 U.S.C. 1603).

''(4) COMMUNITY HEALTH WORKER.—The term 'community health worker' means an individual who promotes health or nutrition within the community in which the individual resides—

''(A) by serving as a liaison between communities and health care agencies;

''(B) by providing guidance and social assistance to community residents;

''(C) by enhancing community residents' ability to effectively communicate with health care providers;

''(D) by providing culturally and linguistically appropriate health or nutrition education;

''(E) by advocating for individual and community health or nutrition needs; and

''(F) by providing referral and followup services.

''(g) APPROPRIATION.—There is appropriated, out of any money in the Treasury not otherwise appropriated, $100,000,000 for the period of fiscal years 2009 through 2013, for the purpose of awarding grants under this section. Amounts appropriated and paid under the authority of this section shall be in addition to amounts appropriated under section 2104 and paid to States in accordance with section 2105, including with respect to expenditures for outreach activities in accordance with subsections (a)(1)(D)(iii) and (c)(2)(C) of that section.

''(h) NATIONAL ENROLLMENT CAMPAIGN.—From the amounts made available under subsection (a)(2), the Secretary shall develop and implement a national enrollment campaign to improve the enrollment of underserved child populations in the programs established under this title and title XIX. Such campaign may include—

''(1) the establishment of partnerships with the Secretary of Education and the Secretary of Agriculture to develop national campaigns to link the eligibility and enrollment systems for the assistance programs each Secretary administers that often serve the same children;

''(2) the integration of information about the programs established under this title and title XIX in public health awareness campaigns administered by the Secretary;

''(3) increased financial and technical support for enrollment hotlines maintained by the Secretary to ensure that all States participate in such hotlines;

''(4) the establishment of joint public awareness outreach initiatives with the Secretary of Education and the Secretary of Labor regarding the importance of health insurance to building strong communities and the economy;

''(5) the development of special outreach materials for Native Americans or for individuals with limited English proficiency; and

''(6) such other outreach initiatives as the Secretary determines would increase public awareness of the programs under this title and title XIX.''.

(b) ENHANCED ADMINISTRATIVE FUNDING FOR TRANSLATION OR INTERPRETATION SERVICES UNDER CHIP AND MEDICAID.—

(1) CHIP.—Section 2105(a)(1) (42 U.S.C. 1397ee(a)(1)), as amended by section 113, is amended—

(A) in the matter preceding subparagraph (A), by inserting ''(or, in the case of expenditures described in subparagraph (D)(iv), the higher of 75 percent or the sum of the enhanced FMAP plus 5 percentage points)'' after ''enhanced FMAP''; and

(B) in subparagraph (D)—

(i) in clause (iii), by striking ''and'' at the end;

(ii) by redesignating clause (iv) as clause (v); and

(iii) by inserting after clause (iii) the following new clause:

''(iv) for translation or interpretation services in connection with the enrollment of, retention of, and use of services under this title by, individuals for whom English is not their primary language (as found necessary by the Secretary for the proper and efficient administration of the State plan); and''.

(2) MEDICAID.—

(A) USE OF MEDICAID FUNDS.—Section 1903(a)(2) (42 U.S.C. 1396b(a)(2)) is amended by adding at the end the following new subparagraph:

''(E) an amount equal to 75 percent of so much of the sums expended during such quarter (as found necessary by the Secretary for the proper and efficient administration of the State plan) as are attributable to translation or interpretation services in connection with the enrollment of, retention of, and use of services under this title by, children of families for whom English is not the primary language; plus''.

(B) USE OF COMMUNITY HEALTH WORKERS FOR OUTREACH ACTIVITIES.—

(i) IN GENERAL.—Section 2102(c)(1) of such Act (42 U.S.C. 1397bb(c)(1)) is amended by inserting ''(through community health workers and others)'' after ''Outreach''.

(ii) IN FEDERAL EVALUATION.—Section 2108(c)(3)(B) of such Act (42 U.S.C. 1397hh(c)(3)(B)) is amended by inserting ''(such as through community health workers and others)'' after ''including practices''.

SEC. 202. INCREASED OUTREACH AND ENROLLMENT OF INDIANS.

(a) IN GENERAL.—Section 1139 (42 U.S.C. 1320b–9) is amended to read as follows:

''SEC. 1139. IMPROVED ACCESS TO, AND DELIVERY OF, HEALTH CARE FOR INDIANS UNDER TITLES XIX AND XXI.

''(a) AGREEMENTS WITH STATES FOR MEDICAID AND CHIP OUTREACH ON OR NEAR RESERVATIONS TO INCREASE THE ENROLLMENT OF INDIANS IN THOSE PROGRAMS.—

''(1) IN GENERAL.—In order to improve the access of Indians residing on or near a reservation to obtain benefits under the Medicaid and State children's health insurance programs established under titles XIX and XXI, the Secretary shall encourage the State to take steps to provide for enrollment on or near the reservation. Such steps may include outreach efforts such as the outstationing of eligibility workers, entering into agreements with the Indian Health Service, Indian Tribes, Tribal Organizations, and Urban Indian Organizations to provide outreach, education regarding eligibility and benefits, enrollment, and translation services when such services are appropriate.

''(2) CONSTRUCTION.—Nothing in paragraph (1) shall be construed as affecting arrangements entered into between States and the Indian Health Service, Indian Tribes, Tribal Organizations, or Urban Indian Organizations for such Service, Tribes, or Organizations to conduct administrative activities under such titles.

''(b) REQUIREMENT TO FACILITATE COOPERATION.—The Secretary, acting through the Centers for Medicare & Medicaid Services, shall take such steps as are necessary to facilitate cooperation with, and agreements between, States and the Indian Health Service, Indian Tribes, Tribal Organizations, or Urban Indian Organizations with respect to the provision of health care items and services to Indians under the programs established under title XIX or XXI.

''(c) DEFINITION OF INDIAN; INDIAN TRIBE; INDIAN HEALTH PROGRAM; TRIBAL ORGANIZATION; URBAN INDIAN ORGANIZATION.—In this section, the terms 'Indian', 'Indian Tribe', 'Indian Health Program', 'Tribal Organization', and 'Urban Indian Organization' have the meanings given those terms in section 4 of the Indian Health Care Improvement Act.''.

(b) NONAPPLICATION OF 10 PERCENT LIMIT ON OUTREACH AND CERTAIN OTHER EXPENDITURES.—Section 2105(c)(2) (42 U.S.C. 1397ee(c)(2)) is amended by adding at the end the following:

''(C) NONAPPLICATION TO CERTAIN EXPENDITURES.—The limitation under subparagraph (A) shall not apply with respect to the following expenditures:

''(i) EXPENDITURES TO INCREASE OUTREACH TO, AND THE ENROLLMENT OF, INDIAN CHILDREN UNDER THIS TITLE AND TITLE xix.—Expenditures for outreach activities to families of Indian children likely to be eligible for child health assistance under the plan or medical assistance under the State plan under title XIX (or under a waiver of such plan), to inform such families of the availability of, and to assist them in enrolling their children in, such plans, including such activities conducted under grants, contracts, or agreements entered into under section 1139(a).''.

SEC. 203. STATE OPTION TO RELY ON FINDINGS FROM AN EXPRESS LANE AGENCY TO CONDUCT SIMPLIFIED ELIGIBILITY DETERMINATIONS.

(a) APPLICATION UNDER MEDICAID AND CHIP PROGRAMS.—

(1) MEDICAID.—Section 1902(e) (42 U.S.C. 1396a(e)) is amended by adding at the end the following:

''(13) EXPRESS LANE OPTION.—

''(A) IN GENERAL.—

''(i) OPTION TO USE A FINDING FROM AN EXPRESS LANE AGENCY.—At the option of the State, the State plan may provide that in determining eligibility under this title for a child (as defined in subparagraph (G)), the State may rely on a finding made within a reasonable period (as determined by the State) from an Express Lane agency (as defined in subparagraph (F)) when it determines whether a child satisfies one or more components of eligibility for medical assistance under this title. The State may rely on a finding from an Express Lane agency notwithstanding sections 1902(a)(46)(B) and 1137(d) or any differences in budget unit, disregard, deeming or other methodology, if the following requirements are met:

''(I) PROHIBITION ON DETERMINING CHILDREN INELIGIBLE FOR COVERAGE.—If a finding from an Express Lane agency would result in a determination that a child does not satisfy an eligibility requirement for medical assistance under this title and for child health assistance under title XXI, the State shall determine eligibility for assistance using its regular procedures.

''(II) NOTICE REQUIREMENT.—For any child who is found eligible for medical assistance under the State plan under this title or child health assistance under title XXI and who is subject to premiums based on an Express Lane agency's finding of such child's income level, the State shall provide notice that the child may qualify for lower premium payments if evaluated by the State using its regular policies and of the procedures for requesting such an evaluation.

''(III) COMPLIANCE WITH SCREEN AND ENROLL REQUIREMENT.—The State shall satisfy the requirements under subparagraphs (A) and (B) of section 2102(b)(3) (relating to screen and enroll) before enrolling a child in child health assistance under title XXI. At its option, the State may fulfill such requirements in accordance with either option provided under subparagraph (C) of this paragraph.

''(IV) VERIFICATION OF CITIZENSHIP OR NATIONALITY STATUS.—The State shall satisfy the requirements of section 1902(a)(46)(B) or 2105(c)(9), as applicable for verifications of citizenship or nationality status.

''(V) CODING.—The State meets the requirements of subparagraph (E).

''(ii) OPTION TO APPLY TO RENEWALS AND REDETERMINATIONS.—The State may apply the

provisions of this paragraph when conducting initial determinations of eligibility, redeterminations of eligibility, or both, as described in the State plan.

''(B) RULES OF CONSTRUCTION.—Nothing in this paragraph shall be construed—

''(i) to limit or prohibit a State from taking any actions otherwise permitted under this title or title XXI in determining eligibility for or enrolling children into medical assistance under this title or child health assistance under title XXI; or

''(ii) to modify the limitations in section 1902(a)(5) concerning the agencies that may make a determination of eligibility for medical assistance under this title.

''(C) OPTIONS FOR SATISFYING THE SCREEN AND ENROLL REQUIREMENT.—

''(i) IN GENERAL.—With respect to a child whose eligibility for medical assistance under this title or for child health assistance under title XXI has been evaluated by a State agency using an income finding from an Express Lane agency, a State may carry out its duties under subparagraphs (A) and (B) of section 2102(b)(3) (relating to screen and enroll) in accordance with either clause (ii) or clause (iii).

''(ii) ESTABLISHING A SCREENING THRESHOLD.—

''(I) IN GENERAL.—Under this clause, the State establishes a screening threshold set as a percentage of the Federal poverty level that exceeds the highest income threshold applicable under this title to the child by a minimum of 30 percentage points or, at State option, a higher number of percentage points that reflects the value (as determined by the State and described in the State plan) of any differences between income methodologies used by the program administered by the Express Lane agency and the methodologies used by the State in determining eligibility for medical assistance under this title.

''(II) CHILDREN WITH INCOME NOT ABOVE THRESHOLD.—If the income of a child does not exceed the screening threshold, the child is deemed to satisfy the income eligibility criteria for medical assistance under this title regardless of whether such child would otherwise satisfy such criteria.

''(III) CHILDREN WITH INCOME ABOVE THRESHOLD.—If the income of a child exceeds the screening threshold, the child shall be considered to have an income above the Medicaid applicable income level described in section 2110(b)(4) and to satisfy the requirement under section 2110(b)(1)(C) (relating to the requirement that CHIP matching funds be used only for children not eligible for Medicaid). If such a child is enrolled in child health assistance under title XXI, the State shall provide the parent, guardian, or custodial relative with the following:

''(aa) Notice that the child may be eligible to receive medical assistance under the State plan under this title if evaluated for such assistance under the State's regular procedures and notice of the process through which a parent, guardian, or custodial relative can request that the State evaluate the child's eligibility for medical assistance under this title using such regular procedures.

''(bb) A description of differences between the medical assistance provided under this title and child health assistance under title XXI, including differences in cost-sharing requirements and covered benefits.

''(iii) TEMPORARY ENROLLMENT IN CHIP PENDING SCREEN AND ENROLL.—

''(I) IN GENERAL.—Under this clause, a State enrolls a child in child health assistance under title XXI for a temporary period if the child appears eligible for such assistance based on an income finding by an Express Lane agency.

''(II) DETERMINATION OF ELIGIBILITY.—During such temporary enrollment period, the State shall determine the child's eligibility for child health assistance under title XXI or for medical assistance under this title in accordance with this clause.

''(III) PROMPT FOLLOW UP.—In making such a determination, the State shall take prompt action to determine whether the child should be enrolled in medical assistance under this title or child health assistance under title XXI pursuant to subparagraphs (A) and (B) of section 2102(b)(3) (relating to screen and enroll).

''(IV) REQUIREMENT FOR SIMPLIFIED DETERMINATION.—In making such a determination, the State shall use procedures that, to the maximum feasible extent, reduce the burden imposed on the individual of such determination. Such procedures may not require the child's parent, guardian, or custodial relative to provide or verify information that already has been provided to the State agency by an Express Lane agency or another source of information unless the State agency has reason to believe the information is erroneous.

''(V) AVAILABILITY OF CHIP MATCHING FUNDS DURING TEMPORARY ENROLLMENT PERIOD.—Medical assistance for items and services that are provided to a child enrolled in title XXI during a temporary enrollment period under this clause shall be treated as child health assistance under such title.

''(D) OPTION FOR AUTOMATIC ENROLLMENT.—

''(i) IN GENERAL.—The State may initiate and determine eligibility for medical assistance under the State Medicaid plan or for child health assistance under the State CHIP plan without a program application from, or on behalf of, the child based on data obtained from sources other than the child (or the child's family), but a child can only be automatically enrolled in the State Medicaid plan or the State CHIP plan if the child or the family affirmatively consents to being enrolled through affirmation and signature on an Express Lane agency application, if the requirement of clause (ii) is met.

''(ii) INFORMATION REQUIREMENT.—The requirement of this clause is that the State informs the parent, guardian, or custodial relative of the child of the services that will be covered, appropriate methods for using such services, premium or other cost sharing charges (if any) that apply, medical support obligations (under section 1912(a)) created by enrollment (if applicable), and the actions the parent, guardian, or relative must take to maintain enrollment and renew coverage.

''(E) CODING; APPLICATION TO ENROLLMENT ERROR RATES.—

''(i) IN GENERAL.—For purposes of subparagraph (A)(iv), the requirement of this subparagraph for a State is that the State agrees to—

''(I) assign such codes as the Secretary shall require to the children who are enrolled in the State Medicaid plan or the State CHIP plan through reliance on a finding made by an Express Lane agency for the duration of the State's election under this paragraph;

''(II) annually provide the Secretary with a statistically valid sample (that is approved by Secretary) of the children enrolled in such plans through reliance on such a finding by conducting a full Medicaid eligibility review of the children identified for such sample for purposes of determining an eligibility error rate (as described in clause (iv)) with respect to the enrollment of such children (and shall not include such children in any data or samples used for purposes of complying with a Medicaid Eligibility Quality Control (MEQC) review or a payment error rate measurement (PERM) requirement);

''(III) submit the error rate determined under subclause (II) to the Secretary;

''(IV) if such error rate exceeds 3 percent for either of the first 2 fiscal years in which the State elects to apply this paragraph, demonstrate to the satisfaction of the Secretary the specific corrective actions implemented by the State to improve upon such error rate; and

''(V) if such error rate exceeds 3 percent for any fiscal year in which the State elects to apply this paragraph, a reduction in the amount otherwise payable to the State under section 1903(a) for quarters for that fiscal year, equal to the total amount of erroneous excess payments determined for the fiscal year only with respect to the children included in the sample for the fiscal year that are in excess of a 3 percent error rate with respect to such children.

''(ii) NO PUNITIVE ACTION BASED ON ERROR RATE.—The Secretary shall not apply the error rate derived from the sample under clause (i) to the entire population of children enrolled in the State Medicaid plan or the State CHIP plan through reliance on a finding made by an Express Lane agency, or to the population of children enrolled in such plans on the basis of the State's regular procedures for determining eligibility, or penalize the State on the basis of such error rate in any manner other than the reduction of payments provided for under clause (i)(V).

''(iii) RULE OF CONSTRUCTION.—Nothing in this paragraph shall be construed as relieving a State that elects to apply this paragraph from being subject to a penalty under section 1903(u), for payments made under the State Medicaid plan with respect to ineligible individuals and families that are determined to exceed the error rate permitted under that section (as determined without regard to the error rate determined under clause (i)(II)).

''(iv) ERROR RATE DEFINED.—In this subparagraph, the term 'error rate' means the rate of erroneous excess payments for medical assistance (as defined in section 1903(u)(1)(D)) for the period involved, except that such payments shall be limited to individuals for which eligibility determinations are made under this paragraph and except that in applying this paragraph under title XXI, there shall be substituted for references to provisions of this title corresponding provisions within title XXI.

''(F) EXPRESS LANE AGENCY.—

''(i) IN GENERAL.—In this paragraph, the term 'Express Lane agency' means a public agency that—

''(I) is determined by the State Medicaid agency or the State CHIP agency (as applicable) to be capable of making the determinations of one or more eligibility requirements described in subparagraph (A)(i);

''(II) is identified in the State Medicaid plan or the State CHIP plan; and

''(III) notifies the child's family—

''(aa) of the information which shall be disclosed in accordance with this paragraph;

''(bb) that the information disclosed will be used solely for purposes of determining eligibility for medical assistance under the State Medicaid plan or for child health assistance under the State CHIP plan; and

''(cc) that the family may elect to not have the information disclosed for such purposes; and

''(IV) enters into, or is subject to, an interagency agreement to limit the disclosure and use of the information disclosed.

''(ii) INCLUSION OF SPECIFIC PUBLIC AGENCIES.—Such term includes the following:

''(I) A public agency that determines eligibility for assistance under any of the following:

''(aa) The temporary assistance for needy families program funded under part A of title IV.

''(bb) A State program funded under part D of title IV.

''(cc) The State Medicaid plan.

''(dd) The State CHIP plan.

''(ee) The Food and Nutrition Act of 2008 (7 U.S.C. 2011 et seq.).

''(ff) The Head Start Act (42 U.S.C. 9801 et seq.).

''(gg) The Richard B. Russell National School Lunch Act (42 U.S.C. 1751 et seq.).

''(hh) The Child Nutrition Act of 1966 (42 U.S.C. 1771 et seq.).

''(ii) The Child Care and Development Block Grant Act of 1990 (42 U.S.C. 9858 et seq.).

''(jj) The Stewart B. McKinney Homeless Assistance Act (42 U.S.C. 11301 et seq.).

''(kk) The United States Housing Act of 1937 (42 U.S.C. 1437 et seq.).

''(ll) The Native American Housing Assistance and Self-Determination Act of 1996 (25 U.S.C. 4101 et seq.).

''(II) A State-specified governmental agency that has fiscal liability or legal responsibility for the accuracy of the eligibility determination findings relied on by the State.

''(III) A public agency that is subject to an interagency agreement limiting the disclosure and use of the information disclosed for purposes of determining eligibility under the State Medicaid plan or the State CHIP plan.

''(iii) EXCLUSIONS.—Such term does not include an agency that determines eligibility for a program established under the Social Services Block Grant established under title XX or a private, for-profit organization.

''(iv) RULES OF CONSTRUCTION.—Nothing in this paragraph shall be construed as—

''(I) exempting a State Medicaid agency from complying with the requirements of section 1902(a)(4) relating to merit-based personnel standards for employees of the State Medicaid agency and safeguards against conflicts of interest); or

''(II) authorizing a State Medicaid agency that elects to use Express Lane agencies under this subparagraph to use the Express Lane option to avoid complying with such requirements for purposes of making eligibility determinations under the State Medicaid plan.

''(v) ADDITIONAL DEFINITIONS.—In this paragraph:

''(I) STATE.—The term 'State' means 1 of the 50 States or the District of Columbia.

''(II) STATE CHIP AGENCY.—The term 'State CHIP agency' means the State agency responsible for administering the State CHIP plan.

''(III) STATE CHIP PLAN.—The term 'State CHIP plan' means the State child health plan established under title XXI and includes any waiver of such plan.

''(IV) STATE MEDICAID AGENCY.—The term 'State Medicaid agency' means the State agency responsible for administering the State Medicaid plan.

''(V) STATE MEDICAID PLAN.—The term 'State Medicaid plan' means the State plan established under title XIX and includes any waiver of such plan.

''(G) CHILD DEFINED.—For purposes of this paragraph, the term 'child' means an individual under 19 years of age, or, at the option of a State, such higher age, not to exceed 21 years of age, as the State may elect.

''(H) APPLICATION.—This paragraph shall not apply with respect to eligibility determinations made after September 30, 2013.''.

(2) CHIP.—Section 2107(e)(1) (42 U.S.C. 1397gg(e)(1)) is amended by redesignating subparagraphs (B), (C), and (D) as subparagraphs (C), (D), and (E), respectively, and by inserting after subparagraph (A) the following new subparagraph:

''(B) Section 1902(e)(13) (relating to the State option to rely on findings from an Express Lane agency to help evaluate a child's eligibility for medical assistance).''.

(b) EVALUATION AND REPORT.—

(1) EVALUATION.—The Secretary shall conduct, by grant, contract, or interagency agreement, a comprehensive, independent evaluation of the option provided under the amendments made by subsection (a). Such evaluation shall include an analysis of the effectiveness of the option, and shall include—

(A) obtaining a statistically valid sample of the children who were enrolled in the State Medicaid plan or the State CHIP plan through reliance on a finding made by an Express Lane agency and determining the percentage of children who were erroneously enrolled in such plans;

(B) determining whether enrolling children in such plans through reliance on a finding made by an Express Lane agency improves the ability of a State to identify and enroll low-income, uninsured children who are eligible but not enrolled in such plans;

(C) evaluating the administrative costs or savings related to identifying and enrolling children in such plans through reliance on such findings, and the extent to which such costs differ from the costs that the State otherwise would have incurred to identify and enroll low-income, uninsured children who are eligible but not enrolled in such plans; and

(D) any recommendations for legislative or administrative changes that would improve the effectiveness of enrolling children in such plans through reliance on such findings.

(2) REPORT TO CONGRESS.—Not later than September 30, 2012, the Secretary shall submit a report to Congress on the results of the evaluation under paragraph (1).

(3) FUNDING.—

(A) IN GENERAL.—Out of any funds in the Treasury not otherwise appropriated, there is appropriated to the Secretary to carry out the evaluation under this subsection $5,000,000 for the period of fiscal years 2009 through 2012.

(B) BUDGET AUTHORITY.—Subparagraph (A) constitutes budget authority in advance of appropriations Act and represents the obligation of the Federal Government to provide for the payment of such amount to conduct the evaluation under this subsection.

(c) ELECTRONIC TRANSMISSION OF INFORMATION.—Section 1902 (42 U.S.C. 1396a) is amended by adding at the end the following new subsection:

''(dd) ELECTRONIC TRANSMISSION OF INFORMATION.—If the State agency determining eligibility for medical assistance under this title or child health assistance under title XXI verifies an element of eligibility based on information from an Express Lane Agency (as defined in subsection (e)(13)(F)), or from another public agency, then the applicant's signature under penalty of perjury shall not be required as to such element. Any signature requirement for an application for medical assistance may be satisfied through an electronic signature, as defined in section 1710(1) of the Government Paperwork Elimination Act (44 U.S.C. 3504 note). The requirements of subparagraphs (A) and (B) of section 1137(d)(2) may be met through evidence in digital or electronic form.''.

(d) AUTHORIZATION OF INFORMATION DISCLOSURE.—

(1) IN GENERAL.—Title XIX is amended by adding at the end the following new section:

''SEC. 1942. AUTHORIZATION TO RECEIVE RELEVANT INFORMATION.

''(a) IN GENERAL.—Notwithstanding any other provision of law, a Federal or State agency or private entity in possession of the sources of data directly relevant to eligibility determinations under this title (including eligibility files maintained by Express Lane agencies described in section 1902(e)(13)(F), information described in paragraph (2) or (3) of section 1137(a), vital records information about births in any State, and information described in sections 453(i) and 1902(a)(25)(I)) is authorized to convey such data or information to the State agency administering the State plan under this title, to the extent such conveyance meets the requirements of subsection (b).

''(b) REQUIREMENTS FOR CONVEYANCE.—Data or information may be conveyed pursuant to subsection (a) only if the following requirements are met:

''(1) The individual whose circumstances are described in the data or information (or such individual's parent, guardian, caretaker relative, or authorized representative) has either provided advance consent to disclosure or has not objected to disclosure after receiving advance notice of disclosure and a reasonable opportunity to object.

''(2) Such data or information are used solely for the purposes of—

''(A) identifying individuals who are eligible or potentially eligible for medical assistance under this title and enrolling or attempting to enroll such individuals in the State plan; and

''(B) verifying the eligibility of individuals for medical assistance under the State plan.

''(3) An interagency or other agreement, consistent with standards developed by the Secretary—

''(A) prevents the unauthorized use, disclosure, or modification of such data and otherwise meets applicable Federal requirements safeguarding privacy and data security; and

''(B) requires the State agency administering the State plan to use the data and information obtained under this section to seek to enroll individuals in the plan.

''(c) PENALTIES FOR IMPROPER DISCLOSURE.—

''(1) CIVIL MONEY PENALTY.—A private entity described in the subsection (a) that publishes, discloses, or makes known in any manner, or to any extent not authorized by Federal law, any information obtained under this section is subject to a civil money penalty in an amount equal to $10,000 for each such unauthorized publication or disclosure. The provisions of section 1128A (other than subsections (a) and (b) and the second sentence of subsection (f)) shall apply to a civil money penalty under this paragraph in the same manner as such provisions apply to a penalty or proceeding under section 1128A(a).

''(2) CRIMINAL PENALTY.—A private entity described in the subsection (a) that willfully publishes, discloses, or makes known in any manner, or to any extent not authorized by Federal law, any information obtained under this section shall be fined not more than $10,000 or imprisoned not more than 1 year, or both, for each such unauthorized publication or disclosure.

''(d) RULE OF CONSTRUCTION.—The limitations and requirements that apply to disclosure pursuant to this section shall not be construed to prohibit the conveyance or disclosure of data or information otherwise permitted under Federal law (without regard to this section).''.

(2) CONFORMING AMENDMENT TO TITLE XXI.—Section 2107(e)(1) (42 U.S.C. 1397gg(e)(1)), as amended by subsection (a)(2), is amended by adding at the end the following new subparagraph:

''(F) Section 1942 (relating to authorization to receive data directly relevant to eligibility determinations).''.

(3) CONFORMING AMENDMENT TO PROVIDE ACCESS TO DATA ABOUT ENROLLMENT IN INSURANCE FOR PURPOSES OF EVALUATING APPLICATIONS AND FOR CHIP.—Section 1902(a)(25)(I)(i) (42 U.S.C. 1396a(a)(25)(I)(i)) is amended—

(A) by inserting ''(and, at State option, individuals who apply or whose eligibility for medical assistance is being evaluated in accordance with section 1902(e)(13)(D))'' after ''with respect to individuals who are eligible''; and

(B) by inserting ''under this title (and, at State option, child health assistance under title XXI)'' after ''the State plan''.

(e) AUTHORIZATION FOR STATES ELECTING EXPRESS LANE OPTION TO RECEIVE CERTAIN DATA DIRECTLY RELEVANT TO DETERMINING ELIGIBILITY AND CORRECT AMOUNT OF ASSISTANCE.—The Secretary shall enter into such agreements as are necessary to permit a State that elects the Express Lane option under section 1902(e)(13) of the Social Security Act to receive data directly relevant to eligibility determinations and determining the correct amount of benefits under a State child health plan under CHIP or a State plan under Medicaid from the following:

(1) The National Directory of New Hires established under section 453(i) of the Social Security Act (42 U.S.C. 653(i)).

(2) Data regarding enrollment in insurance that may help to facilitate outreach and enrollment under the State Medicaid plan, the State CHIP plan, and such other programs as the Secretary may specify.

(f) EFFECTIVE DATE.—The amendments made by this section are effective on the date of the enactment of this Act.

Subtitle B—Reducing Barriers to Enrollment

SEC. 211. VERIFICATION OF DECLARATION OF CITIZENSHIP OR NATIONALITY FOR PURPOSES OF ELIGIBILITY FOR MEDICAID AND CHIP.

(a) ALTERNATIVE STATE PROCESS FOR VERIFICATION OF DECLARATION OF CITIZENSHIP OR NATIONALITY FOR PURPOSES OF ELIGIBILITY FOR MEDICAID.—

(1) ALTERNATIVE TO DOCUMENTATION REQUIREMENT.—

(A) IN GENERAL.—Section 1902 (42 U.S.C. 1396a), as amended by section 203(c), is amended—

(i) in subsection (a)(46)—

(I) by inserting ''(A)'' after ''(46)'';

(II) by adding ''and'' after the semicolon; and

(III) by adding at the end the following new subparagraph:

''(B) provide, with respect to an individual declaring to be a citizen or national of the United States for purposes of establishing eligibility under this title, that the State shall satisfy the requirements of—

''(i) section 1903(x); or

''(ii) subsection (ee);''; and

(ii) by adding at the end the following new subsection:

''(ee)(1) For purposes of subsection (a)(46)(B)(ii), the requirements of this subsection with respect to an individual declaring to be a citizen or national of the United States for purposes of establishing eligibility under this title, are, in lieu of requiring the individual to present satisfactory documentary evidence of citizenship or nationality under section 1903(x) (if the individual is not described in paragraph (2) of that section), as follows:

''(A) The State submits the name and social security number of the individual to the Commissioner of Social Security as part of the program established under paragraph (2).

''(B) If the State receives notice from the Commissioner of Social Security that the name or social security number, or the declaration of citizenship or nationality, of the individual is inconsistent with information in the records maintained by the Commissioner—

''(i) the State makes a reasonable effort to identify and address the causes of such inconsistency, including through typographical or other clerical errors, by contacting the individual to confirm the accuracy of the name or social security number submitted or declaration of citizenship or nationality and by taking such additional actions as the Secretary, through regulation or other guidance, or the State may identify, and continues to provide the individual with medical assistance while making such effort; and

''(ii) in the case such inconsistency is not resolved under clause (i), the State—

''(I) notifies the individual of such fact;

''(II) provides the individual with a period of 90 days from the date on which the notice required under subclause (I) is received by the individual to either present satisfactory documentary evidence of citizenship or nationality (as defined in section 1903(x)(3)) or resolve the inconsistency with the Commissioner of Social Security (and continues to provide the individual with medical assistance during such 90-day period); and

''(III) disenrolls the individual from the State plan under this title within 30 days after the end of such 90-day period if no such documentary evidence is presented or if such inconsistency is not resolved.

''(2)(A) Each State electing to satisfy the requirements of this subsection for purposes of section 1902(a)(46)(B) shall establish a program under which the State submits at least monthly to the Commissioner of Social Security for comparison of the name and social security number, of each individual newly enrolled in the State plan under this title that month who is not described in section 1903(x)(2) and who declares to be a United States citizen or national, with information in records maintained by the Commissioner.

''(B) In establishing the State program under this paragraph, the State may enter into an agreement with the Commissioner of Social Security—

''(i) to provide, through an on-line system or otherwise, for the electronic submission of, and response to, the information submitted under subparagraph (A) for an individual enrolled in the State plan under this title who declares to be citizen or national on at least a monthly basis; or

''(ii) to provide for a determination of the consistency of the information submitted with the information maintained in the records of the Commissioner through such other method as agreed to by the State and the Commissioner and approved by the Secretary, provided that such method is no more burdensome for individuals to comply with than any burdens that may apply under a method described in clause (i).

''(C) The program established under this paragraph shall provide that, in the case of any individual who is required to submit a social security number to the State under subparagraph (A) and who is unable to provide the State with such number, shall be provided with at least the reasonable opportunity to present satisfactory documentary evidence of citizenship or nationality (as defined in section 1903(x)(3)) as is provided under clauses (i) and (ii) of section 1137(d)(4)(A) to an individual for the submittal to the State of evidence indicating a satisfactory immigration status.

''(3)(A) The State agency implementing the plan approved under this title shall, at such times and in such form as the Secretary may specify, provide information on the percentage each month that the inconsistent submissions bears to the total submissions made for comparison for such month. For purposes of this subparagraph, a name, social security number, or declaration of citizenship or nationality of an individual shall be treated as inconsistent and included in the determination of such percentage only if—

''(i) the information submitted by the individual is not consistent with information in records maintained by the Commissioner of Social Security;

''(ii) the inconsistency is not resolved by the State;

''(iii) the individual was provided with a reasonable period of time to resolve the inconsistency with the Commissioner of Social Security or provide satisfactory documentation of citizenship status and did not successfully resolve such inconsistency; and

''(iv) payment has been made for an item or service furnished to the individual under this title.

''(B) If, for any fiscal year, the average monthly percentage determined under subparagraph (A) is greater than 3 percent—

''(i) the State shall develop and adopt a corrective plan to review its procedures for verifying the identities of individuals seeking to enroll in the State plan under this title and to identify and implement changes in such procedures to improve their accuracy; and

''(ii) pay to the Secretary an amount equal to the amount which bears the same ratio to the total payments under the State plan for the fiscal year for providing medical assistance to individuals who provided inconsistent information as the number of individuals with inconsistent information in excess of 3 percent of such total submitted bears to the total number of individuals with inconsistent information.

''(C) The Secretary may waive, in certain limited cases, all or part of the payment under subparagraph (B)(ii) if the State is unable to reach the allowable error rate despite a good faith effort by such State.

''(D) Subparagraphs (A) and (B) shall not apply to a State for a fiscal year if there is an agreement described in paragraph (2)(B) in effect as of the close of the fiscal year that provides for the submission on a real-time basis of the information described in such paragraph.

''(4) Nothing in this subsection shall affect the rights of any individual under this title to appeal any disenrollment from a State plan.''.

(B) COSTS OF IMPLEMENTING AND MAINTAINING SYSTEM.—Section 1903(a)(3) (42 U.S.C. 1396b(a)(3)) is amended—

(i) by striking ''plus'' at the end of subparagraph (E) and inserting ''and'', and

(ii) by adding at the end the following new subparagraph:

''(F)(i) 90 percent of the sums expended during the quarter as are attributable to the design, development, or installation of such mechanized verification and information retrieval systems as the Secretary determines are necessary to implement section 1902(ee) (including a system described in paragraph (2)(B) thereof), and

''(ii) 75 percent of the sums expended during the quarter as are attributable to the operation of systems to which clause (i) applies, plus''.

(2) LIMITATION ON WAIVER AUTHORITY.—Notwithstanding any provision of section 1115 of the Social Security Act (42 U.S.C. 1315), or any other provision of law, the Secretary may not waive the requirements of section 1902(a)(46)(B) of such Act (42 U.S.C. 1396a(a)(46)(B)) with respect to a State.

(3) CONFORMING AMENDMENTS.—Section 1903 (42 U.S.C. 1396b) is amended—

(A) in subsection (i)(22), by striking ''subsection (x)'' and inserting ''section 1902(a)(46)(B)''; and

(B) in subsection (x)(1), by striking ''subsection (i)(22)'' and inserting ''section 1902(a)(46)(B)(i)''.

(4) APPROPRIATION.—Out of any money in the Treasury of the United States not otherwise appropriated, there are appropriated to the Commissioner of Social Security $5,000,000 to remain available until expended to carry out the Commissioner's responsibilities under section 1902(ee) of the Social Security Act, as added by subsection (a).

(b) CLARIFICATION OF REQUIREMENTS RELATING TO PRESENTATION OF SATISFACTORY DOCUMENTARY EVIDENCE OF CITIZENSHIP OR NATIONALITY.—

(1) ACCEPTANCE OF DOCUMENTARY EVIDENCE ISSUED BY A FEDERALLY RECOGNIZED INDIAN TRIBE.—Section 1903(x)(3)(B) (42 U.S.C. 1396b(x)(3)(B)) is amended—

(A) by redesignating clause (v) as clause (vi); and

(B) by inserting after clause (iv), the following new clause:

''(v)(I) Except as provided in subclause (II), a document issued by a federally recognized Indian tribe evidencing membership or enrollment in, or affiliation with, such tribe (such as a tribal enrollment card or certificate of degree of Indian blood).

''(II) With respect to those federally recognized Indian tribes located within States having an international border whose membership includes individuals who are not citizens of the United States, the Secretary shall, after consulting with such tribes, issue regulations authorizing the presentation of such other forms of documentation (including tribal documentation, if appropriate) that the Secretary determines to be satisfactory documentary evidence of citizenship or nationality for purposes of satisfying the requirement of this subsection.''.

(2) REQUIREMENT TO PROVIDE REASONABLE OPPORTUNITY TO PRESENT SATISFACTORY DOCUMENTARY EVIDENCE.—Section 1903(x) (42 U.S.C. 1396b(x)) is amended by adding at the end the following new paragraph:

''(4) In the case of an individual declaring to be a citizen or national of the United States with respect to whom a State requires the presentation of satisfactory documentary evidence of citizenship or nationality under section 1902(a)(46)(B)(i), the individual shall be provided at least the reasonable opportunity to present satisfactory documentary evidence of citizenship or nationality under this subsection as is provided under clauses (i) and (ii) of section 1137(d)(4)(A) to an individual for the submittal to the State of evidence indicating a satisfactory immigration status.''.

(3) CHILDREN BORN IN THE UNITED STATES TO MOTHERS ELIGIBLE FOR MEDICAID.—

(A) CLARIFICATION OF RULES.—Section 1903(x) (42 U.S.C. 1396b(x)), as amended by paragraph (2), is amended—

(i) in paragraph (2)—

(I) in subparagraph (C), by striking ''or'' at the end;

(II) by redesignating subparagraph (D) as subparagraph (E); and

(III) by inserting after subparagraph (C) the following new subparagraph:

''(D) pursuant to the application of section 1902(e)(4) (and, in the case of an individual who is eligible for medical assistance on such basis, the individual shall be deemed to have provided satisfactory documentary evidence of citizenship or nationality and shall not be required to provide further documentary evidence on any date that occurs during or after the period in which the individual is eligible for medical assistance on such basis); or''; and

(ii) by adding at the end the following new paragraph:

''(5) Nothing in subparagraph (A) or (B) of section 1902(a)(46), the preceding paragraphs of this subsection, or the Deficit Reduction Act of 2005, including section 6036 of such Act, shall be construed as changing the requirement of section 1902(e)(4) that a child born in the United States to an alien mother for whom medical assistance for the delivery of such child is available as treatment of an emergency medical condition pursuant to subsection (v) shall be deemed eligible for medical assistance during the first year of such child's life.''.

(B) STATE REQUIREMENT TO ISSUE SEPARATE IDENTIFICATION NUMBER.—Section 1902(e)(4) (42 U.S.C. 1396a(e)(4)) is amended by adding at the end the following new sentence: ''Notwithstanding the preceding sentence, in the case of a child who is born in the United States to an alien mother for whom medical assistance for the delivery of the child is made available pursuant to section 1903(v), the State immediately shall issue a separate identification number for the child upon notification by the facility at which such delivery occurred of the child's birth.''.

(4) TECHNICAL AMENDMENTS.—Section 1903(x)(2) (42 U.S.C. 1396b(x)) is amended—

(A) in subparagraph (B)—

(i) by realigning the left margin of the matter preceding clause (i) 2 ems to the left; and

(ii) by realigning the left margins of clauses (i) and (ii), respectively, 2 ems to the left; and

(B) in subparagraph (C)—

(i) by realigning the left margin of the matter preceding clause (i) 2 ems to the left; and

(ii) by realigning the left margins of clauses (i) and (ii), respectively, 2 ems to the left.

(c) APPLICATION OF DOCUMENTATION SYSTEM TO CHIP.—

(1) IN GENERAL.—Section 2105(c) (42 U.S.C. 1397ee(c)), as amended by section 114(a), is amended by adding at the end the following new paragraph:

''(9) CITIZENSHIP DOCUMENTATION REQUIREMENTS.—

''(A) IN GENERAL.—No payment may be made under this section with respect to an individual who has, or is, declared to be a citizen or national of the United States for purposes of establishing eligibility under this title unless the State meets the requirements of section 1902(a)(46)(B) with respect to the individual.

''(B) ENHANCED PAYMENTS.—Notwithstanding subsection (b), the enhanced FMAP with respect to payments under subsection (a) for expenditures described in clause (i) or (ii) of section 1903(a)(3)(F) necessary to comply with subparagraph (A) shall in no event be less than 90 percent and 75 percent, respectively.''.

(2) NONAPPLICATION OF ADMINISTRATIVE EXPENDITURES CAP.—Section 2105(c)(2)(C) (42 U.S.C. 1397ee(c)(2)(C)), as amended by section 202(b), is amended by adding at the end the following:

''(ii) EXPENDITURES TO COMPLY WITH CITIZENSHIP OR NATIONALITY VERIFICATION REQUIREMENTS.—Expenditures necessary for the State to comply with paragraph (9)(A).''.

(d) EFFECTIVE DATE.—

(1) IN GENERAL.—

(A) IN GENERAL.—Except as provided in subparagraph (B), the amendments made by this section shall take effect on January 1, 2010.

(B) TECHNICAL AMENDMENTS.—The amendments made by—

(i) paragraphs (1), (2), and (3) of subsection (b) shall take effect as if included in the enactment of section 6036 of the Deficit Reduction Act of 2005 (Public Law 109–171; 120 Stat. 80); and

(ii) paragraph (4) of subsection (b) shall take effect as if included in the enactment of section 405 of division B of the Tax Relief and Health Care Act of 2006 (Public Law 109–432; 120 Stat. 2996).

(2) RESTORATION OF ELIGIBILITY.—In the case of an individual who, during the period that began on July 1, 2006, and ends on October 1, 2009, was determined to be ineligible for medical assistance under a State Medicaid plan, including any waiver of such plan, solely as a result of the application of subsections (i)(22) and (x) of section 1903 of the Social Security Act (as in effect during such period), but who would have been determined eligible for such assistance if such subsections, as amended by subsection (b), had applied to the individual, a State may deem the individual to be eligible for such assistance as of the date that the individual was determined to be ineligible for such medical assistance on such basis.

(3) SPECIAL TRANSITION RULE FOR INDIANS.—During the period that begins on July 1, 2006, and ends on the effective date of final regulations issued under subclause (II) of section 1903(x)(3)(B)(v) of the Social Security Act (42 U.S.C. 1396b(x)(3)(B)(v)) (as added by subsection (b)(1)(B)), an individual who is a member of a federally-recognized Indian tribe described in subclause (II) of that section who presents a document described in subclause (I) of such section that is issued by such Indian tribe, shall be deemed to have presented satisfactory evidence of citizenship or nationality for purposes of satisfying the requirement of subsection (x) of section 1903 of such Act.

SEC. 212. REDUCING ADMINISTRATIVE BARRIERS TO ENROLLMENT.

Section 2102(b) (42 U.S.C. 1397bb(b)) is amended—

(1) by redesignating paragraph (4) as paragraph (5); and

(2) by inserting after paragraph (3) the following new paragraph:

''(4) REDUCTION OF ADMINISTRATIVE BARRIERS TO ENROLLMENT.—

''(A) IN GENERAL.—Subject to subparagraph (B), the plan shall include a description of the procedures used to reduce administrative barriers to the enrollment of children and pregnant women who are eligible for medical assistance under title XIX or for child health assistance or health benefits coverage under this title. Such procedures shall be established and revised as often as the State determines appropriate to take into account the most recent information available to the State identifying such barriers.

''(B) DEEMED COMPLIANCE IF JOINT APPLICATION AND RENEWAL PROCESS THAT PERMITS APPLICATION OTHER THAN IN PERSON.—A State shall be deemed to comply with subparagraph (A) if the State's application and renewal forms and supplemental forms (if any) and information verification process is the same for purposes of establishing and renewing eligibility for children and pregnant women for medical assistance under title XIX and child health assistance under this title, and such process does not require an application to be made in person or a face-to-face interview.''.

SEC. 213. MODEL OF INTERSTATE COORDINATED ENROLLMENT AND COVERAGE PROCESS.

(a) IN GENERAL.—In order to assure continuity of coverage of low-income children under the Medicaid program and the State Children's Health Insurance Program (CHIP), not later than 18 months after the date of the enactment of this Act, the Secretary of Health and Human Services, in consultation with State Medicaid and CHIP directors and organizations representing program beneficiaries, shall develop a model process for the coordination of the enrollment, retention, and coverage under such programs of

children who, because of migration of families, emergency evacuations, natural or other disasters, public health emergencies, educational needs, or otherwise, frequently change their State of residency or otherwise are temporarily located outside of the State of their residency.

(b) REPORT TO CONGRESS.—After development of such model process, the Secretary of Health and Human Services shall submit to Congress a report describing additional steps or authority needed to make further improvements to coordinate the enrollment, retention, and coverage under CHIP and Medicaid of children described in subsection (a).

SEC. 214. PERMITTING STATES TO ENSURE COVERAGE WITHOUT A 5-YEAR DELAY OF CERTAIN CHILDREN AND PREGNANT WOMEN UNDER THE MEDICAID PROGRAM AND CHIP.

(a) MEDICAID PROGRAM.—Section 1903(v) (42 U.S.C. 1396b(v)) is amended—

(1) in paragraph (1), by striking ''paragraph (2)'' and inserting ''paragraphs (2) and (4)''; and

(2) by adding at the end the following new paragraph:

''(4)(A) A State may elect (in a plan amendment under this title) to provide medical assistance under this title, notwithstanding sections 401(a), 402(b), 403, and 421 of the Personal Responsibility and Work Opportunity Reconciliation Act of 1996, to children and pregnant women who are lawfully residing in the United States (including battered individuals described in section 431(c) of such Act) and who are otherwise eligible for such assistance, within either or both of the following eligibility categories:

''(i) PREGNANT WOMEN.—Women during pregnancy (and during the 60-day period beginning on the last day of the pregnancy).

''(ii) CHILDREN.—Individuals under 21 years of age, including optional targeted low-income children described in section 1905(u)(2)(B).

''(B) In the case of a State that has elected to provide medical assistance to a category of aliens under subparagraph (A), no debt shall accrue under an affidavit of support against any sponsor of such an alien on the basis of provision of assistance to such category and the cost of such assistance shall not be considered as an unreimbursed cost.

''(C) A State shall demonstrate that the State requires an individual provided medical assistance as a result of an election by the State under subparagraph (A), to provide the State, as part of the State's ongoing eligibility redetermination requirements and procedures, with documentation or other evidence that the individual is lawfully residing in the United States.''.

(b) CHIP.—Section 2107(e)(1) (42 U.S.C. 1397gg(e)(1)), as amended by sections 203(a)(2) and 203(d)(2), is amended by redesignating subparagraphs (E) and (F) as subparagraphs (F) and (G), respectively and by inserting after subparagraph (D) the following new subparagraph:

''(E) Paragraph (4) of section 1903(v) (relating to optional coverage of categories of lawfully residing immigrant children or pregnant women), but only if the State has elected to apply such paragraph with respect to such category of children or pregnant women under title XIX.''.

TITLE III—REDUCING BARRIERS TO PROVIDING PREMIUM ASSISTANCE

Subtitle A—Additional State Option for Providing Premium Assistance

SEC. 301. ADDITIONAL STATE OPTION FOR PROVIDING PREMIUM ASSISTANCE.

(a) CHIP.—

(1) IN GENERAL.—Section 2105(c) (42 U.S.C. 1397ee(c)), as amended by sections 114(a) and 211(c), is amended by adding at the end the following:

''(10) STATE OPTION TO OFFER PREMIUM ASSISTANCE.—

''(A) IN GENERAL.—A State may elect to offer a premium assistance subsidy (as defined in subparagraph (C)) for qualified employer-sponsored coverage (as defined in subparagraph (B)) to all targeted low-income children who are eligible for child health assistance under the plan and have access to such coverage in accordance with the requirements of this paragraph. No subsidy shall be provided to a targeted low-income child under this paragraph unless the child (or the child's parent) voluntarily elects to receive such a subsidy. A State may not require such an election as a condition of receipt of child health assistance.

''(B) QUALIFIED EMPLOYER-SPONSORED COVERAGE.—

''(i) IN GENERAL.—Subject to clause (ii), in this paragraph, the term 'qualified employer-sponsored coverage' means a group health plan or health insurance coverage offered through an employer—

''(I) that qualifies as creditable coverage as a group health plan under section 2701(c)(1) of the Public Health Service Act;

''(II) for which the employer contribution toward any premium for such coverage is at least 40 percent; and

''(III) that is offered to all individuals in a manner that would be considered a nondiscriminatory eligibility classification for purposes of paragraph (3)(A)(ii) of section 105(h) of the Internal Revenue Code of 1986 (but determined without regard to clause (i) of subparagraph (B) of such paragraph).

''(ii) EXCEPTION.—Such term does not include coverage consisting of—

''(I) benefits provided under a health flexible spending arrangement (as defined in section 106(c)(2) of the Internal Revenue Code of 1986); or

''(II) a high deductible health plan (as defined in section 223(c)(2) of such Code), without regard to whether the plan is purchased in conjunction with a health savings account (as defined under section 223(d) of such Code).

''(C) PREMIUM ASSISTANCE SUBSIDY.—

''(i) IN GENERAL.—In this paragraph, the term 'premium assistance subsidy' means, with respect to a targeted low-income child, the amount equal to the difference between the employee contribution required for enrollment only of the employee under qualified employer-sponsored coverage and the employee contribution required for enrollment of the employee and the child in such coverage, less any applicable premium cost-sharing applied under the State child health plan (subject to the limitations imposed under section 2103(e), including the requirement to count the total amount of the employee contribution required for enrollment of the employee and the child in such coverage toward the annual aggregate cost-sharing limit applied under paragraph (3)(B) of such section).

''(ii) STATE PAYMENT OPTION.—A State may provide a premium assistance subsidy either as reimbursement to an employee for out-of-pocket expenditures or, subject to clause (iii), directly to the employee's employer.

''(iii) EMPLOYER OPT-OUT.—An employer may notify a State that it elects to opt-out of being directly paid a premium assistance subsidy on behalf of an employee. In the event of such a notification, an employer shall withhold the total amount of the employee contribution required for enrollment of the employee and the child in the qualified employer-sponsored coverage and the State shall pay the premium assistance subsidy directly to the employee.

''(iv) TREATMENT AS CHILD HEALTH ASSISTANCE.—Expenditures for the provision of premium assistance subsidies shall be considered child health assistance described in paragraph (1)(C) of subsection (a) for purposes of making payments under that subsection.

''(D) APPLICATION OF SECONDARY PAYOR RULES.—The State shall be a secondary payor for any items or services provided under the qualified employer-sponsored coverage for which the State provides child health assistance under the State child health plan.

''(E) REQUIREMENT TO PROVIDE SUPPLEMENTAL COVERAGE FOR BENEFITS AND COST-SHARING PROTECTION PROVIDED UNDER THE STATE CHILD HEALTH PLAN.—

''(i) IN GENERAL.—Notwithstanding section 2110(b)(1)(C), the State shall provide for each targeted low-income child enrolled in qualified employer-sponsored coverage, supplemental coverage consisting of—

''(I) items or services that are not covered, or are only partially covered, under the qualified employer-sponsored coverage; and

''(II) cost-sharing protection consistent with section 2103(e).

''(ii) RECORD KEEPING REQUIREMENTS.—For purposes of carrying out clause (i), a State may elect to directly pay out-of-pocket expenditures for cost-sharing imposed under the qualified employer-sponsored coverage and collect or not collect all or any portion of such expenditures from the parent of the child.

''(F) APPLICATION OF WAITING PERIOD IMPOSED UNDER THE STATE.—Any waiting period imposed under the State child health plan prior to the provision of child health assistance to a targeted low-income child under the State plan shall apply to the same extent to the provision of a premium assistance subsidy for the child under this paragraph.

''(G) OPT-OUT PERMITTED FOR ANY MONTH.—A State shall establish a process for permitting the parent of a targeted low-income child receiving a premium assistance subsidy to disenroll the child from the qualified employer-sponsored coverage and enroll the child in, and receive child health assistance under, the State child health plan, effective on the first day of any month for which the child is eligible for such assistance and in a manner that ensures continuity of coverage for the child.

''(H) APPLICATION TO PARENTS.—If a State provides child health assistance or health benefits coverage to parents of a targeted low-income child in accordance with section 2111(b), the State may elect to offer a premium assistance subsidy to a parent of a targeted low-income child who is eligible for such a subsidy under this paragraph in the same manner as the State offers such a subsidy for the enrollment of the child in qualified employer-sponsored coverage, except that—

''(i) the amount of the premium assistance subsidy shall be increased to take into account the cost of the enrollment of the parent in the qualified employer-sponsored coverage or, at the option of the State if the State determines it cost-effective, the cost of the enrollment of the child's family in such coverage; and

''(ii) any reference in this paragraph to a child is deemed to include a reference to the parent or, if applicable under clause (i), the family of the child.

''(I) ADDITIONAL STATE OPTION FOR PROVIDING PREMIUM ASSISTANCE.—

''(i) IN GENERAL.—A State may establish an employer-family premium assistance purchasing pool for employers with less than 250 employees who have at least 1 employee who is a pregnant woman eligible for assistance under the State child health plan (including through the application of an option described in section 2112(f)) or a member of a family with at least 1 targeted low-income child and to provide a premium assistance

subsidy under this paragraph for enrollment in coverage made available through such pool.

''(ii) ACCESS TO CHOICE OF COVERAGE.—A State that elects the option under clause (i) shall identify and offer access to not less than 2 private health plans that are health benefits coverage that is equivalent to the benefits coverage in a benchmark benefit package described in section 2103(b) or benchmark-equivalent coverage that meets the requirements of section 2103(a)(2) for employees described in clause (i).

''(iii) CLARIFICATION OF PAYMENT FOR ADMINISTRATIVE EXPENDITURES.—Nothing in this subparagraph shall be construed as permitting payment under this section for administrative expenditures attributable to the establishment or operation of such pool, except to the extent that such payment would otherwise be permitted under this title.

''(J) NO EFFECT ON PREMIUM ASSISTANCE WAIVER PROGRAMS.—Nothing in this paragraph shall be construed as limiting the authority of a State to offer premium assistance under section 1906 or 1906A, a waiver described in paragraph (2)(B) or (3), a waiver approved under section 1115, or other authority in effect prior to the date of enactment of the Children's Health Insurance Program Reauthorization Act of 2009.

''(K) NOTICE OF AVAILABILITY.—If a State elects to provide premium assistance subsidies in accordance with this paragraph, the State shall—

''(i) include on any application or enrollment form for child health assistance a notice of the availability of premium assistance subsidies for the enrollment of targeted low-income children in qualified employer-sponsored coverage;

''(ii) provide, as part of the application and enrollment process under the State child health plan, information describing the availability of such subsidies and how to elect to obtain such a subsidy; and

''(iii) establish such other procedures as the State determines necessary to ensure that parents are fully informed of the choices for receiving child health assistance under the State child health plan or through the receipt of premium assistance subsidies.

''(L) APPLICATION TO QUALIFIED EMPLOYER-SPONSORED BENCHMARK COVERAGE.—If a group health plan or health insurance coverage offered through an employer is certified by an actuary as health benefits coverage that is equivalent to the benefits coverage in a benchmark benefit package described in section 2103(b) or benchmark-equivalent coverage that meets the requirements of section 2103(a)(2), the State may provide premium assistance subsidies for enrollment of targeted low-income children in such group health plan or health insurance coverage in the same manner as such subsidies are provided under this paragraph for enrollment in qualified employer-sponsored coverage, but without regard to the requirement to provide supplemental coverage for benefits and cost-sharing protection provided under the State child health plan under subparagraph (E).

''(M) SATISFACTION OF COST-EFFECTIVENESS TEST.—Premium assistance subsidies for qualified employer-sponsored coverage offered under this paragraph shall be deemed to meet the requirement of subparagraph (A) of paragraph (3).

''(N) COORDINATION WITH MEDICAID.—In the case of a targeted low-income child who receives child health assistance through a State plan under title XIX and who voluntarily elects to receive a premium assistance subsidy under this section, the provisions of section 1906A shall apply and shall supersede any other provisions of this paragraph that are inconsistent with such section.''.

(2) DETERMINATION OF COST-EFFECTIVENESS FOR PREMIUM ASSISTANCE OR PURCHASE OF FAMILY COVERAGE.—

(A) IN GENERAL.—Section 2105(c)(3)(A) (42 U.S.C. 1397ee(c)(3)(A)) is amended by striking ''relative to'' and all that follows through the comma and inserting ''relative to

''(i) the amount of expenditures under the State child health plan, including administrative expenditures, that the State would have made to provide comparable coverage of the targeted low-income child involved or the family involved (as applicable); or

''(ii) the aggregate amount of expenditures that the State would have made under the State child health plan, including administrative expenditures, for providing coverage under such plan for all such children or families.''.

(B) NONAPPLICATION TO PREVIOUSLY APPROVED COVERAGE.—The amendment made by subparagraph (A) shall not apply to coverage the purchase of which has been approved by the Secretary under section 2105(c)(3) of the Social Security Act prior to the date of enactment of this Act.

(b) MEDICAID.—Title XIX is amended by inserting after section 1906 the following new section:

''PREMIUM ASSISTANCE OPTION FOR CHILDREN

''SEC. 1906A. (a) IN GENERAL.—A State may elect to offer a premium assistance subsidy (as defined in subsection (c)) for qualified employer-sponsored coverage (as defined in subsection (b)) to all individuals under age 19 who are entitled to medical assistance under this title (and to the parent of such an individual) who have access to such coverage if the State meets the requirements of this section.

''(b) QUALIFIED EMPLOYER-SPONSORED COVERAGE.—

''(1) IN GENERAL.—Subject to paragraph (2)), in this paragraph, the term 'qualified employer-sponsored coverage' means a group health plan or health insurance coverage offered through an employer—

''(A) that qualifies as creditable coverage as a group health plan under section 2701(c)(1) of the Public Health Service Act;

''(B) for which the employer contribution toward any premium for such coverage is at least 40 percent; and

''(C) that is offered to all individuals in a manner that would be considered a nondiscriminatory eligibility classification for purposes of paragraph (3)(A)(ii) of section 105(h) of the Internal Revenue Code of 1986 (but determined without regard to clause (i) of subparagraph (B) of such paragraph).

''(2) EXCEPTION.—Such term does not include coverage consisting of—

''(A) benefits provided under a health flexible spending arrangement (as defined in section 106(c)(2) of the Internal Revenue Code of 1986); or

''(B) a high deductible health plan (as defined in section 223(c)(2) of such Code), without regard to whether the plan is purchased in conjunction with a health savings account (as defined under section 223(d) of such Code).

''(3) TREATMENT AS THIRD PARTY LIABILITY.—The State shall treat the coverage provided under qualified employer-sponsored coverage as a third party liability under section 1902(a)(25).

''(c) PREMIUM ASSISTANCE SUBSIDY.—In this section, the term 'premium assistance subsidy' means the amount of the employee contribution for enrollment in the qualified employer-sponsored coverage by the individual under age 19 or by the individual's family. Premium assistance subsidies under this section shall be considered, for purposes of section 1903(a), to be a payment for medical assistance.

''(d) VOLUNTARY PARTICIPATION.—

''(1) EMPLOYERS.—Participation by an employer in a premium assistance subsidy offered by a State under this section shall be voluntary. An employer may notify a State that it elects to opt-out of being directly paid a premium assistance subsidy on behalf of an employee.

''(2) BENEFICIARIES.—No subsidy shall be provided to an individual under age 19 under this section unless the individual (or the individual's parent) voluntarily elects to receive such a subsidy. A State may not require such an election as a condition of receipt of medical assistance. State may not require, as a condition of an individual under age 19 (or the individual's parent) being or remaining eligible for medical assistance under this title, apply for enrollment in qualified employer-sponsored coverage under this section.

''(3) OPT-OUT PERMITTED FOR ANY MONTH.—A State shall establish a process for permitting the parent of an individual under age 19 receiving a premium assistance subsidy to disenroll the individual from the qualified employer-sponsored coverage.

''(e) REQUIREMENT TO PAY PREMIUMS AND COST-SHARING AND PROVIDE SUPPLEMENTAL COVERAGE.—In the case of the participation of an individual under age 19 (or the individual's parent) in a premium assistance subsidy under this section for qualified employer-sponsored coverage, the State shall provide for payment of all enrollee premiums for enrollment in such coverage and all deductibles, coinsurance, and other cost-sharing obligations for items and services otherwise covered under the State plan under this title (exceeding the amount otherwise permitted under section 1916 or, if applicable, section 1916A). The fact that an individual under age 19 (or a parent) elects to enroll in qualified employer-sponsored coverage under this section shall not change the individual's (or parent's) eligibility for medical assistance under the State plan, except insofar as section 1902(a)(25) provides that payments for such assistance shall first be made under such coverage.''.

(c) GAO STUDY AND REPORT.—Not later than January 1, 2010, the Comptroller General of the United States shall study cost and coverage issues relating to any State premium assistance programs for which Federal matching payments are made under title XIX or XXI of the Social Security Act, including under waiver authority, and shall submit a report to the Committee on Finance of the Senate and the Committee on Energy and Commerce of the House of Representatives on the results of such study.

SEC. 302. OUTREACH, EDUCATION, AND ENROLLMENT ASSISTANCE.

(a) REQUIREMENT TO INCLUDE DESCRIPTION OF OUTREACH, EDUCATION, AND ENROLLMENT EFFORTS RELATED TO PREMIUM ASSISTANCE SUBSIDIES IN STATE CHILD HEALTH PLAN.—Section 2102(c) (42 U.S.C. 1397bb(c)) is amended by adding at the end the following new paragraph:

''(3) PREMIUM ASSISTANCE SUBSIDIES.—In the case of a State that provides for premium assistance subsidies under the State child health plan in accordance with paragraph (2)(B), (3), or (10) of section 2105(c), or a waiver approved under section 1115, outreach, education, and enrollment assistance for families of children likely to be eligible for such subsidies, to inform such families of the availability of, and to assist them in enrolling their children in, such subsidies, and for employers likely to provide coverage that is eligible for such subsidies, including the specific, significant resources the State intends to apply to educate employers about the availability of premium assistance subsidies under the State child health plan.''.

(b) NONAPPLICATION OF 10 PERCENT LIMIT ON OUTREACH AND CERTAIN OTHER EXPENDITURES.—Section 2105(c)(2)(C) (42 U.S.C. 1397ee(c)(2)(C)), as amended by section 211(c)(2), is amended by adding at the end the following new clause:

''(iii) EXPENDITURES FOR OUTREACH TO INCREASE THE ENROLLMENT OF CHILDREN UNDER THIS TITLE AND TITLE xix THROUGH PREMIUM ASSISTANCE SUBSIDIES.—Expenditures for outreach activities to families of children likely to be eligible for premium assistance subsidies in accordance with paragraph (2)(B), (3), or (10), or a waiver approved under section 1115, to inform such families of the availability of, and to assist them in enrolling their children in, such subsidies, and to employers likely to provide qualified employer-sponsored coverage (as defined in subparagraph (B) of such paragraph), but not to exceed an amount equal to 1.25 percent of the maximum amount permitted to be expended under subparagraph (A) for items described in subsection (a)(1)(D).''.

Subtitle B—Coordinating Premium Assistance With Private Coverage

SEC. 311. SPECIAL ENROLLMENT PERIOD UNDER GROUP HEALTH PLANS IN CASE OF TERMINATION OF MEDICAID OR CHIP COVERAGE OR ELIGIBILITY FOR ASSISTANCE IN PURCHASE OF EMPLOYMENT-BASED COVERAGE; COORDINATION OF COVERAGE.

(a) AMENDMENTS TO INTERNAL REVENUE CODE OF 1986.—Section 9801(f) of the Internal Revenue Code of 1986 (relating to special enrollment periods) is amended by adding at the end the following new paragraph:

''(3) SPECIAL RULES RELATING TO MEDICAID AND CHIP.—

''(A) IN GENERAL.—A group health plan shall permit an employee who is eligible, but not enrolled, for coverage under the terms of the plan (or a dependent of such an employee if the dependent is eligible, but not enrolled, for coverage under such terms) to enroll for coverage under the terms of the plan if either of the following conditions is met:

''(i) TERMINATION OF MEDICAID OR CHIP COVERAGE.—The employee or dependent is covered under a Medicaid plan under title XIX of the Social Security Act or under a State child health plan under title XXI of such Act and coverage of the employee or dependent under such a plan is terminated as a result of loss of eligibility for such coverage and the employee requests coverage under the group health plan not later than 60 days after the date of termination of such coverage.

''(ii) ELIGIBILITY FOR EMPLOYMENT ASSISTANCE UNDER MEDICAID OR CHIP.—The employee or dependent becomes eligible for assistance, with respect to coverage under the group health plan under such Medicaid plan or State child health plan (including under any waiver or demonstration project conducted under or in relation to such a plan), if the employee requests coverage under the group health plan not later than 60 days after the date the employee or dependent is determined to be eligible for such assistance.

''(B) EMPLOYEE OUTREACH AND DISCLOSURE.—

''(i) OUTREACH TO EMPLOYEES REGARDING AVAILABILITY OF MEDICAID AND CHIP COVERAGE.—

''(I) IN GENERAL.—Each employer that maintains a group health plan in a State that provides medical assistance under a State Medicaid plan under title XIX of the Social Security Act, or child health assistance under a State child health plan under title XXI of such Act, in the form of premium assistance for the purchase of coverage under a group health plan, shall provide to each employee a written notice informing the employee of potential opportunities then currently available in the State in which the employee resides for premium assistance under such plans for health coverage of the employee or the employee's dependents. For purposes of compliance with this clause, the employer may use any State-specific model notice developed in accordance with section 701(f)(3)(B)(i)(II) of the Employee Retirement Income Security Act of 1974 (29 U.S.C. 1181(f)(3)(B)(i)(II)).

''(II) OPTION TO PROVIDE CONCURRENT WITH PROVISION OF PLAN MATERIALS TO EMPLOYEE.—An employer may provide the model notice applicable to the State in which an employee resides concurrent with the furnishing of materials notifying the employee of health plan eligibility, concurrent with materials provided to the employee in connection with an open season or election process conducted under the plan, or concurrent with the furnishing of the summary plan description as provided in section 104(b) of the Employee Retirement Income Security Act of 1974 (29 U.S.C. 1024).

''(ii) DISCLOSURE ABOUT GROUP HEALTH PLAN BENEFITS TO STATES FOR MEDICAID AND CHIP ELIGIBLE INDIVIDUALS.—In the case of a participant or beneficiary of a group health plan who is covered under a Medicaid plan of a State under title XIX of the Social Security Act or under a State child health plan under title XXI of such Act, the plan administrator of the group health plan shall disclose to the State, upon request, information about the benefits available under the group health plan in sufficient specificity, as determined under regulations of the Secretary of Health and Human Services in consultation with the Secretary that require use of the model coverage coordination disclosure form developed under section 311(b)(1)(C) of the Children's Health Insurance Program Reauthorization Act of 2009, so as to permit the State to make a determination (under paragraph (2)(B), (3), or (10) of section 2105(c) of the Social Security Act or otherwise) concerning the cost-effectiveness of the State providing medical or child health assistance through premium assistance for the purchase of coverage under such group health plan and in order for the State to provide supplemental benefits required under paragraph (10)(E) of such section or other authority.''.

(b) CONFORMING AMENDMENTS.—

(1) AMENDMENTS TO EMPLOYEE RETIREMENT INCOME SECURITY ACT.—

(A) IN GENERAL.—Section 701(f) of the Employee Retirement Income Security Act of 1974 (29 U.S.C. 1181(f)) is amended by adding at the end the following new paragraph:

''(3) SPECIAL RULES FOR APPLICATION IN CASE OF MEDICAID AND CHIP.—

''(A) IN GENERAL.—A group health plan, and a health insurance issuer offering group health insurance coverage in connection with a group health plan, shall permit an employee who is eligible, but not enrolled, for coverage under the terms of the plan (or a dependent of such an employee if the dependent is eligible, but not enrolled, for coverage under such terms) to enroll for coverage under the terms of the plan if either of the following conditions is met:

''(i) TERMINATION OF MEDICAID OR CHIP COVERAGE.—The employee or dependent is covered under a Medicaid plan under title XIX of the Social Security Act or under a State child health plan under title XXI of such Act and coverage of the employee or dependent under such a plan is terminated as a result of loss of eligibility for such coverage and the employee requests coverage under the group health plan (or health insurance coverage) not later than 60 days after the date of termination of such coverage.

''(ii) ELIGIBILITY FOR EMPLOYMENT ASSISTANCE UNDER MEDICAID OR CHIP.—The employee or dependent becomes eligible for assistance, with respect to coverage under the group health plan or health insurance coverage, under such Medicaid plan or State child health plan (including under any waiver or demonstration project conducted under or in relation to such a plan), if the employee requests coverage under the group health plan or health insurance coverage not later than 60 days after the date the employee or dependent is determined to be eligible for such assistance.

''(B) COORDINATION WITH MEDICAID AND CHIP.—

''(i) OUTREACH TO EMPLOYEES REGARDING AVAILABILITY OF MEDICAID AND CHIP COVERAGE.—

''(I) IN GENERAL.—Each employer that maintains a group health plan in a State that provides medical assistance under a State Medicaid plan under title XIX of the Social Security Act, or child health assistance under a State child health plan under title XXI of such Act, in the form of premium assistance for the purchase of coverage under a group health plan, shall provide to each employee a written notice informing the employee of potential opportunities then currently available in the State in which the employee resides for premium assistance under such plans for health coverage of the employee or the employee's dependents.

''(II) MODEL NOTICE.—Not later than 1 year after the date of enactment of the Children's Health Insurance Program Reauthorization Act of 2009, the Secretary and the Secretary of Health and Human Services, in consultation with Directors of State Medicaid agencies under title XIX of the Social Security Act and Directors of State CHIP agencies under title XXI of such Act, shall jointly develop national and State-specific model notices for purposes of subparagraph (A). The Secretary shall provide employers with such model notices so as to enable employers to timely comply with the requirements of subparagraph (A). Such model notices shall include information regarding how an employee may contact the State in which the employee resides for additional information regarding potential opportunities for such premium assistance, including how to apply for such assistance.

''(III) OPTION TO PROVIDE CONCURRENT WITH PROVISION OF PLAN MATERIALS TO EMPLOYEE.—An employer may provide the model notice applicable to the State in which an employee resides concurrent with the furnishing of materials notifying the employee of health plan eligibility, concurrent with materials provided to the employee in connection with an open season or election process conducted under the plan, or concurrent with the furnishing of the summary plan description as provided in section 104(b).

''(ii) DISCLOSURE ABOUT GROUP HEALTH PLAN BENEFITS TO STATES FOR MEDICAID AND CHIP ELIGIBLE INDIVIDUALS.—In the case of a participant or beneficiary of a group health plan who is covered under a Medicaid plan of a State under title XIX of the Social Security Act or under a State child health plan under title XXI of such Act, the plan administrator of the group health plan shall disclose to the State, upon request, information about the benefits available under the group health plan in sufficient specificity, as determined under regulations of the Secretary of Health and Human Services in consultation with the Secretary that require use of the model coverage coordination disclosure form developed under section 311(b)(1)(C) of the Children's Health Insurance Program Reauthorization Act of 2009, so as to permit the State to make a determination (under paragraph (2)(B), (3), or (10) of section 2105(c) of the Social Security Act or otherwise) concerning the cost-effectiveness of the State providing medical or child health assistance through

premium assistance for the purchase of coverage under such group health plan and in order for the State to provide supplemental benefits required under paragraph (10)(E) of such section or other authority.''.

(B) CONFORMING AMENDMENT.—Section 102(b) of the Employee Retirement Income Security Act of 1974 (29 U.S.C. 1022(b)) is amended—

(i) by striking ''and the remedies'' and inserting '', the remedies''; and

(ii) by inserting before the period the following: '', and if the employer so elects for purposes of complying with section 701(f)(3)(B)(i), the model notice applicable to the State in which the participants and beneficiaries reside''.

(C) WORKING GROUP TO DEVELOP MODEL COVERAGE COORDINATION DISCLOSURE FORM.—

(i) MEDICAID, CHIP, AND EMPLOYER-SPONSORED COVERAGE COORDINATION WORKING GROUP.—

(I) IN GENERAL.—Not later than 60 days after the date of enactment of this Act, the Secretary of Health and Human Services and the Secretary of Labor shall jointly establish a Medicaid, CHIP, and Employer-Sponsored Coverage Coordination Working Group (in this subparagraph referred to as the ''Working Group''). The purpose of the Working Group shall be to develop the model coverage coordination disclosure form described in subclause (II) and to identify the impediments to the effective coordination of coverage available to families that include employees of employers that maintain group health plans and members who are eligible for medical assistance under title XIX of the Social Security Act or child health assistance or other health benefits coverage under title XXI of such Act.

(II) MODEL COVERAGE COORDINATION DISCLOSURE FORM DESCRIBED.—The model form described in this subclause is a form for plan administrators of group health plans to complete for purposes of permitting a State to determine the availability and cost-effectiveness of the coverage available under such plans to employees who have family members who are eligible for premium assistance offered under a State plan under title XIX or XXI of such Act and to allow for coordination of coverage for enrollees of such plans. Such form shall provide the following information in addition to such other information as the Working Group determines appropriate:

(aa) A determination of whether the employee is eligible for coverage under the group health plan.

(bb) The name and contract information of the plan administrator of the group health plan.

(cc) The benefits offered under the plan.

(dd) The premiums and cost-sharing required under the plan.

(ee) Any other information relevant to coverage under the plan.

(ii) MEMBERSHIP.—The Working Group shall consist of not more than 30 members and shall be composed of representatives of—

(I) the Department of Labor;

(II) the Department of Health and Human Services;

(III) State directors of the Medicaid program under title XIX of the Social Security Act;

(IV) State directors of the State Children's Health Insurance Program under title XXI of the Social Security Act;

(V) employers, including owners of small businesses and their trade or industry representatives and certified human resource and payroll professionals;

(VI) plan administrators and plan sponsors of group health plans (as defined in section 607(1) of the Employee Retirement Income Security Act of 1974);

(VII) health insurance issuers; and

(VIII) children and other beneficiaries of medical assistance under title XIX of the Social Security Act or child health assistance or other health benefits coverage under title XXI of such Act.

(iii) COMPENSATION.—The members of the Working Group shall serve without compensation.

(iv) ADMINISTRATIVE SUPPORT.—The Department of Health and Human Services and the Department of Labor shall jointly provide appropriate administrative support to the Working Group, including technical assistance. The Working Group may use the services and facilities of either such Department, with or without reimbursement, as jointly determined by such Departments.

(v) REPORT.—

(I) REPORT BY WORKING GROUP TO THE SECRETARIES.—Not later than 18 months after the date of the enactment of this Act, the Working Group shall submit to the Secretary of Labor and the Secretary of Health and Human Services the model form described in clause (i)(II) along with a report containing recommendations for appropriate measures to address the impediments to the effective coordination of coverage between group health plans and the State plans under titles XIX and XXI of the Social Security Act.

(II) REPORT BY SECRETARIES TO THE CONGRESS.—Not later than 2 months after receipt of the report pursuant to subclause (I), the Secretaries shall jointly submit a report to each House of the Congress regarding the recommendations contained in the report under such subclause.

(vi) TERMINATION.—The Working Group shall terminate 30 days after the date of the issuance of its report under clause (v).

(D) EFFECTIVE DATES.—The Secretary of Labor and the Secretary of Health and Human Services shall develop the initial model notices under section 701(f)(3)(B)(i)(II) of the Employee Retirement Income Security Act of 1974, and the Secretary of Labor shall provide such notices to employers, not later than the date that is 1 year after the date of enactment of this Act, and each employer shall provide the initial annual notices to such employer's employees beginning with the first plan year that begins after the date on which such initial model notices are first issued. The model coverage coordination disclosure form developed under subparagraph (C) shall apply with respect to requests made by States beginning with the first plan year that begins after the date on which such model coverage coordination disclosure form is first issued.

(E) ENFORCEMENT.—Section 502 of the Employee Retirement Income Security Act of 1974 (29 U.S.C. 1132) is amended—

(i) in subsection (a)(6), by striking ''or (8)'' and inserting ''(8), or (9)''; and

(ii) in subsection (c), by redesignating paragraph (9) as paragraph (10), and by inserting after paragraph (8) the following:

''(9)(A) The Secretary may assess a civil penalty against any employer of up to $100 a day from the date of the employer's failure to meet the notice requirement of section 701(f)(3)(B)(i)(I). For purposes of this subparagraph, each violation with respect to any single employee shall be treated as a separate violation.

''(B) The Secretary may assess a civil penalty against any plan administrator of up to $100 a day from the date of the plan administrator's failure to timely provide to any State the information required to be disclosed under section 701(f)(3)(B)(ii). For purposes of this subparagraph, each violation with respect to any single participant or beneficiary shall be treated as a separate violation.''.

(2) AMENDMENTS TO PUBLIC HEALTH SERVICE ACT.—Section 2701(f) of the Public Health Service Act (42 U.S.C. 300gg(f)) is amended by adding at the end the following new paragraph:

''(3) SPECIAL RULES FOR APPLICATION IN CASE OF MEDICAID AND CHIP.—

''(A) IN GENERAL.—A group health plan, and a health insurance issuer offering group health insurance coverage in connection with a group health plan, shall permit an employee who is eligible, but not enrolled, for coverage under the terms of the plan (or a dependent of such an employee if the dependent is eligible, but not enrolled, for coverage under such terms) to enroll for coverage under the terms of the plan if either of the following conditions is met:

''(i) TERMINATION OF MEDICAID OR CHIP COVERAGE.—The employee or dependent is covered under a Medicaid plan under title XIX of the Social Security Act or under a State child health plan under title XXI of such Act and coverage of the employee or dependent under such a plan is terminated as a result of loss of eligibility for such coverage and the employee requests coverage under the group health plan (or health insurance coverage) not later than 60 days after the date of termination of such coverage.

''(ii) ELIGIBILITY FOR EMPLOYMENT ASSISTANCE UNDER MEDICAID OR CHIP.—The employee or dependent becomes eligible for assistance, with respect to coverage under the group health plan or health insurance coverage, under such Medicaid plan or State child health plan (including under any waiver or demonstration project conducted under or in relation to such a plan), if the employee requests coverage under the group health plan or health insurance coverage not later than 60 days after the date the employee or dependent is determined to be eligible for such assistance.

''(B) COORDINATION WITH MEDICAID AND CHIP.—

''(i) OUTREACH TO EMPLOYEES REGARDING AVAILABILITY OF MEDICAID AND CHIP COVERAGE.—

''(I) IN GENERAL.—Each employer that maintains a group health plan in a State that provides medical assistance under a State Medicaid plan under title XIX of the Social Security Act, or child health assistance under a State child health plan under title XXI of such Act, in the form of premium assistance for the purchase of coverage under a group health plan, shall provide to each employee a written notice informing the employee of potential opportunities then currently available in the State in which the employee resides for premium assistance under such plans for health coverage of the employee or the employee's dependents. For purposes of compliance with this subclause, the employer may use any State-specific model notice developed in accordance with section 701(f)(3)(B)(i)(II) of the Employee Retirement Income Security Act of 1974 (29 U.S.C. 1181(f)(3)(B)(i)(II)).

''(II) OPTION TO PROVIDE CONCURRENT WITH PROVISION OF PLAN MATERIALS TO EMPLOYEE.—An employer may provide the model notice applicable to the State in which an employee resides concurrent with the furnishing of materials notifying the employee of health plan eligibility, concurrent with materials provided to the employee in connection with an open season or election process conducted under the plan, or concurrent with the furnishing of the summary plan description as provided in section 104(b) of the Employee Retirement Income Security Act of 1974.

''(ii) DISCLOSURE ABOUT GROUP HEALTH PLAN BENEFITS TO STATES FOR MEDICAID AND CHIP ELIGIBLE INDIVIDUALS.—In the case of an enrollee in a group health plan who is covered

under a Medicaid plan of a State under title XIX of the Social Security Act or under a State child health plan under title XXI of such Act, the plan administrator of the group health plan shall disclose to the State, upon request, information about the benefits available under the group health plan in sufficient specificity, as determined under regulations of the Secretary of Health and Human Services in consultation with the Secretary that require use of the model coverage coordination disclosure form developed under section 311(b)(1)(C) of the Children's Health Insurance Reauthorization Act of 2009, so as to permit the State to make a determination (under paragraph (2)(B), (3), or (10) of section 2105(c) of the Social Security Act or otherwise) concerning the cost-effectiveness of the State providing medical or child health assistance through premium assistance for the purchase of coverage under such group health plan and in order for the State to provide supplemental benefits required under paragraph (10)(E) of such section or other authority.''.

TITLE IV—STRENGTHENING QUALITY OF CARE AND HEALTH OUTCOMES

SEC. 401. CHILD HEALTH QUALITY IMPROVEMENT ACTIVITIES FOR CHILDREN ENROLLED IN MEDICAID OR CHIP.

(a) DEVELOPMENT OF CHILD HEALTH QUALITY MEASURES FOR CHILDREN ENROLLED IN MEDICAID OR CHIP.—Title XI (42 U.S.C. 1301 et seq.) is amended by inserting after section 1139 the following new section:

''SEC. 1139A. CHILD HEALTH QUALITY MEASURES.

''(a) DEVELOPMENT OF AN INITIAL CORE SET OF HEALTH CARE QUALITY MEASURES FOR CHILDREN ENROLLED IN MEDICAID OR CHIP.—

''(1) IN GENERAL.—Not later than January 1, 2010, the Secretary shall identify and publish for general comment an initial, recommended core set of child health quality measures for use by State programs administered under titles XIX and XXI, health insurance issuers and managed care entities that enter into contracts with such programs, and providers of items and services under such programs.

''(2) IDENTIFICATION OF INITIAL CORE MEASURES.—In consultation with the individuals and entities described in subsection (b)(3), the Secretary shall identify existing quality of care measures for children that are in use under public and privately sponsored health care coverage arrangements, or that are part of reporting systems that measure both the presence and duration of health insurance coverage over time.

''(3) RECOMMENDATIONS AND DISSEMINATION.—Based on such existing and identified measures, the Secretary shall publish an initial core set of child health quality measures that includes (but is not limited to) the following:

''(A) The duration of children's health insurance coverage over a 12-month time period.

''(B) The availability and effectiveness of a full range of—

''(i) preventive services, treatments, and services for acute conditions, including services to promote healthy birth, prevent and treat premature birth, and detect the presence or risk of physical or mental conditions that could adversely affect growth and development; and

''(ii) treatments to correct or ameliorate the effects of physical and mental conditions, including chronic conditions, in infants, young children, school-age children, and adolescents.

''(C) The availability of care in a range of ambulatory and inpatient health care settings in which such care is furnished.

''(D) The types of measures that, taken together, can be used to estimate the overall national quality of health care for children, including children with special needs, and to perform comparative analyses of pediatric health care quality and racial, ethnic, and socioeconomic disparities in child health and health care for children.

''(4) ENCOURAGE VOLUNTARY AND STANDARDIZED REPORTING.—Not later than 2 years after the date of enactment of the Children's Health Insurance Program Reauthorization Act of 2009, the Secretary, in consultation with States, shall develop a standardized format for reporting information and procedures and approaches that encourage States to use the initial core measurement set to voluntarily report information regarding the quality of pediatric health care under titles XIX and XXI.

''(5) ADOPTION OF BEST PRACTICES IN IMPLEMENTING QUALITY PROGRAMS.—The Secretary shall disseminate information to States regarding best practices among States with respect to measuring and reporting on the quality of health care for children, and shall facilitate the adoption of such best practices. In developing best practices approaches, the Secretary shall give particular attention to State measurement techniques that ensure the timeliness and accuracy of provider reporting, encourage provider reporting compliance, encourage successful quality improvement strategies, and improve efficiency in data collection using health information technology.

''(6) REPORTS TO CONGRESS.—Not later than January 1, 2011, and every 3 years thereafter, the Secretary shall report to Congress on—

''(A) the status of the Secretary's efforts to improve—

''(i) quality related to the duration and stability of health insurance coverage for children under titles XIX and XXI;

''(ii) the quality of children's health care under such titles, including preventive health services, health care for acute conditions, chronic health care, and health services to ameliorate the effects of physical and mental conditions and to aid in growth and development of infants, young children, school-age children, and adolescents with special health care needs; and

''(iii) the quality of children's health care under such titles across the domains of quality, including clinical quality, health care safety, family experience with health care, health care in the most integrated setting, and elimination of racial, ethnic, and socioeconomic disparities in health and health care;

''(B) the status of voluntary reporting by States under titles XIX and XXI, utilizing the initial core quality measurement set; and

''(C) any recommendations for legislative changes needed to improve the quality of care provided to children under titles XIX and XXI, including recommendations for quality reporting by States.

''(7) TECHNICAL ASSISTANCE.—The Secretary shall provide technical assistance to States to assist them in adopting and utilizing core child health quality measures in administering the State plans under titles XIX and XXI.

''(8) DEFINITION OF CORE SET.—In this section, the term 'core set' means a group of valid, reliable, and evidence-based quality measures that, taken together—

''(A) provide information regarding the quality of health coverage and health care for children;

''(B) address the needs of children throughout the developmental age span; and

''(C) allow purchasers, families, and health care providers to understand the quality of care in relation to the preventive needs of children, treatments aimed at managing and resolving acute conditions, and diagnostic and treatment services whose purpose is to correct or ameliorate physical, mental, or developmental conditions that could, if untreated or poorly treated, become chronic.

''(b) ADVANCING AND IMPROVING PEDIATRIC QUALITY MEASURES.—

''(1) ESTABLISHMENT OF PEDIATRIC QUALITY MEASURES PROGRAM.—Not later than January 1, 2011, the Secretary shall establish a pediatric quality measures program to—

''(A) improve and strengthen the initial core child health care quality measures established by the Secretary under subsection (a);

''(B) expand on existing pediatric quality measures used by public and private health care purchasers and advance the development of such new and emerging quality measures; and

''(C) increase the portfolio of evidence-based, consensus pediatric quality measures available to public and private purchasers of children's health care services, providers, and consumers.

''(2) EVIDENCE-BASED MEASURES.—The measures developed under the pediatric quality measures program shall, at a minimum, be—

''(A) evidence-based and, where appropriate, risk adjusted;

''(B) designed to identify and eliminate racial and ethnic disparities in child health and the provision of health care;

''(C) designed to ensure that the data required for such measures is collected and reported in a standard format that permits comparison of quality and data at a State, plan, and provider level;

''(D) periodically updated; and

''(E) responsive to the child health needs, services, and domains of health care quality described in clauses (i), (ii), and (iii) of subsection (a)(6)(A).

''(3) PROCESS FOR PEDIATRIC QUALITY MEASURES PROGRAM.—In identifying gaps in existing pediatric quality measures and establishing priorities for development and advancement of such measures, the Secretary shall consult with—

''(A) States;

''(B) pediatricians, children's hospitals, and other primary and specialized pediatric health care professionals (including members of the allied health professions) who specialize in the care and treatment of children, particularly children with special physical, mental, and developmental health care needs;

''(C) dental professionals, including pediatric dental professionals;

''(D) health care providers that furnish primary health care to children and families who live in urban and rural medically underserved communities or who are members of distinct population sub-groups at heightened risk for poor health outcomes;

''(E) national organizations representing children, including children with disabilities and children with chronic conditions;

''(F) national organizations representing consumers and purchasers of children's health care;

''(G) national organizations and individuals with expertise in pediatric health quality measurement; and

''(H) voluntary consensus standards setting organizations and other organizations involved in the advancement of evidence-based measures of health care.

''(4) DEVELOPING, VALIDATING, AND TESTING A PORTFOLIO OF PEDIATRIC QUALITY MEASURES.—As part of the program to advance pediatric quality measures, the Secretary shall—

''(A) award grants and contracts for the development, testing, and validation of new, emerging, and innovative evidence-based measures for children's health care services

across the domains of quality described in clauses (i), (ii), and (iii) of subsection (a)(6)(A); and

''(B) award grants and contracts for—

''(i) the development of consensus on evidence-based measures for children's health care services;

''(ii) the dissemination of such measures to public and private purchasers of health care for children; and

''(iii) the updating of such measures as necessary.

''(5) REVISING, STRENGTHENING, AND IMPROVING INITIAL CORE MEASURES.—Beginning no later than January 1, 2013, and annually thereafter, the Secretary shall publish recommended changes to the core measures described in subsection (a) that shall reflect the testing, validation, and consensus process for the development of pediatric quality measures described in subsection paragraphs (1) through (4).

''(6) DEFINITION OF PEDIATRIC QUALITY MEASURE.—In this subsection, the term 'pediatric quality measure' means a measurement of clinical care that is capable of being examined through the collection and analysis of relevant information, that is developed in order to assess 1 or more aspects of pediatric health care quality in various institutional and ambulatory health care settings, including the structure of the clinical care system, the process of care, the outcome of care, or patient experiences in care.

''(7) CONSTRUCTION.—Nothing in this section shall be construed as supporting the restriction of coverage, under title XIX or XXI or otherwise, to only those services that are evidence-based.

''(c) ANNUAL STATE REPORTS REGARDING STATE-SPECIFIC QUALITY OF CARE MEASURES APPLIED UNDER MEDICAID OR CHIP.—

''(1) ANNUAL STATE REPORTS.—Each State with a State plan approved under title XIX or a State child health plan approved under title XXI shall annually report to the Secretary on the—

''(A) State-specific child health quality measures applied by the States under such plans, including measures described in subparagraphs (A) and (B) of subsection (a)(6); and

''(B) State-specific information on the quality of health care furnished to children under such plans, including information collected through external quality reviews of managed care organizations under section 1932 of the Social Security Act (42 U.S.C. 1396u–4) and benchmark plans under sections 1937 and 2103 of such Act (42 U.S.C. 1396u–7, 1397cc).

''(2) PUBLICATION.—Not later than September 30, 2010, and annually thereafter, the Secretary shall collect, analyze, and make publicly available the information reported by States under paragraph (1).

''(d) DEMONSTRATION PROJECTS FOR IMPROVING THE QUALITY OF CHILDREN'S HEALTH CARE AND THE USE OF HEALTH INFORMATION TECHNOLOGY.—

''(1) IN GENERAL.—During the period of fiscal years 2009 through 2013, the Secretary shall award not more than 10 grants to States and child health providers to conduct demonstration projects to evaluate promising ideas for improving the quality of children's health care provided under title XIX or XXI, including projects to—

''(A) experiment with, and evaluate the use of, new measures of the quality of children's health care under such titles (including testing the validity and suitability for reporting of such measures);

''(B) promote the use of health information technology in care delivery for children under such titles;

''(C) evaluate provider-based models which improve the delivery of children's health care services under such titles, including care management for children with chronic conditions and the use of evidence-based approaches to improve the effectiveness, safety, and efficiency of health care services for children; or

''(D) demonstrate the impact of the model electronic health record format for children developed and disseminated under subsection (f) on improving pediatric health, including the effects of chronic childhood health conditions, and pediatric health care quality as well as reducing health care costs.

''(2) REQUIREMENTS.—In awarding grants under this subsection, the Secretary shall ensure that—

''(A) only 1 demonstration project funded under a grant awarded under this subsection shall be conducted in a State; and

''(B) demonstration projects funded under grants awarded under this subsection shall be conducted evenly between States with large urban areas and States with large rural areas.

''(3) AUTHORITY FOR MULTISTATE PROJECTS.—A demonstration project conducted with a grant awarded under this subsection may be conducted on a multistate basis, as needed.

''(4) FUNDING.—$20,000,000 of the amount appropriated under subsection (i) for a fiscal year shall be used to carry out this subsection.

''(e) CHILDHOOD OBESITY DEMONSTRATION PROJECT.—

''(1) AUTHORITY TO CONDUCT DEMONSTRATION.—The Secretary, in consultation with the Administrator of the Centers for Medicare & Medicaid Services, shall conduct a demonstration project to develop a comprehensive and systematic model for reducing childhood obesity by awarding grants to eligible entities to carry out such project. Such model shall—

''(A) identify, through self-assessment, behavioral risk factors for obesity among children;

''(B) identify, through self-assessment, needed clinical preventive and screening benefits among those children identified as target individuals on the basis of such risk factors;

''(C) provide ongoing support to such target individuals and their families to reduce risk factors and promote the appropriate use of preventive and screening benefits; and

''(D) be designed to improve health outcomes, satisfaction, quality of life, and appropriate use of items and services for which medical assistance is available under title XIX or child health assistance is available under title XXI among such target individuals.

''(2) ELIGIBILITY ENTITIES.—For purposes of this subsection, an eligible entity is any of the following:

''(A) A city, county, or Indian tribe.

''(B) A local or tribal educational agency.

''(C) An accredited university, college, or community college.

''(D) A Federally-qualified health center.

''(E) A local health department.

''(F) A health care provider.

''(G) A community-based organization.

''(H) Any other entity determined appropriate by the Secretary, including a consortia or partnership of entities described in any of subparagraphs (A) through (G).

''(3) USE OF FUNDS.—An eligible entity awarded a grant under this subsection shall use the funds made available under the grant to—

''(A) carry out community-based activities related to reducing childhood obesity, including by—

''(i) forming partnerships with entities, including schools and other facilities providing recreational services, to establish programs for after school and weekend community activities that are designed to reduce childhood obesity;

''(ii) forming partnerships with daycare facilities to establish programs that promote healthy eating behaviors and physical activity; and

''(iii) developing and evaluating community educational activities targeting good nutrition and promoting healthy eating behaviors;

''(B) carry out age-appropriate school-based activities that are designed to reduce childhood obesity, including by—

''(i) developing and testing educational curricula and intervention programs designed to promote healthy eating behaviors and habits in youth, which may include—

''(I) after hours physical activity programs; and

''(II) science-based interventions with multiple components to prevent eating disorders including nutritional content, understanding and responding to hunger and satiety, positive body image development, positive self-esteem development, and learning life skills (such as stress management, communication skills, problemsolving and decisionmaking skills), as well as consideration of cultural and developmental issues, and the role of family, school, and community;

''(ii) providing education and training to educational professionals regarding how to promote a healthy lifestyle and a healthy school environment for children;

''(iii) planning and implementing a healthy lifestyle curriculum or program with an emphasis on healthy eating behaviors and physical activity; and

''(iv) planning and implementing healthy lifestyle classes or programs for parents or guardians, with an emphasis on healthy eating behaviors and physical activity for children;

''(C) carry out educational, counseling, promotional, and training activities through the local health care delivery systems including by—

''(i) promoting healthy eating behaviors and physical activity services to treat or prevent eating disorders, being overweight, and obesity;

''(ii) providing patient education and counseling to increase physical activity and promote healthy eating behaviors;

''(iii) training health professionals on how to identify and treat obese and overweight individuals which may include nutrition and physical activity counseling; and

''(iv) providing community education by a health professional on good nutrition and physical activity to develop a better understanding of the relationship between diet, physical activity, and eating disorders, obesity, or being overweight; and

''(D) provide, through qualified health professionals, training and supervision for community health workers to—

''(i) educate families regarding the relationship between nutrition, eating habits, physical activity, and obesity;

''(ii) educate families about effective strategies to improve nutrition, establish healthy eating patterns, and establish appropriate levels of physical activity; and

''(iii) educate and guide parents regarding the ability to model and communicate positive health behaviors.

''(4) PRIORITY.—In awarding grants under paragraph (1), the Secretary shall give priority to awarding grants to eligible entities—

''(A) that demonstrate that they have previously applied successfully for funds to carry out activities that seek to promote individual and community health and to prevent the incidence of chronic disease and

that can cite published and peer-reviewed research demonstrating that the activities that the entities propose to carry out with funds made available under the grant are effective;

''(B) that will carry out programs or activities that seek to accomplish a goal or goals set by the State in the Healthy People 2010 plan of the State;

''(C) that provide non-Federal contributions, either in cash or in-kind, to the costs of funding activities under the grants;

''(D) that develop comprehensive plans that include a strategy for extending program activities developed under grants in the years following the fiscal years for which they receive grants under this subsection;

''(E) located in communities that are medically underserved, as determined by the Secretary;

''(F) located in areas in which the average poverty rate is at least 150 percent or higher of the average poverty rate in the State involved, as determined by the Secretary; and

''(G) that submit plans that exhibit multisectoral, cooperative conduct that includes the involvement of a broad range of stakeholders, including—

''(i) community-based organizations;

''(ii) local governments;

''(iii) local educational agencies;

''(iv) the private sector;

''(v) State or local departments of health;

''(vi) accredited colleges, universities, and community colleges;

''(vii) health care providers;

''(viii) State and local departments of transportation and city planning; and

''(ix) other entities determined appropriate by the Secretary.

''(5) PROGRAM DESIGN.—

''(A) INITIAL DESIGN.—Not later than 1 year after the date of enactment of the Children's Health Insurance Program Reauthorization Act of 2009, the Secretary shall design the demonstration project. The demonstration should draw upon promising, innovative models and incentives to reduce behavioral risk factors. The Administrator of the Centers for Medicare & Medicaid Services shall consult with the Director of the Centers for Disease Control and Prevention, the Director of the Office of Minority Health, the heads of other agencies in the Department of Health and Human Services, and such professional organizations, as the Secretary determines to be appropriate, on the design, conduct, and evaluation of the demonstration.

''(B) NUMBER AND PROJECT AREAS.—Not later than 2 years after the date of enactment of the Children's Health Insurance Program Reauthorization Act of 2009, the Secretary shall award 1 grant that is specifically designed to determine whether programs similar to programs to be conducted by other grantees under this subsection should be implemented with respect to the general population of children who are eligible for child health assistance under State child health plans under title XXI in order to reduce the incidence of childhood obesity among such population.

''(6) REPORT TO CONGRESS.—Not later than 3 years after the date the Secretary implements the demonstration project under this subsection, the Secretary shall submit to Congress a report that describes the project, evaluates the effectiveness and cost effectiveness of the project, evaluates the beneficiary satisfaction under the project, and includes any such other information as the Secretary determines to be appropriate.

''(7) DEFINITIONS.—In this subsection:

''(A) FEDERALLY-QUALIFIED HEALTH CENTER.—The term 'Federally-qualified health center' has the meaning given that term in section 1905(l)(2)(B).

''(B) INDIAN TRIBE.—The term 'Indian tribe' has the meaning given that term in section 4 of the Indian Health Care Improvement Act (25 U.S.C. 1603).

''(C) SELF-ASSESSMENT.—The term 'self-assessment' means a form that—

''(i) includes questions regarding—

''(I) behavioral risk factors;

''(II) needed preventive and screening services; and

''(III) target individuals' preferences for receiving follow-up information;

''(ii) is assessed using such computer generated assessment programs; and

''(iii) allows for the provision of such ongoing support to the individual as the Secretary determines appropriate.

''(D) ONGOING SUPPORT.—The term 'ongoing support' means—

''(i) to provide any target individual with information, feedback, health coaching, and recommendations regarding—

''(I) the results of a self-assessment given to the individual;

''(II) behavior modification based on the self-assessment; and

''(III) any need for clinical preventive and screening services or treatment including medical nutrition therapy;

''(ii) to provide any target individual with referrals to community resources and programs available to assist the target individual in reducing health risks; and

''(iii) to provide the information described in clause (i) to a health care provider, if designated by the target individual to receive such information.

''(8) AUTHORIZATION OF APPROPRIATIONS.—There is authorized to be appropriated to carry out this subsection, $25,000,000 for the period of fiscal years 2009 through 2013.

''(f) DEVELOPMENT OF MODEL ELECTRONIC HEALTH RECORD FORMAT FOR CHILDREN ENROLLED IN MEDICAID OR CHIP.—

''(1) IN GENERAL.—Not later than January 1, 2010, the Secretary shall establish a program to encourage the development and dissemination of a model electronic health record format for children enrolled in the State plan under title XIX or the State child health plan under title XXI that is—

''(A) subject to State laws, accessible to parents, caregivers, and other consumers for the sole purpose of demonstrating compliance with school or leisure activity requirements, such as appropriate immunizations or physicals;

''(B) designed to allow interoperable exchanges that conform with Federal and State privacy and security requirements;

''(C) structured in a manner that permits parents and caregivers to view and understand the extent to which the care their children receive is clinically appropriate and of high quality; and

''(D) capable of being incorporated into, and otherwise compatible with, other standards developed for electronic health records.

''(2) FUNDING.—$5,000,000 of the amount appropriated under subsection (i) for a fiscal year shall be used to carry out this subsection.

''(g) STUDY OF PEDIATRIC HEALTH AND HEALTH CARE QUALITY MEASURES.—

''(1) IN GENERAL.—Not later than July 1, 2010, the Institute of Medicine shall study and report to Congress on the extent and quality of efforts to measure child health status and the quality of health care for children across the age span and in relation to preventive care, treatments for acute conditions, and treatments aimed at ameliorating or correcting physical, mental, and developmental conditions in children. In conducting such study and preparing such report, the Institute of Medicine shall—

''(A) consider all of the major national population-based reporting systems sponsored by the Federal Government that are currently in place, including reporting requirements under Federal grant programs and national population surveys and estimates conducted directly by the Federal Government;

''(B) identify the information regarding child health and health care quality that each system is designed to capture and generate, the study and reporting periods covered by each system, and the extent to which the information so generated is made widely available through publication;

''(C) identify gaps in knowledge related to children's health status, health disparities among subgroups of children, the effects of social conditions on children's health status and use and effectiveness of health care, and the relationship between child health status and family income, family stability and preservation, and children's school readiness and educational achievement and attainment; and

''(D) make recommendations regarding improving and strengthening the timeliness, quality, and public transparency and accessibility of information about child health and health care quality.

''(2) FUNDING.—Up to $1,000,000 of the amount appropriated under subsection (i) for a fiscal year shall be used to carry out this subsection.

''(h) RULE OF CONSTRUCTION.—Notwithstanding any other provision in this section, no evidence based quality measure developed, published, or used as a basis of measurement or reporting under this section may be used to establish an irrebuttable presumption regarding either the medical necessity of care or the maximum permissible coverage for any individual child who is eligible for and receiving medical assistance under title XIX or child health assistance under title XXI.

''(i) APPROPRIATION.—Out of any funds in the Treasury not otherwise appropriated, there is appropriated for each of fiscal years 2009 through 2013, $45,000,000 for the purpose of carrying out this section (other than subsection (e)). Funds appropriated under this subsection shall remain available until expended.''.

(b) INCREASED MATCHING RATE FOR COLLECTING AND REPORTING ON CHILD HEALTH MEASURES.—Section 1903(a)(3)(A) (42 U.S.C. 1396b(a)(3)(A)), is amended—

(1) by striking ''and'' at the end of clause (i); and

(2) by adding at the end the following new clause:

''(iii) an amount equal to the Federal medical assistance percentage (as defined in section 1905(b)) of so much of the sums expended during such quarter (as found necessary by the Secretary for the proper and efficient administration of the State plan) as are attributable to such developments or modifications of systems of the type described in clause (i) as are necessary for the efficient collection and reporting on child health measures; and''.

SEC. 402. IMPROVED AVAILABILITY OF PUBLIC INFORMATION REGARDING ENROLLMENT OF CHILDREN IN CHIP AND MEDICAID.

(a) INCLUSION OF PROCESS AND ACCESS MEASURES IN ANNUAL STATE REPORTS.—Section 2108 (42 U.S.C. 1397hh) is amended—

(1) in subsection (a), in the matter preceding paragraph (1), by striking ''The State'' and inserting ''Subject to subsection (e), the State''; and

(2) by adding at the end the following new subsection:

''(e) INFORMATION REQUIRED FOR INCLUSION IN STATE ANNUAL REPORT.—The State shall include the following information in the annual report required under subsection (a):

''(1) Eligibility criteria, enrollment, and retention data (including data with respect

to continuity of coverage or duration of benefits).

''(2) Data regarding the extent to which the State uses process measures with respect to determining the eligibility of children under the State child health plan, including measures such as 12-month continuous eligibility, self-declaration of income for applications or renewals, or presumptive eligibility.

''(3) Data regarding denials of eligibility and redeterminations of eligibility.

''(4) Data regarding access to primary and specialty services, access to networks of care, and care coordination provided under the State child health plan, using quality care and consumer satisfaction measures included in the Consumer Assessment of Healthcare Providers and Systems (CAHPS) survey.

''(5) If the State provides child health assistance in the form of premium assistance for the purchase of coverage under a group health plan, data regarding the provision of such assistance, including the extent to which employer-sponsored health insurance coverage is available for children eligible for child health assistance under the State child health plan, the range of the monthly amount of such assistance provided on behalf of a child or family, the number of children or families provided such assistance on a monthly basis, the income of the children or families provided such assistance, the benefits and cost-sharing protection provided under the State child health plan to supplement the coverage purchased with such premium assistance, the effective strategies the State engages in to reduce any administrative barriers to the provision of such assistance, and, the effects, if any, of the provision of such assistance on preventing the coverage provided under the State child health plan from substituting for coverage provided under employer-sponsored health insurance offered in the State.

''(6) To the extent applicable, a description of any State activities that are designed to reduce the number of uncovered children in the State, including through a State health insurance connector program or support for innovative private health coverage initiatives.''.

(b) STANDARDIZED REPORTING FORMAT.—

(1) IN GENERAL.—Not later than 1 year after the date of enactment of this Act, the Secretary shall specify a standardized format for States to use for reporting the information required under section 2108(e) of the Social Security Act, as added by subsection (a)(2).

(2) TRANSITION PERIOD FOR STATES.—Each State that is required to submit a report under subsection (a) of section 2108 of the Social Security Act that includes the information required under subsection (e) of such section may use up to 3 reporting periods to transition to the reporting of such information in accordance with the standardized format specified by the Secretary under paragraph (1).

(c) ADDITIONAL FUNDING FOR THE SECRETARY TO IMPROVE TIMELINESS OF DATA REPORTING AND ANALYSIS FOR PURPOSES OF DETERMINING ENROLLMENT INCREASES UNDER MEDICAID AND CHIP.—

(1) APPROPRIATION.—There is appropriated, out of any money in the Treasury not otherwise appropriated, $5,000,000 to the Secretary for fiscal year 2009 for the purpose of improving the timeliness of the data reported and analyzed from the Medicaid Statistical Information System (MSIS) for purposes of providing more timely data on enrollment and eligibility of children under Medicaid and CHIP and to provide guidance to States with respect to any new reporting requirements related to such improvements. Amounts appropriated under this paragraph shall remain available until expended.

(2) REQUIREMENTS.—The improvements made by the Secretary under paragraph (1) shall be designed and implemented (including with respect to any necessary guidance for States to report such information in a complete and expeditious manner) so that, beginning no later than October 1, 2009, data regarding the enrollment of low-income children (as defined in section 2110(c)(4) of the Social Security Act (42 U.S.C. 1397jj(c)(4)) of a State enrolled in the State plan under Medicaid or the State child health plan under CHIP with respect to a fiscal year shall be collected and analyzed by the Secretary within 6 months of submission.

(d) GAO STUDY AND REPORT ON ACCESS TO PRIMARY AND SPECIALITY SERVICES.—

(1) IN GENERAL.—The Comptroller General of the United States shall conduct a study of children's access to primary and specialty services under Medicaid and CHIP, including—

(A) the extent to which providers are willing to treat children eligible for such programs;

(B) information on such children's access to networks of care;

(C) geographic availability of primary and specialty services under such programs;

(D) the extent to which care coordination is provided for children's care under Medicaid and CHIP; and

(E) as appropriate, information on the degree of availability of services for children under such programs.

(2) REPORT.—Not later than 2 years after the date of enactment of this Act, the Comptroller General shall submit a report to the Committee on Finance of the Senate and the Committee on Energy and Commerce of the House of Representatives on the study conducted under paragraph (1) that includes recommendations for such Federal and State legislative and administrative changes as the Comptroller General determines are necessary to address any barriers to access to children's care under Medicaid and CHIP that may exist.

SEC. 403. APPLICATION OF CERTAIN MANAGED CARE QUALITY SAFEGUARDS TO CHIP.

(a) IN GENERAL.—Section 2103(f) of Social Security Act (42 U.S.C. 1397bb(f)) is amended by adding at the end the following new paragraph:

''(3) COMPLIANCE WITH MANAGED CARE REQUIREMENTS.—The State child health plan shall provide for the application of subsections (a)(4), (a)(5), (b), (c), (d), and (e) of section 1932 (relating to requirements for managed care) to coverage, State agencies, enrollment brokers, managed care entities, and managed care organizations under this title in the same manner as such subsections apply to coverage and such entities and organizations under title XIX.''.

(b) EFFECTIVE DATE.—The amendment made by subsection (a) shall apply to contract years for health plans beginning on or after July 1, 2009.

TITLE V—IMPROVING ACCESS TO BENEFITS

SEC. 501. DENTAL BENEFITS.

(a) COVERAGE.—

(1) IN GENERAL.—Section 2103 (42 U.S.C. 1397cc) is amended—

(A) in subsection (a)—

(i) in the matter before paragraph (1), by striking ''subsection (c)(5)'' and inserting ''paragraphs (5) and (7) of subsection (c)''; and

(ii) in paragraph (1), by inserting ''at least'' after ''that is''; and

(B) in subsection (c)—

(i) by redesignating paragraph (5) as paragraph (7); and

(ii) by inserting after paragraph (4), the following:

''(5) DENTAL BENEFITS.—

''(A) IN GENERAL.—The child health assistance provided to a targeted low-income child shall include coverage of dental services necessary to prevent disease and promote oral health, restore oral structures to health and function, and treat emergency conditions.

''(B) PERMITTING USE OF DENTAL BENCHMARK PLANS BY CERTAIN STATES.—A State may elect to meet the requirement of subparagraph (A) through dental coverage that is equivalent to a benchmark dental benefit package described in subparagraph (C).

''(C) BENCHMARK DENTAL BENEFIT PACKAGES.—The benchmark dental benefit packages are as follows:

''(i) FEHBP CHILDREN'S DENTAL COVERAGE.—A dental benefits plan under chapter 89A of title 5, United States Code, that has been selected most frequently by employees seeking dependent coverage, among such plans that provide such dependent coverage, in either of the previous 2 plan years.

''(ii) STATE EMPLOYEE DEPENDENT DENTAL COVERAGE.—A dental benefits plan that is offered and generally available to State employees in the State involved and that has been selected most frequently by employees seeking dependent coverage, among such plans that provide such dependent coverage, in either of the previous 2 plan years.

''(iii) COVERAGE OFFERED THROUGH COMMERCIAL DENTAL PLAN.—A dental benefits plan that has the largest insured commercial, non-medicaid enrollment of dependent covered lives of such plans that is offered in the State involved.''.

(2) ASSURING ACCESS TO CARE.—Section 2102(a)(7)(B) (42 U.S.C. 1397bb(c)(2)) is amended by inserting ''and services described in section 2103(c)(5)'' after ''emergency services''.

(3) EFFECTIVE DATE.—The amendments made by paragraphs (1) and (2) shall apply to coverage of items and services furnished on or after October 1, 2009.

(b) STATE OPTION TO PROVIDE DENTAL-ONLY SUPPLEMENTAL COVERAGE.—

(1) IN GENERAL.——Section 2110(b) (42 U.S.C. 1397jj(b)) is amended—

(A) in paragraph (1)(C), by inserting '', subject to paragraph (5),'' after ''under title XIX or''; and

(B) by adding at the end the following new paragraph:

''(5) STATE OPTION TO PROVIDE DENTAL-ONLY SUPPLEMENTAL COVERAGE.—

''(A) IN GENERAL.—Subject to subparagraphs (B) and (C), in the case of any child who is enrolled in a group health plan or health insurance coverage offered through an employer who would, but for the application of paragraph (1)(C), satisfy the requirements for being a targeted low-income child under the State child health plan, a State may waive the application of such paragraph to the child in order to provide—

''(i) dental coverage consistent with the requirements of subsection (c)(5) of section 2103; or

''(ii) cost-sharing protection for dental coverage consistent with such requirements and the requirements of subsection (e)(3)(B) of such section.

''(B) LIMITATION.—A State may limit the application of a waiver of paragraph (1)(C) to children whose family income does not exceed a level specified by the State, so long as the level so specified does not exceed the maximum income level otherwise established for other children under the State child health plan.

''(C) CONDITIONS.—A State may not offer dental-only supplemental coverage under this paragraph unless the State satisfies the following conditions:

''(i) INCOME ELIGIBILITY.—The State child health plan (whether implemented under title XIX or this title)—

''(I) has the highest income eligibility standard permitted under this title (or a waiver) as of January 1, 2009;

''(II) does not limit the acceptance of applications for children or impose any numerical limitation, waiting list, or similar limitation on the eligibility of such children for child health assistance under such State plan; and

''(III) provides benefits to all children in the State who apply for and meet eligibility standards.

''(ii) NO MORE FAVORABLE TREATMENT.—The State child health plan may not provide more favorable dental coverage or cost-sharing protection for dental coverage to children provided dental-only supplemental coverage under this paragraph than the dental coverage and cost-sharing protection for dental coverage provided to targeted low-income children who are eligible for the full range of child health assistance provided under the State child health plan.''.

(2) STATE OPTION TO WAIVE WAITING PERIOD.—Section 2102(b)(1)(B) (42 U.S.C. 1397bb(b)(1)(B)), as amended by section 111(b)(2), is amended—

(A) in clause (ii), by striking ''and'' at the end;

(B) in clause (iii), by striking the period and inserting ''; and''; and

(C) by adding at the end the following new clause:

''(iv) at State option, may not apply a waiting period in the case of a child provided dental-only supplemental coverage under section 2110(b)(5).''.

(3) APPLICATION OF ENHANCED MATCH UNDER MEDICAID.—Section 1905 (42 U.S.C. 1396d) is amended—

(A) in subsection (b), in the fourth sentence, by striking ''or subsection (u)(3)'' and inserting '', (u)(3), or (u)(4)''; and

(B) in subsection (u)—

(i) by redesignating paragraph (4) as paragraph (5); and

(ii) by inserting after paragraph (3) the following new paragraph:

''(4) For purposes of subsection (b), the expenditures described in this paragraph are expenditures for dental-only supplemental coverage for children described in section 2110(b)(5).''.

(c) DENTAL EDUCATION FOR PARENTS OF NEWBORNS.—The Secretary shall develop and implement, through entities that fund or provide perinatal care services to targeted low-income children under a State child health plan under title XXI of the Social Security Act, a program to deliver oral health educational materials that inform new parents about risks for, and prevention of, early childhood caries and the need for a dental visit within their newborn's first year of life.

(d) PROVISION OF DENTAL SERVICES THROUGH FQHCS.—

(1) MEDICAID.—Section 1902(a) (42 U.S.C. 1396a(a)) is amended—

(A) by striking ''and'' at the end of paragraph (70);

(B) by striking the period at the end of paragraph (71) and inserting ''; and''; and

(C) by inserting after paragraph (71) the following new paragraph:

''(72) provide that the State will not prevent a Federally-qualified health center from entering into contractual relationships with private practice dental providers in the provision of Federally-qualified health center services.''.

(2) CHIP.—Section 2107(e)(1) (42 U.S.C. 1397g(e)(1)), as amended by subsections (a)(2) and (d)(2) of section 203, is amended by inserting after subparagraph (B) the following new subparagraph (and redesignating the succeeding subparagraphs accordingly):

''(C) Section 1902(a)(72) (relating to limiting FQHC contracting for provision of dental services).''.

(3) EFFECTIVE DATE.—The amendments made by this subsection shall take effect on January 1, 2009.

(e) REPORTING INFORMATION ON DENTAL HEALTH.—

(1) MEDICAID.—Section 1902(a)(43)(D)(iii) (42 U.S.C. 1396a(a)(43)(D)(iii)) is amended by inserting ''and other information relating to the provision of dental services to such children described in section 2108(e)'' after ''receiving dental services,''.

(2) CHIP.—Section 2108 (42 U.S.C. 1397hh) is amended by adding at the end the following new subsection:

''(e) INFORMATION ON DENTAL CARE FOR CHILDREN.—

''(1) IN GENERAL.—Each annual report under subsection (a) shall include the following information with respect to care and services described in section 1905(r)(3) provided to targeted low-income children enrolled in the State child health plan under this title at any time during the year involved:

''(A) The number of enrolled children by age grouping used for reporting purposes under section 1902(a)(43).

''(B) For children within each such age grouping, information of the type contained in questions 12(a)–(c) of CMS Form 416 (that consists of the number of enrolled targeted low income children who receive any, preventive, or restorative dental care under the State plan).

''(C) For the age grouping that includes children 8 years of age, the number of such children who have received a protective sealant on at least one permanent molar tooth.

''(2) INCLUSION OF INFORMATION ON ENROLLEES IN MANAGED CARE PLANS.—The information under paragraph (1) shall include information on children who are enrolled in managed care plans and other private health plans and contracts with such plans under this title shall provide for the reporting of such information by such plans to the State.''.

(3) EFFECTIVE DATE.—The amendments made by this subsection shall be effective for annual reports submitted for years beginning after date of enactment.

(f) IMPROVED ACCESSIBILITY OF DENTAL PROVIDER INFORMATION TO ENROLLEES UNDER MEDICAID AND CHIP.—The Secretary shall—

(1) work with States, pediatric dentists, and other dental providers (including providers that are, or are affiliated with, a school of dentistry) to include, not later than 6 months after the date of the enactment of this Act, on the Insure Kids Now website (http://www.insurekidsnow.gov/) and hotline (1–877–KIDS–NOW) (or on any successor websites or hotlines) a current and accurate list of all such dentists and providers within each State that provide dental services to children enrolled in the State plan (or waiver) under Medicaid or the State child health plan (or waiver) under CHIP, and shall ensure that such list is updated at least quarterly; and

(2) work with States to include, not later than 6 months after the date of the enactment of this Act, a description of the dental services provided under each State plan (or waiver) under Medicaid and each State child health plan (or waiver) under CHIP on such Insure Kids Now website, and shall ensure that such list is updated at least annually.

(g) INCLUSION OF STATUS OF EFFORTS TO IMPROVE DENTAL CARE IN REPORTS ON THE QUALITY OF CHILDREN'S HEALTH CARE UNDER MEDICAID AND CHIP.—Section 1139A(a), as added by section 401(a), is amended—

(1) in paragraph (3)(B)(ii), by inserting ''and, with respect to dental care, conditions requiring the restoration of teeth, relief of pain and infection, and maintenance of dental health'' after ''chronic conditions''; and

(2) in paragraph (6)(A)(ii), by inserting ''dental care,'' after ''preventive health services,''.

(h) GAO STUDY AND REPORT.—

(1) STUDY.—The Comptroller General of the United States shall provide for a study that examines—

(A) access to dental services by children in underserved areas;

(B) children's access to oral health care, including preventive and restorative services, under Medicaid and CHIP, including—

(i) the extent to which dental providers are willing to treat children eligible for such programs;

(ii) information on such children's access to networks of care, including such networks that serve special needs children; and

(iii) geographic availability of oral health care, including preventive and restorative services, under such programs; and

(C) the feasibility and appropriateness of using qualified mid-level dental health providers, in coordination with dentists, to improve access for children to oral health services and public health overall.

(2) REPORT.—Not later than 18 months year after the date of the enactment of this Act, the Comptroller General shall submit to Congress a report on the study conducted under paragraph (1). The report shall include recommendations for such Federal and State legislative and administrative changes as the Comptroller General determines are necessary to address any barriers to access to oral health care, including preventive and restorative services, under Medicaid and CHIP that may exist.

SEC. 502. MENTAL HEALTH PARITY IN CHIP PLANS.

(a) ASSURANCE OF PARITY.—Section 2103(c) (42 U.S.C. 1397cc(c)), as amended by section 501(a)(1)(B), is amended by inserting after paragraph (5), the following:

''(6) MENTAL HEALTH SERVICES PARITY.—

''(A) IN GENERAL.—In the case of a State child health plan that provides both medical and surgical benefits and mental health or substance use disorder benefits, such plan shall ensure that the financial requirements and treatment limitations applicable to such mental health or substance use disorder benefits comply with the requirements of section 2705(a) of the Public Health Service Act in the same manner as such requirements apply to a group health plan.

''(B) DEEMED COMPLIANCE.—To the extent that a State child health plan includes coverage with respect to an individual described in section 1905(a)(4)(B) and covered under the State plan under section 1902(a)(10)(A) of the services described in section 1905(a)(4)(B) (relating to early and periodic screening, diagnostic, and treatment services defined in section 1905(r)) and provided in accordance with section 1902(a)(43), such plan shall be deemed to satisfy the requirements of subparagraph (A).''.

(b) CONFORMING AMENDMENTS.—Section 2103 (42 U.S.C. 1397cc) is amended—

(1) in subsection (a), as amended by section 501(a)(1)(A)(i), in the matter preceding paragraph (1), by inserting '', (6),'' after ''(5)''; and

(2) in subsection (c)(2), by striking subparagraph (B) and redesignating subparagraphs (C) and (D) as subparagraphs (B) and (C), respectively.

SEC. 503. APPLICATION OF PROSPECTIVE PAYMENT SYSTEM FOR SERVICES PROVIDED BY FEDERALLY-QUALIFIED HEALTH CENTERS AND RURAL HEALTH CLINICS.

(a) APPLICATION OF PROSPECTIVE PAYMENT SYSTEM.—

(1) IN GENERAL.—Section 2107(e)(1) (42 U.S.C. 1397gg(e)(1)), as amended by section 501(c)(2) is amended by inserting after subparagraph (C) the following new subparagraph (and redesignating the succeeding subparagraphs accordingly):

''(D) Section 1902(bb) (relating to payment for services provided by Federally-qualified health centers and rural health clinics).''.

(2) EFFECTIVE DATE.—The amendment made by paragraph (1) shall apply to services provided on or after October 1, 2009.

(b) TRANSITION GRANTS.—

(1) APPROPRIATION.—Out of any funds in the Treasury not otherwise appropriated, there is appropriated to the Secretary for fiscal year 2009, $5,000,000, to remain available until expended, for the purpose of awarding grants to States with State child health plans under CHIP that are operated separately from the State Medicaid plan under title XIX of the Social Security Act (including any waiver of such plan), or in combination with the State Medicaid plan, for expenditures related to transitioning to compliance with the requirement of section 2107(e)(1)(D) of the Social Security Act (as added by subsection (a)) to apply the prospective payment system established under section 1902(bb) of the such Act (42 U.S.C. 1396a(bb)) to services provided by Federally-qualified health centers and rural health clinics.

(2) MONITORING AND REPORT.—The Secretary shall monitor the impact of the application of such prospective payment system on the States described in paragraph (1) and, not later than October 1, 2011, shall report to Congress on any effect on access to benefits, provider payment rates, or scope of benefits offered by such States as a result of the application of such payment system.

SEC. 504. PREMIUM GRACE PERIOD.

(a) IN GENERAL.—Section 2103(e)(3) (42 U.S.C. 1397cc(e)(3)) is amended by adding at the end the following new subparagraph:

''(C) PREMIUM GRACE PERIOD.—The State child health plan—

''(i) shall afford individuals enrolled under the plan a grace period of at least 30 days from the beginning of a new coverage period to make premium payments before the individual's coverage under the plan may be terminated; and

''(ii) shall provide to such an individual, not later than 7 days after the first day of such grace period, notice—

''(I) that failure to make a premium payment within the grace period will result in termination of coverage under the State child health plan; and

''(II) of the individual's right to challenge the proposed termination pursuant to the applicable Federal regulations.

For purposes of clause (i), the term 'new coverage period' means the month immediately following the last month for which the premium has been paid.''.

(b) EFFECTIVE DATE.—The amendment made by subsection (a) shall apply to new coverage periods beginning on or after the date of the enactment of this Act.

SEC. 505. CLARIFICATION OF COVERAGE OF SERVICES PROVIDED THROUGH SCHOOL-BASED HEALTH CENTERS.

(a) IN GENERAL.—Section 2103(c) (42 U.S.C. 1397cc(c)), as amended by section 501(a)(1)(B), is amended by adding at the end the following new paragraph:

''(8) AVAILABILITY OF COVERAGE FOR ITEMS AND SERVICES FURNISHED THROUGH SCHOOL-BASED HEALTH CENTERS.—Nothing in this title shall be construed as limiting a State's ability to provide child health assistance for covered items and services that are furnished through school-based health centers (as defined in section 2110(c)(9)).''.

(b) DEFINITION.—Section 2110(c) (42 U.S.C. 1397jj) is amended by adding at the end the following:

''(9) SCHOOL-BASED HEALTH CENTER.—

''(A) IN GENERAL.—The term 'school-based health center' means a health clinic that—

''(i) is located in or near a school facility of a school district or board or of an Indian tribe or tribal organization;

''(ii) is organized through school, community, and health provider relationships;

''(iii) is administered by a sponsoring facility;

''(iv) provides through health professionals primary health services to children in accordance with State and local law, including laws relating to licensure and certification; and

''(v) satisfies such other requirements as a State may establish for the operation of such a clinic.

''(B) SPONSORING FACILITY.—For purposes of subparagraph (A)(iii), the term 'sponsoring facility' includes any of the following:

''(i) A hospital.

''(ii) A public health department.

''(iii) A community health center.

''(iv) A nonprofit health care agency.

''(v) A school or school system.

''(vi) A program administered by the Indian Health Service or the Bureau of Indian Affairs or operated by an Indian tribe or a tribal organization.''.

SEC. 506. MEDICAID AND CHIP PAYMENT AND ACCESS COMMISSION.

(a) IN GENERAL.—Title XIX (42 U.S.C. 1396 et seq.) is amended by inserting before section 1901 the following new section:

''MEDICAID AND CHIP PAYMENT AND ACCESS COMMISSION

''SEC. 1900. (a) ESTABLISHMENT.—There is hereby established the Medicaid and CHIP Payment and Access Commission (in this section referred to as 'MACPAC').

''(b) DUTIES.—

''(1) REVIEW OF ACCESS POLICIES AND ANNUAL REPORTS.—MACPAC shall—

''(A) review policies of the Medicaid program established under this title (in this section referred to as 'Medicaid') and the State Children's Health Insurance Program established under title XXI (in this section referred to as 'CHIP') affecting children's access to covered items and services, including topics described in paragraph (2);

''(B) make recommendations to Congress concerning such access policies;

''(C) by not later than March 1 of each year (beginning with 2010), submit a report to Congress containing the results of such reviews and MACPAC's recommendations concerning such policies; and

''(D) by not later than June 1 of each year (beginning with 2010), submit a report to Congress containing an examination of issues affecting Medicaid and CHIP, including the implications of changes in health care delivery in the United States and in the market for health care services on such programs.

''(2) SPECIFIC TOPICS TO BE REVIEWED.—Specifically, MACPAC shall review and assess the following:

''(A) MEDICAID AND CHIP PAYMENT POLICIES.—Payment policies under Medicaid and CHIP, including—

''(i) the factors affecting expenditures for items and services in different sectors, including the process for updating hospital, skilled nursing facility, physician, Federally-qualified health center, rural health center, and other fees;

''(ii) payment methodologies; and

''(iii) the relationship of such factors and methodologies to access and quality of care for Medicaid and CHIP beneficiaries.

''(B) INTERACTION OF MEDICAID AND CHIP PAYMENT POLICIES WITH HEALTH CARE DELIVERY GENERALLY.—The effect of Medicaid and CHIP payment policies on access to items and services for children and other Medicaid and CHIP populations other than under this title or title XXI and the implications of changes in health care delivery in the United States and in the general market for health care items and services on Medicaid and CHIP.

''(C) OTHER ACCESS POLICIES.—The effect of other Medicaid and CHIP policies on access to covered items and services, including policies relating to transportation and language barriers.

''(3) CREATION OF EARLY-WARNING SYSTEM.—MACPAC shall create an early-warning system to identify provider shortage areas or any other problems that threaten access to care or the health care status of Medicaid and CHIP beneficiaries.

''(4) COMMENTS ON CERTAIN SECRETARIAL REPORTS.—If the Secretary submits to Congress (or a committee of Congress) a report that is required by law and that relates to access policies, including with respect to payment policies, under Medicaid or CHIP, the Secretary shall transmit a copy of the report to MACPAC. MACPAC shall review the report and, not later than 6 months after the date of submittal of the Secretary's report to Congress, shall submit to the appropriate committees of Congress written comments on such report. Such comments may include such recommendations as MACPAC deems appropriate.

''(5) AGENDA AND ADDITIONAL REVIEWS.—MACPAC shall consult periodically with the chairmen and ranking minority members of the appropriate committees of Congress regarding MACPAC's agenda and progress towards achieving the agenda. MACPAC may conduct additional reviews, and submit additional reports to the appropriate committees of Congress, from time to time on such topics relating to the program under this title or title XXI as may be requested by such chairmen and members and as MACPAC deems appropriate.

''(6) AVAILABILITY OF REPORTS.—MACPAC shall transmit to the Secretary a copy of each report submitted under this subsection and shall make such reports available to the public.

''(7) APPROPRIATE COMMITTEE OF CONGRESS.—For purposes of this section, the term 'appropriate committees of Congress' means the Committee on Energy and Commerce of the House of Representatives and the Committee on Finance of the Senate.

''(8) VOTING AND REPORTING REQUIREMENTS.—With respect to each recommendation contained in a report submitted under paragraph (1), each member of MACPAC shall vote on the recommendation, and MACPAC shall include, by member, the results of that vote in the report containing the recommendation.

''(9) EXAMINATION OF BUDGET CONSEQUENCES.—Before making any recommendations, MACPAC shall examine the budget consequences of such recommendations, directly or through consultation with appropriate expert entities.

''(c) MEMBERSHIP.—

''(1) NUMBER AND APPOINTMENT.—MACPAC shall be composed of 17 members appointed by the Comptroller General of the United States.

''(2) QUALIFICATIONS.—

''(A) IN GENERAL.—The membership of MACPAC shall include individuals who have had direct experience as enrollees or parents

of enrollees in Medicaid or CHIP and individuals with national recognition for their expertise in Federal safety net health programs, health finance and economics, actuarial science, health facility management, health plans and integrated delivery systems, reimbursement of health facilities, health information technology, pediatric physicians, dentists, and other providers of health services, and other related fields, who provide a mix of different professionals, broad geographic representation, and a balance between urban and rural representatives.

''(B) INCLUSION.—The membership of MACPAC shall include (but not be limited to) physicians and other health professionals, employers, third-party payers, and individuals with expertise in the delivery of health services. Such membership shall also include consumers representing children, pregnant women, the elderly, and individuals with disabilities, current or former representatives of State agencies responsible for administering Medicaid, and current or former representatives of State agencies responsible for administering CHIP.

''(C) MAJORITY NONPROVIDERS.—Individuals who are directly involved in the provision, or management of the delivery, of items and services covered under Medicaid or CHIP shall not constitute a majority of the membership of MACPAC.

''(D) ETHICAL DISCLOSURE.—The Comptroller General of the United States shall establish a system for public disclosure by members of MACPAC of financial and other potential conflicts of interest relating to such members. Members of MACPAC shall be treated as employees of Congress for purposes of applying title I of the Ethics in Government Act of 1978 (Public Law 95–521).

''(3) TERMS.—

''(A) IN GENERAL.—The terms of members of MACPAC shall be for 3 years except that the Comptroller General of the United States shall designate staggered terms for the members first appointed.

''(B) VACANCIES.—Any member appointed to fill a vacancy occurring before the expiration of the term for which the member's predecessor was appointed shall be appointed only for the remainder of that term. A member may serve after the expiration of that member's term until a successor has taken office. A vacancy in MACPAC shall be filled in the manner in which the original appointment was made.

''(4) COMPENSATION.—While serving on the business of MACPAC (including travel time), a member of MACPAC shall be entitled to compensation at the per diem equivalent of the rate provided for level IV of the Executive Schedule under section 5315 of title 5, United States Code; and while so serving away from home and the member's regular place of business, a member may be allowed travel expenses, as authorized by the Chairman of MACPAC. Physicians serving as personnel of MACPAC may be provided a physician comparability allowance by MACPAC in the same manner as Government physicians may be provided such an allowance by an agency under section 5948 of title 5, United States Code, and for such purpose subsection (i) of such section shall apply to MACPAC in the same manner as it applies to the Tennessee Valley Authority. For purposes of pay (other than pay of members of MACPAC) and employment benefits, rights, and privileges, all personnel of MACPAC shall be treated as if they were employees of the United States Senate.

''(5) CHAIRMAN; VICE CHAIRMAN.—The Comptroller General of the United States shall designate a member of MACPAC, at the time of appointment of the member as Chairman and a member as Vice Chairman for that term of appointment, except that in the case of vacancy of the Chairmanship or Vice Chairmanship, the Comptroller General of the United States may designate another member for the remainder of that member's term.

''(6) MEETINGS.—MACPAC shall meet at the call of the Chairman.

''(d) DIRECTOR AND STAFF; EXPERTS AND CONSULTANTS.—Subject to such review as the Comptroller General of the United States deems necessary to assure the efficient administration of MACPAC, MACPAC may—

''(1) employ and fix the compensation of an Executive Director (subject to the approval of the Comptroller General of the United States) and such other personnel as may be necessary to carry out its duties (without regard to the provisions of title 5, United States Code, governing appointments in the competitive service);

''(2) seek such assistance and support as may be required in the performance of its duties from appropriate Federal departments and agencies;

''(3) enter into contracts or make other arrangements, as may be necessary for the conduct of the work of MACPAC (without regard to section 3709 of the Revised Statutes (41 U.S.C. 5));

''(4) make advance, progress, and other payments which relate to the work of MACPAC;

''(5) provide transportation and subsistence for persons serving without compensation; and

''(6) prescribe such rules and regulations as it deems necessary with respect to the internal organization and operation of MACPAC.

''(e) POWERS.—

''(1) OBTAINING OFFICIAL DATA.—MACPAC may secure directly from any department or agency of the United States information necessary to enable it to carry out this section. Upon request of the Chairman, the head of that department or agency shall furnish that information to MACPAC on an agreed upon schedule.

''(2) DATA COLLECTION.—In order to carry out its functions, MACPAC shall—

''(A) utilize existing information, both published and unpublished, where possible, collected and assessed either by its own staff or under other arrangements made in accordance with this section;

''(B) carry out, or award grants or contracts for, original research and experimentation, where existing information is inadequate; and

''(C) adopt procedures allowing any interested party to submit information for MACPAC's use in making reports and recommendations.

''(3) ACCESS OF GAO TO INFORMATION.—The Comptroller General of the United States shall have unrestricted access to all deliberations, records, and nonproprietary data of MACPAC, immediately upon request.

''(4) PERIODIC AUDIT.—MACPAC shall be subject to periodic audit by the Comptroller General of the United States.

''(f) AUTHORIZATION OF APPROPRIATIONS.—

''(1) REQUEST FOR APPROPRIATIONS.—MACPAC shall submit requests for appropriations in the same manner as the Comptroller General of the United States submits requests for appropriations, but amounts appropriated for MACPAC shall be separate from amounts appropriated for the Comptroller General of the United States.

''(2) AUTHORIZATION.—There are authorized to be appropriated such sums as may be necessary to carry out the provisions of this section.''.

(b) DEADLINE FOR INITIAL APPOINTMENTS.—Not later than January 1, 2010, the Comptroller General of the United States shall appoint the initial members of the Medicaid and CHIP Payment and Access Commission established under section 1900 of the Social Security Act (as added by subsection (a)).

(c) ANNUAL REPORT ON MEDICAID.—Not later than January 1, 2010, and annually thereafter, the Secretary, in consultation with the Secretary of the Treasury, the Secretary of Labor, and the States (as defined for purposes of Medicaid), shall submit an annual report to Congress on the financial status of, enrollment in, and spending trends for, Medicaid for the fiscal year ending on September 30 of the preceding year.

TITLE VI—PROGRAM INTEGRITY AND OTHER MISCELLANEOUS PROVISIONS

Subtitle A—Program Integrity and Data Collection

SEC. 601. PAYMENT ERROR RATE MEASUREMENT (''PERM'').

(a) EXPENDITURES RELATED TO COMPLIANCE WITH REQUIREMENTS.—

(1) ENHANCED PAYMENTS.—Section 2105(c) (42 U.S.C. 1397ee(c)), as amended by section 301(a), is amended by adding at the end the following new paragraph:

''(11) ENHANCED PAYMENTS.—Notwithstanding subsection (b), the enhanced FMAP with respect to payments under subsection (a) for expenditures related to the administration of the payment error rate measurement (PERM) requirements applicable to the State child health plan in accordance with the Improper Payments Information Act of 2002 and parts 431 and 457 of title 42, Code of Federal Regulations (or any related or successor guidance or regulations) shall in no event be less than 90 percent.''.

(2) EXCLUSION OF FROM CAP ON ADMINISTRATIVE EXPENDITURES.—Section 2105(c)(2)(C) (42 U.S.C. 1397ee(c)(2)C)), as amended by section 302(b)), is amended by adding at the end the following:

''(iv) PAYMENT ERROR RATE MEASUREMENT (PERM) EXPENDITURES.—Expenditures related to the administration of the payment error rate measurement (PERM) requirements applicable to the State child health plan in accordance with the Improper Payments Information Act of 2002 and parts 431 and 457 of title 42, Code of Federal Regulations (or any related or successor guidance or regulations).''.

(b) FINAL RULE REQUIRED TO BE IN EFFECT FOR ALL STATES.—Notwithstanding parts 431 and 457 of title 42, Code of Federal Regulations (as in effect on the date of enactment of this Act), the Secretary shall not calculate or publish any national or State-specific error rate based on the application of the payment error rate measurement (in this section referred to as ''PERM'') requirements to CHIP until after the date that is 6 months after the date on which a new final rule (in this section referred to as the ''new final rule'') promulgated after the date of the enactment of this Act and implementing such requirements in accordance with the requirements of subsection (c) is in effect for all States. Any calculation of a national error rate or a State specific error rate after such new final rule in effect for all States may only be inclusive of errors, as defined in such new final rule or in guidance issued within a reasonable time frame after the effective date for such new final rule that includes detailed guidance for the specific methodology for error determinations.

(c) REQUIREMENTS FOR NEW FINAL RULE.—For purposes of subsection (b), the requirements of this subsection are that the new final rule implementing the PERM requirements shall—

(1) include—

(A) clearly defined criteria for errors for both States and providers;

(B) a clearly defined process for appealing error determinations by—

(i) review contractors; or

(ii) the agency and personnel described in section 431.974(a)(2) of title 42, Code of Federal Regulations, as in effect on September 1, 2007, responsible for the development, direction, implementation, and evaluation of eligibility reviews and associated activities; and

(C) clearly defined responsibilities and deadlines for States in implementing any corrective action plans; and

(2) provide that the payment error rate determined for a State shall not take into account payment errors resulting from the State's verification of an applicant's self-declaration or self-certification of eligibility for, and the correct amount of, medical assistance or child health assistance, if the State process for verifying an applicant's self-declaration or self-certification satisfies the requirements for such process applicable under regulations promulgated by the Secretary or otherwise approved by the Secretary.

(d) OPTION FOR APPLICATION OF DATA FOR STATES IN FIRST APPLICATION CYCLE UNDER THE INTERIM FINAL RULE.—After the new final rule implementing the PERM requirements in accordance with the requirements of subsection (c) is in effect for all States, a State for which the PERM requirements were first in effect under an interim final rule for fiscal year 2007 or under a final rule for fiscal year 2008 may elect to accept any payment error rate determined in whole or in part for the State on the basis of data for that fiscal year or may elect to not have any payment error rate determined on the basis of such data and, instead, shall be treated as if fiscal year 2010 or fiscal year 2011 were the first fiscal year for which the PERM requirements apply to the State.

(e) HARMONIZATION OF MEQC AND PERM.—

(1) REDUCTION OF REDUNDANCIES.—The Secretary shall review the Medicaid Eligibility Quality Control (in this subsection referred to as the ''MEQC'') requirements with the PERM requirements and coordinate consistent implementation of both sets of requirements, while reducing redundancies.

(2) STATE OPTION TO APPLY PERM DATA.—A State may elect, for purposes of determining the erroneous excess payments for medical assistance ratio applicable to the State for a fiscal year under section 1903(u) of the Social Security Act (42 U.S.C. 1396b(u)) to substitute data resulting from the application of the PERM requirements to the State after the new final rule implementing such requirements is in effect for all States for data obtained from the application of the MEQC requirements to the State with respect to a fiscal year.

(3) STATE OPTION TO APPLY MEQC DATA.—For purposes of satisfying the requirements of subpart Q of part 431 of title 42, Code of Federal Regulations, relating to Medicaid eligibility reviews, a State may elect to substitute data obtained through MEQC reviews conducted in accordance with section 1903(u) of the Social Security Act (42 U.S.C. 1396b(u)) for data required for purposes of PERM requirements, but only if the State MEQC reviews are based on a broad, representative sample of Medicaid applicants or enrollees in the States.

(f) IDENTIFICATION OF IMPROVED STATE-SPECIFIC SAMPLE SIZES.—The Secretary shall establish State-specific sample sizes for application of the PERM requirements with respect to State child health plans for fiscal years beginning with the first fiscal year that begins on or after the date on which the new final rule is in effect for all States, on the basis of such information as the Secretary determines appropriate. In establishing such sample sizes, the Secretary shall, to the greatest extent practicable—

(1) minimize the administrative cost burden on States under Medicaid and CHIP; and

(2) maintain State flexibility to manage such programs.

SEC. 602. IMPROVING DATA COLLECTION.

(a) INCREASED APPROPRIATION.—Section 2109(b)(2) (42 U.S.C. 1397ii(b)(2)) is amended by striking ''$10,000,000 for fiscal year 2000'' and inserting ''$20,000,000 for fiscal year 2009''.

(b) USE OF ADDITIONAL FUNDS.—Section 2109(b) (42 U.S.C. 1397ii(b)), as amended by subsection (a), is amended—

(1) by redesignating paragraph (2) as paragraph (4); and

(2) by inserting after paragraph (1), the following new paragraphs:

''(2) ADDITIONAL REQUIREMENTS.—In addition to making the adjustments required to produce the data described in paragraph (1), with respect to data collection occurring for fiscal years beginning with fiscal year 2009, in appropriate consultation with the Secretary of Health and Human Services, the Secretary of Commerce shall do the following:

''(A) Make appropriate adjustments to the Current Population Survey to develop more accurate State-specific estimates of the number of children enrolled in health coverage under title XIX or this title.

''(B) Make appropriate adjustments to the Current Population Survey to improve the survey estimates used to determine the child population growth factor under section 2104(m)(5)(B) and any other data necessary for carrying out this title.

''(C) Include health insurance survey information in the American Community Survey related to children.

''(D) Assess whether American Community Survey estimates, once such survey data are first available, produce more reliable estimates than the Current Population Survey with respect to the purposes described in subparagraph (B).

''(E) On the basis of the assessment required under subparagraph (D), recommend to the Secretary of Health and Human Services whether American Community Survey estimates should be used in lieu of, or in some combination with, Current Population Survey estimates for the purposes described in subparagraph (B).

''(F) Continue making the adjustments described in the last sentence of paragraph (1) with respect to expansion of the sample size used in State sampling units, the number of sampling units in a State, and using an appropriate verification element.

''(3) AUTHORITY FOR THE SECRETARY OF HEALTH AND HUMAN SERVICES TO TRANSITION TO THE USE OF ALL, OR SOME COMBINATION OF, ACS ESTIMATES UPON RECOMMENDATION OF THE SECRETARY OF COMMERCE.—If, on the basis of the assessment required under paragraph (2)(D), the Secretary of Commerce recommends to the Secretary of Health and Human Services that American Community Survey estimates should be used in lieu of, or in some combination with, Current Population Survey estimates for the purposes described in paragraph (2)(B), the Secretary of Health and Human Services, in consultation with the States, may provide for a period during which the Secretary may transition from carrying out such purposes through the use of Current Population Survey estimates to the use of American Community Survey estimates (in lieu of, or in combination with the Current Population Survey estimates, as recommended), provided that any such transition is implemented in a manner that is designed to avoid adverse impacts upon States with approved State child health plans under this title.''.

SEC. 603. UPDATED FEDERAL EVALUATION OF CHIP.

Section 2108(c) (42 U.S.C. 1397hh(c)) is amended by striking paragraph (5) and inserting the following:

''(5) SUBSEQUENT EVALUATION USING UPDATED INFORMATION.—

''(A) IN GENERAL.—The Secretary, directly or through contracts or interagency agreements, shall conduct an independent subsequent evaluation of 10 States with approved child health plans.

''(B) SELECTION OF STATES AND MATTERS INCLUDED.—Paragraphs (2) and (3) shall apply to such subsequent evaluation in the same manner as such provisions apply to the evaluation conducted under paragraph (1).

''(C) SUBMISSION TO CONGRESS.—Not later than December 31, 2011, the Secretary shall submit to Congress the results of the evaluation conducted under this paragraph.

''(D) FUNDING.—Out of any money in the Treasury of the United States not otherwise appropriated, there are appropriated $10,000,000 for fiscal year 2010 for the purpose of conducting the evaluation authorized under this paragraph. Amounts appropriated under this subparagraph shall remain available for expenditure through fiscal year 2012.''.

SEC. 604. ACCESS TO RECORDS FOR IG AND GAO AUDITS AND EVALUATIONS.

Section 2108(d) (42 U.S.C. 1397hh(d)) is amended to read as follows:

''(d) ACCESS TO RECORDS FOR IG AND GAO AUDITS AND EVALUATIONS.—For the purpose of evaluating and auditing the program established under this title, or title XIX, the Secretary, the Office of Inspector General, and the Comptroller General shall have access to any books, accounts, records, correspondence, and other documents that are related to the expenditure of Federal funds under this title and that are in the possession, custody, or control of States receiving Federal funds under this title or political subdivisions thereof, or any grantee or contractor of such States or political subdivisions.''.

SEC. 605. NO FEDERAL FUNDING FOR ILLEGAL ALIENS; DISALLOWANCE FOR UNAUTHORIZED EXPENDITURES.

Nothing in this Act allows Federal payment for individuals who are not legal residents. Titles XI, XIX, and XXI of the Social Security Act provide for the disallowance of Federal financial participation for erroneous expenditures under Medicaid and under CHIP, respectively.

Subtitle B—Miscellaneous Health Provisions

SEC. 611. DEFICIT REDUCTION ACT TECHNICAL CORRECTIONS.

(a) CLARIFICATION OF REQUIREMENT TO PROVIDE EPSDT SERVICES FOR ALL CHILDREN IN BENCHMARK BENEFIT PACKAGES UNDER MEDICAID.—Section 1937(a)(1) (42 U.S.C. 1396u–7(a)(1)), as inserted by section 6044(a) of the Deficit Reduction Act of 2005 (Public Law 109–171, 120 Stat. 88), is amended—

(1) in subparagraph (A)—

(A) in the matter before clause (i)—

(i) by striking ''Notwithstanding any other provision of this title'' and inserting ''Notwithstanding section 1902(a)(1) (relating to statewideness), section 1902(a)(10)(B) (relating to comparability) and any other provision of this title which would be directly contrary to the authority under this section and subject to subsection (E)''; and

(ii) by striking ''enrollment in coverage that provides'' and inserting ''coverage that'';

(B) in clause (i), by inserting ''provides'' after ''(i)''; and

(C) by striking clause (ii) and inserting the following:

''(ii) for any individual described in section 1905(a)(4)(B) who is eligible under the State

plan in accordance with paragraphs (10) and (17) of section 1902(a), consists of the items and services described in section 1905(a)(4)(B) (relating to early and periodic screening, diagnostic, and treatment services defined in section 1905(r)) and provided in accordance with the requirements of section 1902(a)(43).'';

(2) in subparagraph (C)—

(A) in the heading, by striking ''**WRAP-AROUND**'' and inserting ''**ADDITIONAL**''; and

(B) by striking ''wrap-around or''; and

(3) by adding at the end the following new subparagraph:

''(E) RULE OF CONSTRUCTION.—Nothing in this paragraph shall be construed as—

''(i) requiring a State to offer all or any of the items and services required by subparagraph (A)(ii) through an issuer of benchmark coverage described in subsection (b)(1) or benchmark equivalent coverage described in subsection (b)(2);

''(ii) preventing a State from offering all or any of the items and services required by subparagraph (A)(ii) through an issuer of benchmark coverage described in subsection (b)(1) or benchmark equivalent coverage described in subsection (b)(2); or

''(iii) affecting a child's entitlement to care and services described in subsections (a)(4)(B) and (r) of section 1905 and provided in accordance with section 1902(a)(43) whether provided through benchmark coverage, benchmark equivalent coverage, or otherwise.''.

(b) CORRECTION OF REFERENCE TO CHILDREN IN FOSTER CARE RECEIVING CHILD WELFARE SERVICES.—Section 1937(a)(2)(B)(viii) (42 U.S.C. 1396u–7(a)(2)(B)(viii)), as inserted by section 6044(a) of the Deficit Reduction Act of 2005, is amended by striking ''aid or assistance is made available under part B of title IV to children in foster care and individuals'' and inserting ''child welfare services are made available under part B of title IV on the basis of being a child in foster care or''.

(c) TRANSPARENCY.—Section 1937 (42 U.S.C. 1396u–7), as inserted by section 6044(a) of the Deficit Reduction Act of 2005, is amended by adding at the end the following:

''(c) PUBLICATION OF PROVISIONS AFFECTED.—With respect to a State plan amendment to provide benchmark benefits in accordance with subsections (a) and (b) that is approved by the Secretary, the Secretary shall publish on the Internet website of the Centers for Medicare & Medicaid Services, a list of the provisions of this title that the Secretary has determined do not apply in order to enable the State to carry out the plan amendment and the reason for each such determination on the date such approval is made, and shall publish such list in the Federal Register and not later than 30 days after such date of approval.''.

(d) EFFECTIVE DATE.—The amendments made by subsections (a), (b), and (c) of this section shall take effect as if included in the amendment made by section 6044(a) of the Deficit Reduction Act of 2005.

SEC. 612. REFERENCES TO TITLE XXI.

Section 704 of the Medicare, Medicaid, and SCHIP Balanced Budget Refinement Act of 1999, as enacted into law by division B of Public Law 106–113 (113 Stat. 1501A–402) is repealed.

SEC. 613. PROHIBITING INITIATION OF NEW HEALTH OPPORTUNITY ACCOUNT DEMONSTRATION PROGRAMS.

After the date of the enactment of this Act, the Secretary of Health and Human Services may not approve any new demonstration programs under section 1938 of the Social Security Act (42 U.S.C. 1396u–8).

SEC. 614. ADJUSTMENT IN COMPUTATION OF MEDICAID FMAP TO DISREGARD AN EXTRAORDINARY EMPLOYER PENSION CONTRIBUTION.

(a) IN GENERAL.—Only for purposes of computing the FMAP (as defined in subsection (e)) for a State for a fiscal year (beginning with fiscal year 2006) and applying the FMAP under title XIX of the Social Security Act, any significantly disproportionate employer pension or insurance fund contribution described in subsection (b) shall be disregarded in computing the per capita income of such State, but shall not be disregarded in computing the per capita income for the continental United States (and Alaska) and Hawaii.

(b) SIGNIFICANTLY DISPROPORTIONATE EMPLOYER PENSION AND INSURANCE FUND CONTRIBUTION.—

(1) IN GENERAL.—For purposes of this section, a significantly disproportionate employer pension and insurance fund contribution described in this subsection with respect to a State is any identifiable employer contribution towards pension or other employee insurance funds that is estimated to accrue to residents of such State for a calendar year (beginning with calendar year 2003) if the increase in the amount so estimated exceeds 25 percent of the total increase in personal income in that State for the year involved.

(2) DATA TO BE USED.—For estimating and adjustment a FMAP already calculated as of the date of the enactment of this Act for a State with a significantly disproportionate employer pension and insurance fund contribution, the Secretary shall use the personal income data set originally used in calculating such FMAP.

(3) SPECIAL ADJUSTMENT FOR NEGATIVE GROWTH.—If in any calendar year the total personal income growth in a State is negative, an employer pension and insurance fund contribution for the purposes of calculating the State's FMAP for a calendar year shall not exceed 125 percent of the amount of such contribution for the previous calendar year for the State.

(c) HOLD HARMLESS.—No State shall have its FMAP for a fiscal year reduced as a result of the application of this section.

(d) REPORT.—Not later than May 15, 2009, the Secretary shall submit to the Congress a report on the problems presented by the current treatment of pension and insurance fund contributions in the use of Bureau of Economic Affairs calculations for the FMAP and for Medicaid and on possible alternative methodologies to mitigate such problems.

(e) FMAP DEFINED.—For purposes of this section, the term ''FMAP'' means the Federal medical assistance percentage, as defined in section 1905(b) of the Social Security Act (42 U.S.C. 1396(d)).

SEC. 615. CLARIFICATION TREATMENT OF REGIONAL MEDICAL CENTER.

(a) IN GENERAL.—Nothing in section 1903(w) of the Social Security Act (42 U.S.C. 1396b(w)) shall be construed by the Secretary of Health and Human Services as prohibiting a State's use of funds as the non-Federal share of expenditures under title XIX of such Act where such funds are transferred from or certified by a publicly-owned regional medical center located in another State and described in subsection (b), so long as the Secretary determines that such use of funds is proper and in the interest of the program under title XIX.

(b) CENTER DESCRIBED.—A center described in this subsection is a publicly-owned regional medical center that—

(1) provides level 1 trauma and burn care services;

(2) provides level 3 neonatal care services;

(3) is obligated to serve all patients, regardless of ability to pay;

(4) is located within a Standard Metropolitan Statistical Area (SMSA) that includes at least 3 States;

(5) provides services as a tertiary care provider for patients residing within a 125-mile radius; and

(6) meets the criteria for a disproportionate share hospital under section 1923 of such Act (42 U.S.C. 1396r–4) in at least one State other than the State in which the center is located.

SEC. 616. EXTENSION OF MEDICAID DSH ALLOTMENTS FOR TENNESSEE AND HAWAII.

Section 1923(f)(6) (42 U.S.C. 1396r–4(f)(6)), as amended by section 202 of the Medicare Improvements for Patients and Providers Act of 2008 (Public Law 110–275) is amended—

(1) in the paragraph heading, by striking ''2009 AND THE FIRST CALENDAR QUARTER OF FISCAL YEAR 2010'' and inserting ''2011 AND THE FIRST CALENDAR QUARTER OF FISCAL YEAR 2012'';

(2) in subparagraph (A)—

(A) in clause (i)—

(i) in the second sentence—

(I) by striking ''and 2009'' and inserting '', 2009, 2010, and 2011''; and

(II) by striking ''such portion of''; and

(ii) in the third sentence, by striking ''2010 for the period ending on December 31, 2009'' and inserting ''2012 for the period ending on December 31, 2011'';

(B) in clause (ii), by striking ''or for a period in fiscal year 2010'' and inserting ''2010, 2011, or for period in fiscal year 2012''; and

(C) in clause (iv)—

(i) in the clause heading, by striking ''2009 AND THE FIRST CALENDAR QUARTER OF FISCAL YEAR 2010'' and inserting ''2011 AND THE FIRST CALENDAR QUARTER OF FISCAL YEAR 2012''; and

(ii) in each of subclauses (I) and (II), by striking '' or for a period in fiscal year 2010'' and inserting ''2010, 2011, or for a period in fiscal year 2012''; and

(3) in subparagraph (B)—

(A) in clause (i)—

(i) in the first sentence, by striking ''2009'' and inserting ''2011''; and

(ii) in the second sentence, by striking ''2010 for the period ending on December 31, 2009'' and inserting ''2012 for the period ending on December 31, 2011''.

SEC. 617. GAO REPORT ON MEDICAID MANAGED CARE PAYMENT RATES.

Not later than 18 months after the date of the enactment of this Act, the Comptroller General of the United States shall submit a report to the Committee on Finance of the Senate and the Committee on Energy and Commerce of the House of Representatives analyzing the extent to which State payment rates for medicaid managed care organizations under Medicaid are actuarially sound.

Subtitle C—Other Provisions

SEC. 621. OUTREACH REGARDING HEALTH INSURANCE OPTIONS AVAILABLE TO CHILDREN.

(a) DEFINITIONS.—In this section—

(1) the terms ''Administration'' and ''Administrator'' means the Small Business Administration and the Administrator thereof, respectively;

(2) the term ''certified development company'' means a development company participating in the program under title V of the Small Business Investment Act of 1958 (15 U.S.C. 695 et seq.);

(3) the term ''Medicaid program'' means the program established under title XIX of the Social Security Act (42 U.S.C. 1396 et seq.);

(4) the term ''Service Corps of Retired Executives'' means the Service Corps of Retired Executives authorized by section 8(b)(1) of the Small Business Act (15 U.S.C. 637(b)(1));

(5) the term ''small business concern'' has the meaning given that term in section 3 of the Small Business Act (15 U.S.C. 632);

(6) the term ''small business development center'' means a small business development center described in section 21 of the Small Business Act (15 U.S.C. 648);

(7) the term ''State'' has the meaning given that term for purposes of title XXI of the Social Security Act (42 U.S.C. 1397aa et seq.);

(8) the term ''State Children's Health Insurance Program'' means the State Children's Health Insurance Program established under title XXI of the Social Security Act (42 U.S.C. 1397aa et seq.);

(9) the term ''task force'' means the task force established under subsection (b)(1); and

(10) the term ''women's business center'' means a women's business center described in section 29 of the Small Business Act (15 U.S.C. 656).

(b) ESTABLISHMENT OF TASK FORCE.—

(1) ESTABLISHMENT.—There is established a task force to conduct a nationwide campaign of education and outreach for small business concerns regarding the availability of coverage for children through private insurance options, the Medicaid program, and the State Children's Health Insurance Program.

(2) MEMBERSHIP.—The task force shall consist of the Administrator, the Secretary of Health and Human Services, the Secretary of Labor, and the Secretary of the Treasury.

(3) RESPONSIBILITIES.—The campaign conducted under this subsection shall include—

(A) efforts to educate the owners of small business concerns about the value of health coverage for children;

(B) information regarding options available to the owners and employees of small business concerns to make insurance more affordable, including Federal and State tax deductions and credits for health care-related expenses and health insurance expenses and Federal tax exclusion for health insurance options available under employer-sponsored cafeteria plans under section 125 of the Internal Revenue Code of 1986;

(C) efforts to educate the owners of small business concerns about assistance available through public programs; and

(D) efforts to educate the owners and employees of small business concerns regarding the availability of the hotline operated as part of the Insure Kids Now program of the Department of Health and Human Services.

(4) IMPLEMENTATION.—In carrying out this subsection, the task force may—

(A) use any business partner of the Administration, including—

(i) a small business development center;

(ii) a certified development company;

(iii) a women's business center; and

(iv) the Service Corps of Retired Executives;

(B) enter into—

(i) a memorandum of understanding with a chamber of commerce; and

(ii) a partnership with any appropriate small business concern or health advocacy group; and

(C) designate outreach programs at regional offices of the Department of Health and Human Services to work with district offices of the Administration.

(5) WEBSITE.—The Administrator shall ensure that links to information on the eligibility and enrollment requirements for the Medicaid program and State Children's Health Insurance Program of each State are prominently displayed on the website of the Administration.

(6) REPORT.—

(A) IN GENERAL.—Not later than 2 years after the date of enactment of this Act, and every 2 years thereafter, the Administrator shall submit to the Committee on Small Business and Entrepreneurship of the Senate and the Committee on Small Business of the House of Representatives a report on the status of the nationwide campaign conducted under paragraph (1).

(B) CONTENTS.—Each report submitted under subparagraph (A) shall include a status update on all efforts made to educate owners and employees of small business concerns on options for providing health insurance for children through public and private alternatives.

SEC. 622. SENSE OF THE SENATE REGARDING ACCESS TO AFFORDABLE AND MEANINGFUL HEALTH INSURANCE COVERAGE.

(a) FINDINGS.—The Senate finds the following:

(1) There are approximately 45 million Americans currently without health insurance.

(2) More than half of uninsured workers are employed by businesses with less than 25 employees or are self-employed.

(3) Health insurance premiums continue to rise at more than twice the rate of inflation for all consumer goods.

(4) Individuals in the small group and individual health insurance markets usually pay more for similar coverage than those in the large group market.

(5) The rapid growth in health insurance costs over the last few years has forced many employers, particularly small employers, to increase deductibles and co-pays or to drop coverage completely.

(b) SENSE OF THE SENATE.—The Senate—

(1) recognizes the necessity to improve affordability and access to health insurance for all Americans;

(2) acknowledges the value of building upon the existing private health insurance market; and

(3) affirms its intent to enact legislation this year that, with appropriate protection for consumers, improves access to affordable and meaningful health insurance coverage for employees of small businesses and individuals by—

(A) facilitating pooling mechanisms, including pooling across State lines, and

(B) providing assistance to small businesses and individuals, including financial assistance and tax incentives, for the purchase of private insurance coverage.

TITLE VII—REVENUE PROVISIONS

SEC. 701. INCREASE IN EXCISE TAX RATE ON TOBACCO PRODUCTS.

(a) CIGARS.—Section 5701(a) of the Internal Revenue Code of 1986 is amended—

(1) by striking ''$1.828 cents per thousand ($1.594 cents per thousand on cigars removed during 2000 or 2001)'' in paragraph (1) and inserting ''$50.33 per thousand'',

(2) by striking ''20.719 percent (18.063 percent on cigars removed during 2000 or 2001)'' in paragraph (2) and inserting ''52.75 percent'', and

(3) by striking ''$48.75 per thousand ($42.50 per thousand on cigars removed during 2000 or 2001)'' in paragraph (2) and inserting ''40.26 cents per cigar''.

(b) CIGARETTES.—Section 5701(b) of such Code is amended—

(1) by striking ''$19.50 per thousand ($17 per thousand on cigarettes removed during 2000 or 2001)'' in paragraph (1) and inserting ''$50.33 per thousand'', and

(2) by striking ''$40.95 per thousand ($35.70 per thousand on cigarettes removed during 2000 or 2001)'' in paragraph (2) and inserting ''$105.69 per thousand''.

(c) CIGARETTE PAPERS.—Section 5701(c) of such Code is amended by striking ''1.22 cents (1.06 cents on cigarette papers removed during 2000 or 2001)'' and inserting ''3.15 cents''.

(d) CIGARETTE TUBES.—Section 5701(d) of such Code is amended by striking ''2.44 cents (2.13 cents on cigarette tubes removed during 2000 or 2001)'' and inserting ''6.30 cents''.

(e) SMOKELESS TOBACCO.—Section 5701(e) of such Code is amended—

(1) by striking ''58.5 cents (51 cents on snuff removed during 2000 or 2001)'' in paragraph (1) and inserting ''$1.51'', and

(2) by striking ''19.5 cents (17 cents on chewing tobacco removed during 2000 or 2001)'' in paragraph (2) and inserting ''50.33 cents''.

(f) PIPE TOBACCO.—Section 5701(f) of such Code is amended by striking ''$1.0969 cents (95.67 cents on pipe tobacco removed during 2000 or 2001)'' and inserting ''$2.8311 cents''.

(g) ROLL-YOUR-OWN TOBACCO.—Section 5701(g) of such Code is amended by striking ''$1.0969 cents (95.67 cents on roll-your-own tobacco removed during 2000 or 2001)'' and inserting ''$24.78''.

(h) FLOOR STOCKS TAXES.—

(1) IMPOSITION OF TAX.—On tobacco products (other than cigars described in section 5701(a)(2) of the Internal Revenue Code of 1986) and cigarette papers and tubes manufactured in or imported into the United States which are removed before April 1, 2009, and held on such date for sale by any person, there is hereby imposed a tax in an amount equal to the excess of—

(A) the tax which would be imposed under section 5701 of such Code on the article if the article had been removed on such date, over

(B) the prior tax (if any) imposed under section 5701 of such Code on such article.

(2) CREDIT AGAINST TAX.—Each person shall be allowed as a credit against the taxes imposed by paragraph (1) an amount equal to $500. Such credit shall not exceed the amount of taxes imposed by paragraph (1) on April 1, 2009, for which such person is liable.

(3) LIABILITY FOR TAX AND METHOD OF PAYMENT.—

(A) LIABILITY FOR TAX.—A person holding tobacco products, cigarette papers, or cigarette tubes on April 1, 2009, to which any tax imposed by paragraph (1) applies shall be liable for such tax.

(B) METHOD OF PAYMENT.—The tax imposed by paragraph (1) shall be paid in such manner as the Secretary shall prescribe by regulations.

(C) TIME FOR PAYMENT.—The tax imposed by paragraph (1) shall be paid on or before August 1, 2009.

(4) ARTICLES IN FOREIGN TRADE ZONES.—Notwithstanding the Act of June 18, 1934 (commonly known as the Foreign Trade Zone Act, 48 Stat. 998, 19 U.S.C. 81a et seq.) or any other provision of law, any article which is located in a foreign trade zone on April 1, 2009, shall be subject to the tax imposed by paragraph (1) if—

(A) internal revenue taxes have been determined, or customs duties liquidated, with respect to such article before such date pursuant to a request made under the 1st proviso of section 3(a) of such Act, or

(B) such article is held on such date under the supervision of an officer of the United States Customs and Border Protection of the Department of Homeland Security pursuant to the 2d proviso of such section 3(a).

(5) DEFINITIONS.—For purposes of this subsection—

(A) IN GENERAL.—Any term used in this subsection which is also used in section 5702 of the Internal Revenue Code of 1986 shall have the same meaning as such term has in such section.

(B) SECRETARY.—The term ''Secretary'' means the Secretary of the Treasury or the Secretary's delegate.

(6) CONTROLLED GROUPS.—Rules similar to the rules of section 5061(e)(3) of such Code shall apply for purposes of this subsection.

(7) OTHER LAWS APPLICABLE.—All provisions of law, including penalties, applicable

with respect to the taxes imposed by section 5701 of such Code shall, insofar as applicable and not inconsistent with the provisions of this subsection, apply to the floor stocks taxes imposed by paragraph (1), to the same extent as if such taxes were imposed by such section 5701. The Secretary may treat any person who bore the ultimate burden of the tax imposed by paragraph (1) as the person to whom a credit or refund under such provisions may be allowed or made.

(i) EFFECTIVE DATE.—The amendments made by this section shall apply to articles removed (as defined in section 5702(j) of the Internal Revenue Code of 1986) after March 31, 2009.

SEC. 702. ADMINISTRATIVE IMPROVEMENTS.

(a) PERMIT, INVENTORIES, REPORTS, AND RECORDS REQUIREMENTS FOR MANUFACTURERS AND IMPORTERS OF PROCESSED TOBACCO.—

(1) PERMIT.—

(A) APPLICATION.—Section 5712 of the Internal Revenue Code of 1986 is amended by inserting ''or processed tobacco'' after ''tobacco products''.

(B) ISSUANCE.—Section 5713(a) of such Code is amended by inserting ''or processed tobacco'' after ''tobacco products''.

(2) INVENTORIES, REPORTS, AND PACKAGES.—

(A) INVENTORIES.—Section 5721 of such Code is amended by inserting '', processed tobacco,'' after ''tobacco products''.

(B) REPORTS.—Section 5722 of such Code is amended by inserting '', processed tobacco,'' after ''tobacco products''.

(C) PACKAGES, MARKS, LABELS, AND NOTICES.—Section 5723 of such Code is amended by inserting '', processed tobacco,'' after ''tobacco products'' each place it appears.

(3) RECORDS.—Section 5741 of such Code is amended by inserting '', processed tobacco,'' after ''tobacco products''.

(4) MANUFACTURER OF PROCESSED TOBACCO.—Section 5702 of such Code is amended by adding at the end the following new subsection:

''(p) MANUFACTURER OF PROCESSED TOBACCO.—

''(1) IN GENERAL.—The term 'manufacturer of processed tobacco' means any person who processes any tobacco other than tobacco products.

''(2) PROCESSED TOBACCO.—The processing of tobacco shall not include the farming or growing of tobacco or the handling of tobacco solely for sale, shipment, or delivery to a manufacturer of tobacco products or processed tobacco.''.

(5) CONFORMING AMENDMENTS.—

(A) Section 5702(h) of such Code is amended by striking ''tobacco products and cigarette papers and tubes'' and inserting ''tobacco products or cigarette papers or tubes or any processed tobacco''.

(B) Sections 5702(j) and 5702(k) of such Code are each amended by inserting '', or any processed tobacco,'' after ''tobacco products or cigarette papers or tubes''.

(6) EFFECTIVE DATE.—The amendments made by this subsection shall take effect on April 1, 2009.

(b) BASIS FOR DENIAL, SUSPENSION, OR REVOCATION OF PERMITS.—

(1) DENIAL.—Paragraph (3) of section 5712 of such Code is amended to read as follows:

''(3) such person (including, in the case of a corporation, any officer, director, or principal stockholder and, in the case of a partnership, a partner)—

''(A) is, by reason of his business experience, financial standing, or trade connections or by reason of previous or current legal proceedings involving a felony violation of any other provision of Federal criminal law relating to tobacco products, processed tobacco, cigarette paper, or cigarette tubes, not likely to maintain operations in compliance with this chapter,

''(B) has been convicted of a felony violation of any provision of Federal or State criminal law relating to tobacco products, processed tobacco, cigarette paper, or cigarette tubes, or

''(C) has failed to disclose any material information required or made any material false statement in the application therefor.''.

(2) SUSPENSION OR REVOCATION.—Subsection (b) of section 5713 of such Code is amended to read as follows:

''(b) SUSPENSION OR REVOCATION.—

''(1) SHOW CAUSE HEARING.—If the Secretary has reason to believe that any person holding a permit—

''(A) has not in good faith complied with this chapter, or with any other provision of this title involving intent to defraud,

''(B) has violated the conditions of such permit,

''(C) has failed to disclose any material information required or made any material false statement in the application for such permit,

''(D) has failed to maintain his premises in such manner as to protect the revenue,

''(E) is, by reason of previous or current legal proceedings involving a felony violation of any other provision of Federal criminal law relating to tobacco products, processed tobacco, cigarette paper, or cigarette tubes, not likely to maintain operations in compliance with this chapter, or

''(F) has been convicted of a felony violation of any provision of Federal or State criminal law relating to tobacco products, processed tobacco, cigarette paper, or cigarette tubes,

the Secretary shall issue an order, stating the facts charged, citing such person to show cause why his permit should not be suspended or revoked.

''(2) ACTION FOLLOWING HEARING.—If, after hearing, the Secretary finds that such person has not shown cause why his permit should not be suspended or revoked, such permit shall be suspended for such period as the Secretary deems proper or shall be revoked.''.

(3) EFFECTIVE DATE.—The amendments made by this subsection shall take effect on the date of the enactment of this Act.

(c) APPLICATION OF INTERNAL REVENUE CODE STATUTE OF LIMITATIONS FOR ALCOHOL AND TOBACCO EXCISE TAXES.—

(1) IN GENERAL.—Section 514(a) of the Tariff Act of 1930 (19 U.S.C. 1514(a)) is amended by striking ''and section 520 (relating to refunds)'' and inserting ''section 520 (relating to refunds), and section 6501 of the Internal Revenue Code of 1986 (but only with respect to taxes imposed under chapters 51 and 52 of such Code)''.

(2) EFFECTIVE DATE.—The amendment made by this subsection shall apply to articles imported after the date of the enactment of this Act.

(d) EXPANSION OF DEFINITION OF ROLL-YOUR-OWN TOBACCO.—

(1) IN GENERAL.—Section 5702(o) of the Internal Revenue Code of 1986 is amended by inserting ''or cigars, or for use as wrappers thereof'' before the period at the end.

(2) EFFECTIVE DATE.—The amendment made by this subsection shall apply to articles removed (as defined in section 5702(j) of the Internal Revenue Code of 1986) after March 31, 2009.

(e) TIME OF TAX FOR UNLAWFULLY MANUFACTURED TOBACCO PRODUCTS.—

(1) IN GENERAL.—Section 5703(b)(2) of such Code is amended by adding at the end the following new subparagraph:

''(F) SPECIAL RULE FOR UNLAWFULLY MANUFACTURED TOBACCO PRODUCTS.—In the case of any tobacco products, cigarette paper, or cigarette tubes manufactured in the United States at any place other than the premises of a manufacturer of tobacco products, cigarette paper, or cigarette tubes that has filed the bond and obtained the permit required under this chapter, tax shall be due and payable immediately upon manufacture.''.

(2) EFFECTIVE DATE.—The amendment made by this subsection shall take effect on the date of the enactment of this Act.

(f) DISCLOSURE.—

(1) IN GENERAL.—Paragraph (1) of section 6103(o) of such Code is amended by designating the text as subparagraph (A), moving such text 2 ems to the right, striking ''Returns'' and inserting ''(A) IN GENERAL.—Returns'', and by inserting after subparagraph (A) (as so redesignated) the following new subparagraph:

''(B) USE IN CERTAIN PROCEEDINGS.—Returns and return information disclosed to a Federal agency under subparagraph (A) may be used in an action or proceeding (or in preparation for such action or proceeding) brought under section 625 of the American Jobs Creation Act of 2004 for the collection of any unpaid assessment or penalty arising under such Act.''.

(2) CONFORMING AMENDMENT.—Section 6103(p)(4) of such Code is amended by striking ''(o)(1)'' both places it appears and inserting ''(o)(1)(A)''.

(3) EFFECTIVE DATE.—The amendments made by this subsection shall apply on or after the date of the enactment of this Act.

(g) TRANSITIONAL RULE.—Any person who—

(1) on April 1 is engaged in business as a manufacturer of processed tobacco or as an importer of processed tobacco, and

(2) before the end of the 90-day period beginning on such date, submits an application under subchapter B of chapter 52 of such Code to engage in such business, may, notwithstanding such subchapter B, continue to engage in such business pending final action on such application. Pending such final action, all provisions of such chapter 52 shall apply to such applicant in the same manner and to the same extent as if such applicant were a holder of a permit under such chapter 52 to engage in such business.

SEC. 703. TREASURY STUDY CONCERNING MAGNITUDE OF TOBACCO SMUGGLING IN THE UNITED STATES.

Not later than one year after the date of the enactment of this Act, the Secretary of the Treasury shall conduct a study concerning the magnitude of tobacco smuggling in the United States and submit to Congress recommendations for the most effective steps to reduce tobacco smuggling. Such study shall also include a review of the loss of Federal tax receipts due to illicit tobacco trade in the United States and the role of imported tobacco products in the illicit tobacco trade in the United States.

SEC. 704. TIME FOR PAYMENT OF CORPORATE ESTIMATED TAXES.

The percentage under subparagraph (C) of section 401(1) of the Tax Increase Prevention and Reconciliation Act of 2005 in effect on the date of the enactment of this Act is increased by 0.5 percentage point.

SA 40. Mr. MCCONNELL (for himself, Mr. KYL, Mr. VITTER, Mr. CHAMBLISS, Mr. BUNNING, Mr. GREGG, Mr. COBURN, Mr. BURR, Mr. ISAKSON, Mr. GRAHAM, Mr. INHOFE, Mr. CORNYN, Mr. BROWNBACK, Mr. COCHRAN, Mr. ENSIGN, Mr. THUNE, Mr. DEMINT, Mr. BENNETT, Mr. BARRASSO, Mr. ENZI, and Mr. WICKER) proposed an amendment to amendment SA 39 proposed by Mr. REID (for Mr. BAUCUS) to the bill H.R. 2, to amend title XXI of the Social Security Act to extend and improve the Children's Health Insurance Program, and for other purposes; as follows:

In lieu of the matter proposed to be inserted insert

SECTION 1. SHORT TITLE; TABLE OF CONTENTS.

(a) SHORT TITLE.—This Act may be cited as the ''Kids First Act''.

(b) TABLE OF CONTENTS.—The table of contents for this Act is as follows:

Sec. 1. Short title; table of contents.
Sec. 2. Reauthorization through fiscal year 2013.
Sec. 3. Allotments for the 50 States and the District of Columbia based on expenditures and numbers of low-income children.
Sec. 4. Limitations on matching rates for populations other than low-income children or pregnant women covered through a section 1115 waiver.
Sec. 5. Prohibition on new section 1115 waivers for coverage of adults other than pregnant women.
Sec. 6. Standardization of determination of family income for targeted low-income children under title XXI and optional targeted low-income children under title XIX.
Sec. 7. Grants for outreach and enrollment.
Sec. 8. Improved State option for offering premium assistance for coverage of children through private plans under SCHIP and Medicaid.
Sec. 9. Treatment of unborn children.
Sec. 10. 50 percent matching rate for all Medicaid administrative costs.
Sec. 11. Reduction in payments for Medicaid administrative costs to prevent duplication of such payments under TANF.
Sec. 12. Elimination of waiver of certain Medicaid provider tax provisions.
Sec. 13. Elimination of special payments for certain public hospitals.
Sec. 14. Effective date; coordination of funding for fiscal year 2009.

SEC. 2. REAUTHORIZATION THROUGH FISCAL YEAR 2013.

(a) INCREASE IN NATIONAL ALLOTMENT.—Section 2104 of the Social Security Act (42 U.S.C. 1397dd(a)) is amended—

(1) in subsection (a)—

(A) by striking ''and'' at the end of paragraph (10);

(B) in paragraph (11)—

(i) by striking ''each of fiscal years 2008 and 2009'' and inserting ''fiscal year 2008''; and

(ii) by striking the period at the end and inserting a semicolon; and

(C) by adding at the end the following new paragraphs:

''(12) for fiscal year 2009, $7,780,000,000;

''(13) for fiscal year 2010, $8,044,000,000;

''(14) for fiscal year 2011, $8,568,000,000;

''(15) for fiscal year 2012, $9,032,000,000; and

''(16) for fiscal year 2013, $9,505,000,000.''; and

(2) in subsection (c)(4)(B), by striking ''2009'' and inserting ''2008, $62,000,000 for fiscal year 2009, $64,000,000 for fiscal year 2010, $68,000,000 for fiscal year 2011, $72,000,000 for fiscal year 2012, and $75,000,000 for fiscal year 2013''.

(b) REPEAL OF LIMITATION ON AVAILABILITY OF FUNDING FOR FISCAL YEARS 2008 AND 2009.—Section 201 of the Medicare, Medicaid, and SCHIP Extension Act of 2007 (Public Law 110–173) is amended—

(1) in subsection (a), by striking paragraph (2) and redesignating paragraphs (3) and (4), as paragraphs (2) and (3) respectively; and

(2) in subsection (b), by striking paragraph (2).

SEC. 3. ALLOTMENTS FOR THE 50 STATES AND THE DISTRICT OF COLUMBIA BASED ON EXPENDITURES AND NUMBERS OF LOW-INCOME CHILDREN.

(a) IN GENERAL.—Section 2104 of the Social Security Act (42 U.S.C. 1397dd) is amended by adding at the end the following new subsection:

''(m) DETERMINATION OF ALLOTMENTS FOR THE 50 STATES AND THE DISTRICT OF COLUMBIA FOR FISCAL YEARS 2009 THROUGH 2013.—

''(1) IN GENERAL.—Notwithstanding the preceding provisions of this subsection and subject to paragraph (3), the Secretary shall allot to each subsection (b) State for each of fiscal years 2009 through 2013, the amount determined for the fiscal year that is equal to the product of—

''(A) the amount available for allotment under subsection (a) for the fiscal year, reduced by the amount of allotments made under subsection (c) (determined without regard to paragraph (4) thereof) for the fiscal year; and

''(B) the sum of the State allotment factors determined under paragraph (2) with respect to the State and weighted in accordance with subparagraph (B) of that paragraph for the fiscal year.

''(2) STATE ALLOTMENT FACTORS.—

''(A) IN GENERAL.—For purposes of paragraph (1)(B), the State allotment factors are the following:

''(i) The ratio of the projected expenditures for targeted low-income children under the State child health plan and pregnant women under a waiver of such plan for the fiscal year to the sum of such projected expenditures for all States for the fiscal year, multiplied by the applicable percentage weight assigned under subparagraph (B).

''(ii) The ratio of the number of low-income children who have not attained age 19 with no health insurance coverage in the State, as determined by the Secretary on the basis of the arithmetic average of the number of such children for the 3 most recent Annual Social and Economic Supplements to the Current Population Survey of the Bureau of the Census available before the beginning of the calendar year before such fiscal year begins, to the sum of the number of such children determined for all States for such fiscal year, multiplied by the applicable percentage weight assigned under subparagraph (B).

''(iii) The ratio of the projected expenditures for targeted low-income children under the State child health plan and pregnant women under a waiver of such plan for the preceding fiscal year to the sum of such projected expenditures for all States for such preceding fiscal year, multiplied by the applicable percentage weight assigned under subparagraph (B).

''(iv) The ratio of the actual expenditures for targeted low-income children under the State child health plan and pregnant women under a waiver of such plan for the second preceding fiscal year to the sum of such actual expenditures for all States for such second preceding fiscal year, multiplied by the applicable percentage weight assigned under subparagraph (B).

''(B) ASSIGNMENT OF WEIGHTS.—For each of fiscal years 2009 through 2013, the following percentage weights shall be applied to the ratios determined under subparagraph (A) for each such fiscal year:

''(i) 40 percent for the ratio determined under subparagraph (A)(i).

''(ii) 5 percent for the ratio determined under subparagraph (A)(ii).

''(iii) 50 percent for the ratio determined under subparagraph (A)(iii).

''(iv) 5 percent for the ratio determined under subparagraph (A)(iv).

''(C) DETERMINATION OF PROJECTED AND ACTUAL EXPENDITURES.—For purposes of subparagraph (A):

''(i) PROJECTED EXPENDITURES.—The projected expenditures described in clauses (i) and (iii) of such subparagraph with respect to a fiscal year shall be determined on the basis of amounts reported by States to the Secretary on the May 15th submission of Form CMS–37 and Form CMS–21B submitted not later than June 30th of the fiscal year preceding such year.

''(ii) ACTUAL EXPENDITURES.—The actual expenditures described in clause (iv) of such subparagraph with respect to a second preceding fiscal year shall be determined on the basis of amounts reported by States to the Secretary on Form CMS–64 and Form CMS–21 submitted not later than November 30 of the preceding fiscal year.''.

(b) 2-YEAR AVAILABILITY OF ALLOTMENTS; EXPENDITURES COUNTED AGAINST OLDEST ALLOTMENTS.—Section 2104(e) of the Social Security Act (42 U.S.C. 1397dd(e)) is amended to read as follows:

''(e) AVAILABILITY OF AMOUNTS ALLOTTED.—

''(1) IN GENERAL.—Except as provided in the succeeding paragraphs of this subsection, amounts allotted to a State pursuant to this section—

''(A) for each of fiscal years 1998 through 2008, shall remain available for expenditure by the State through the end of the second succeeding fiscal year; and

''(B) for each of fiscal years 2009 through 2013, shall remain available for expenditure by the State only through the end of the fiscal year succeeding the fiscal year for which such amounts are allotted.

''(2) ELIMINATION OF REDISTRIBUTION OF ALLOTMENTS NOT EXPENDED WITHIN 3 YEARS.—Notwithstanding subsection (f), amounts allotted to a State under this section for fiscal years beginning with fiscal year 2009 that remain unexpended as of the end of the fiscal year succeeding the fiscal year for which the amounts are allotted shall not be redistributed to other States and shall revert to the Treasury on October 1 of the third succeeding fiscal year.

''(3) RULE FOR COUNTING EXPENDITURES AGAINST FISCAL YEAR ALLOTMENTS.—Expenditures under the State child health plan made on or after April 1, 2009, shall be counted against allotments for the earliest fiscal year for which funds are available for expenditure under this subsection.''.

(c) CONFORMING AMENDMENTS.—

(1) Section 2104(b)(1) of the Social Security Act (42 U.S.C. 1397dd(b)(1)) is amended by striking ''subsection (d)'' and inserting ''the succeeding subsections of this section''.

(2) Section 2104(f) of such Act (42 U.S.C. 1397dd(f)) is amended by striking ''The'' and inserting ''Subject to subsection (e)(2), the''.

SEC. 4. LIMITATIONS ON MATCHING RATES FOR POPULATIONS OTHER THAN LOW-INCOME CHILDREN OR PREGNANT WOMEN COVERED THROUGH A SECTION 1115 WAIVER.

(a) LIMITATION ON PAYMENTS.—Section 2105(c) of the Social Security Act (42 U.S.C. 1397ee(c)) is amended by adding at the end the following new paragraph:

''(8) LIMITATIONS ON MATCHING RATE FOR POPULATIONS OTHER THAN TARGETED LOW-INCOME CHILDREN OR PREGNANT WOMEN COVERED THROUGH A SECTION 1115 WAIVER.—For child health assistance or health benefits coverage furnished in any fiscal year beginning with fiscal year 2010:

''(A) FMAP APPLIED TO PAYMENTS FOR COVERAGE OF CHILDREN OR PREGNANT WOMEN COVERED THROUGH A SECTION 1115 WAIVER ENROLLED IN THE STATE CHILD HEALTH PLAN ON THE DATE OF ENACTMENT OF THE KIDS FIRST ACT AND WHOSE GROSS FAMILY INCOME IS DETERMINED TO EXCEED THE INCOME ELIGIBILITY

LEVEL SPECIFIED FOR A TARGETED LOW-INCOME CHILD.—Notwithstanding subsections (b)(1)(B) and (d) of section 2110, in the case of any individual described in subsection (c) of section 105 of the Kids First Act who the State elects to continue to provide child health assistance for under the State child health plan in accordance with the requirements of such subsection, the Federal medical assistance percentage (as determined under section 1905(b) without regard to clause (4) of such section) shall be substituted for the enhanced FMAP under subsection (a)(1) with respect to such assistance.

''(B) FMAP APPLIED TO PAYMENTS ONLY FOR NONPREGNANT CHILDLESS ADULTS AND PARENTS AND CARETAKER RELATIVES ENROLLED UNDER A SECTION 1115 WAIVER ON THE DATE OF ENACTMENT OF THE KIDS FIRST ACT.—The Federal medical assistance percentage (as determined under section 1905(b) without regard to clause (4) of such section) shall be substituted for the enhanced FMAP under subsection (a)(1) with respect to payments for child health assistance or health benefits coverage provided under the State child health plan for any of the following:

''(i) PARENTS OR CARETAKER RELATIVES ENROLLED UNDER A WAIVER ON THE DATE OF ENACTMENT OF THE KIDS FIRST ACT.—A nonpregnant parent or a nonpregnant caretaker relative of a targeted low-income child who is enrolled in the State child health plan under a waiver, experimental, pilot, or demonstration project on the date of enactment of the Kids First Act and whose family income does not exceed the income eligibility applied under such waiver with respect to that population on such date.

''(ii) NONPREGNANT CHILDLESS ADULTS ENROLLED UNDER A WAIVER ON SUCH DATE.—A nonpregnant childless adult enrolled in the State child health plan under a waiver, experimental, pilot, or demonstration project described in section 6102(c)(3) of the Deficit Reduction Act of 2005 (42 U.S.C. 1397gg note) on the date of enactment of the Kids First Act and whose family income does not exceed the income eligibility applied under such waiver with respect to that population on such date.

''(iii) NO REPLACEMENT ENROLLEES.—Nothing in clauses (i) or (ii) shall be construed as authorizing a State to provide child health assistance or health benefits coverage under a waiver described in either such clause to a nonpregnant parent or a nonpregnant caretaker relative of a targeted low-income child, or a nonpregnant childless adult, who is not enrolled under the waiver on the date of enactment of the Kids First Act.

''(C) NO FEDERAL PAYMENT FOR ANY NEW NONPREGNANT ADULT ENROLLEES OR FOR SUCH ENROLLEES WHO NO LONGER SATISFY INCOME ELIGIBILITY REQUIREMENTS.—Payment shall not be made under this section for child health assistance or other health benefits coverage provided under the State child health plan or under a waiver under section 1115 for any of the following:

''(i) PARENTS OR CARETAKER RELATIVES UNDER A SECTION 1115 WAIVER APPROVED AFTER THE DATE OF ENACTMENT OF THE KIDS FIRST ACT.—A nonpregnant parent or a nonpregnant caretaker relative of a targeted low-income child under a waiver, experimental, pilot, or demonstration project that is approved on or after the date of enactment of the Kids First Act.

''(ii) PARENTS, CARETAKER RELATIVES, AND NONPREGNANT CHILDLESS ADULTS WHOSE FAMILY INCOME EXCEEDS THE INCOME ELIGIBILITY LEVEL SPECIFIED UNDER A SECTION 1115 WAIVER APPROVED PRIOR TO THE KIDS FIRST ACT.—Any nonpregnant parent or a nonpregnant caretaker relative of a targeted low-income child whose family income exceeds the income eligibility level referred to in subparagraph (B)(i), and any nonpregnant childless adult whose family income exceeds the income eligibility level referred to in subparagraph (B)(ii).

''(iii) NONPREGNANT CHILDLESS ADULTS, PARENTS, OR CARETAKER RELATIVES NOT ENROLLED UNDER A SECTION 1115 WAIVER ON THE DATE OF ENACTMENT OF THE KIDS FIRST ACT.—Any nonpregnant parent or a nonpregnant caretaker relative of a targeted low-income child who is not enrolled in the State child health plan under a section 1115 waiver, experimental, pilot, or demonstration project referred to in subparagraph (B)(i) on the date of enactment of the Kids First Act, and any nonpregnant childless adult who is not enrolled in the State child health plan under a section 1115 waiver, experimental, pilot, or demonstration project referred to in subparagraph (B)(ii)(I) on such date.

''(D) DEFINITION OF CARETAKER RELATIVE.—In this subparagraph, the term 'caretaker relative' has the meaning given that term for purposes of carrying out section 1931.

''(E) RULE OF CONSTRUCTION.—Nothing in this paragraph shall be construed as implying that payments for coverage of populations for which the Federal medical assistance percentage (as so determined) is to be substituted for the enhanced FMAP under subsection (a)(1) in accordance with this paragraph are to be made from funds other than the allotments determined for a State under section 2104.''.

(b) CONFORMING AMENDMENT.—Section 2105(a)(1) of the Social Security Act (42 U.S.C. 1397dd(a)(1)) is amended, in the matter preceding subparagraph (A), by inserting ''or subsection (c)(8)'' after ''subparagraph (B)''.

SEC. 5. PROHIBITION ON NEW SECTION 1115 WAIVERS FOR COVERAGE OF ADULTS OTHER THAN PREGNANT WOMEN.

(a) IN GENERAL.—Section 2107(f) of the Social Security Act (42 U.S.C. 1397gg(f)) is amended—

(1) by striking '', the Secretary'' and inserting '':

''(1) The Secretary''; and

(2) by adding at the end the following new paragraphs:

''(2) The Secretary may not approve, extend, renew, or amend a waiver, experimental, pilot, or demonstration project with respect to a State after the date of enactment of the Kids First Act that would allow funds made available under this title to be used to provide child health assistance or other health benefits coverage for any other adult other than a pregnant woman whose family income does not exceed the income eligibility level specified for a targeted low-income child in that State under a waiver or project approved as of such date.

''(3) The Secretary may not approve, extend, renew, or amend a waiver, experimental, pilot, or demonstration project with respect to a State after the date of enactment of the Kids First Act that would waive or modify the requirements of section 2105(c)(8).''.

(b) CLARIFICATION OF AUTHORITY FOR COVERAGE OF PREGNANT WOMEN.—Section 2106 of the Social Security Act (42 U.S.C. 1397ff) is amended by adding at the end the following new subsection:

''(f) NO AUTHORITY TO COVER PREGNANT WOMEN THROUGH STATE PLAN.—For purposes of this title, a State may provide assistance to a pregnant woman under the State child health plan only—

''(1) by virtue of a waiver under section 1115; or

''(2) through the application of sections 457.10, 457.350(b)(2), 457.622(c)(5), and 457.626(a)(3) of title 42, Code of Federal Regulations (as in effect on the date of enactment of the Kids First Act).''.

(c) ASSURANCE OF NOTICE TO AFFECTED ENROLLEES.—The Secretary of Health and Human Services shall establish procedures to ensure that States provide adequate public notice for parents, caretaker relatives, and nonpregnant childless adults whose eligibility for child health assistance or health benefits coverage under a waiver under section 1115 of the Social Security Act will be terminated as a result of the amendments made by subsection (a), and that States otherwise adhere to regulations of the Secretary relating to procedures for terminating waivers under section 1115 of the Social Security Act.

SEC. 6. STANDARDIZATION OF DETERMINATION OF FAMILY INCOME FOR TARGETED LOW-INCOME CHILDREN UNDER TITLE XXI AND OPTIONAL TARGETED LOW-INCOME CHILDREN UNDER TITLE XIX.

(a) ELIGIBILITY BASED ON GROSS INCOME.—

(1) IN GENERAL.—Section 2110 of the Social Security Act (42 U.S.C. 1397jj) is amended—

(A) in subsection (b)(1)(A), by inserting ''in accordance with subsection (d)'' after ''State plan''; and

(B) by adding at the end the following new subsection:

''(d) STANDARDIZATION OF DETERMINATION OF FAMILY INCOME.—A State shall determine family income for purposes of determining income eligibility for child health assistance or other health benefits coverage under the State child health plan (or under a waiver of such plan under section 1115) solely on the basis of the gross income (as defined by the Secretary) of the family.''.

(2) PROHIBITION ON WAIVER OF REQUIREMENTS.—Section 2107(f) (42 U.S.C. 1397gg(f)), as amended by section 5(a), is amended by adding at the end the following new paragraph:

''(4) The Secretary may not approve a waiver, experimental, pilot, or demonstration project with respect to a State after the date of enactment of the Kids First Act that would waive or modify the requirements of section 2110(d) (relating to determining income eligibility on the basis of gross income) and regulations promulgated to carry out such requirements.''.

(b) REGULATIONS.—Not later than 90 days after the date of enactment of this Act, the Secretary of Health and Human Services shall promulgate interim final regulations defining gross income for purposes of section 2110(d) of the Social Security Act, as added by subsection (a).

(c) APPLICATION TO CURRENT ENROLLEES.—The interim final regulations promulgated under subsection (b) shall not be used to determine the income eligibility of any individual enrolled in a State child health plan under title XXI of the Social Security Act on the date of enactment of this Act before the date on which such eligibility of the individual is required to be redetermined under the plan as in effect on such date. In the case of any individual enrolled in such plan on such date who, solely as a result of the application of subsection (d) of section 2110 of the Social Security Act (as added by subsection (a)) and the regulations promulgated under subsection (b), is determined to be ineligible for child health assistance under the State child health plan, a State may elect, subject to substitution of the Federal medical assistance percentage for the enhanced FMAP under section 2105(c)(8)(A) of the Social Security Act (as added by section 4(a)), to continue to provide the individual with such assistance for so long as the individual otherwise would be eligible for such assistance and the individual's family income, if determined under the income and resource standards and methodologies applicable under the State child health plan on September 30,

2008, would not exceed the income eligibility level applicable to the individual under the State child health plan.

SEC. 7. GRANTS FOR OUTREACH AND ENROLLMENT.

(a) GRANTS.—Title XXI of the Social Security Act (42 U.S.C. 1397aa et seq.) is amended by adding at the end the following:

"SEC. 2111. GRANTS TO IMPROVE OUTREACH AND ENROLLMENT.

''(a) OUTREACH AND ENROLLMENT GRANTS; NATIONAL CAMPAIGN.—

''(1) IN GENERAL.—From the amounts appropriated for a fiscal year under subsection (f), subject to paragraph (2), the Secretary shall award grants to eligible entities to conduct outreach and enrollment efforts that are designed to increase the enrollment and participation of eligible children under this title and title XIX.

''(2) 10 PERCENT SET ASIDE FOR NATIONAL ENROLLMENT CAMPAIGN.—An amount equal to 10 percent of such amounts for the fiscal year shall be used by the Secretary for expenditures during the fiscal year to carry out a national enrollment campaign in accordance with subsection (g).

''(b) AWARD OF GRANTS.—

''(1) PRIORITY FOR AWARDING.—

''(A) IN GENERAL.—In awarding grants under subsection (a), the Secretary shall give priority to eligible entities that—

''(i) propose to target geographic areas with high rates of—

''(I) eligible but unenrolled children, including such children who reside in rural areas; or

''(II) racial and ethnic minorities and health disparity populations, including those proposals that address cultural and linguistic barriers to enrollment; and

''(ii) submit the most demonstrable evidence required under paragraphs (1) and (2) of subsection (c).

''(B) 10 PERCENT SET ASIDE FOR OUTREACH TO INDIAN CHILDREN.—An amount equal to 10 percent of the funds appropriated under subsection (f) for a fiscal year shall be used by the Secretary to award grants to Indian Health Service providers and urban Indian organizations receiving funds under title V of the Indian Health Care Improvement Act (25 U.S.C. 1651 et seq.) for outreach to, and enrollment of, children who are Indians.

''(2) 2-YEAR AVAILABILITY.—A grant awarded under this section for a fiscal year shall remain available for expenditure through the end of the succeeding fiscal year.

''(c) APPLICATION.—An eligible entity that desires to receive a grant under subsection (a) shall submit an application to the Secretary in such form and manner, and containing such information, as the Secretary may decide. Such application shall include—

''(1) evidence demonstrating that the entity includes members who have access to, and credibility with, ethnic or low-income populations in the communities in which activities funded under the grant are to be conducted;

''(2) evidence demonstrating that the entity has the ability to address barriers to enrollment, such as lack of awareness of eligibility, stigma concerns and punitive fears associated with receipt of benefits, and other cultural barriers to applying for and receiving child health assistance or medical assistance;

''(3) specific quality or outcomes performance measures to evaluate the effectiveness of activities funded by a grant awarded under this section; and

''(4) an assurance that the eligible entity shall—

''(A) conduct an assessment of the effectiveness of such activities against the performance measures;

''(B) cooperate with the collection and reporting of enrollment data and other information in order for the Secretary to conduct such assessments.

''(C) in the case of an eligible entity that is not the State, provide the State with enrollment data and other information as necessary for the State to make necessary projections of eligible children and pregnant women.

''(d) SUPPLEMENT, NOT SUPPLANT.—Federal funds awarded under this section shall be used to supplement, not supplant, non-Federal funds that are otherwise available for activities funded under this section.

''(e) DEFINITIONS.—In this section:

''(1) ELIGIBLE ENTITY.—The term 'eligible entity' means any of the following:

''(A) A State with an approved child health plan under this title.

''(B) A local government.

''(C) An Indian tribe or tribal consortium, a tribal organization, an urban Indian organization receiving funds under title V of the Indian Health Care Improvement Act (25 U.S.C. 1651 et seq.), or an Indian Health Service provider.

''(D) A Federal health safety net organization.

''(E) A State, national, local, or community-based public or nonprofit private organization.

''(F) A faith-based organization or consortia, to the extent that a grant awarded to such an entity is consistent with the requirements of section 1955 of the Public Health Service Act (42 U.S.C. 300x–65) relating to a grant award to non-governmental entities.

''(G) An elementary or secondary school.

''(H) A national, local, or community-based public or nonprofit private organization, including organizations that use community health workers or community-based doula programs.

''(2) FEDERAL HEALTH SAFETY NET ORGANIZATION.—The term 'Federal health safety net organization' means—

''(A) a federally-qualified health center (as defined in section 1905(l)(2)(B));

''(B) a hospital defined as a disproportionate share hospital for purposes of section 1923;

''(C) a covered entity described in section 340B(a)(4) of the Public Health Service Act (42 U.S.C. 256b(a)(4)); and

''(D) any other entity or consortium that serves children under a federally-funded program, including the special supplemental nutrition program for women, infants, and children (WIC) established under section 17 of the Child Nutrition Act of 1966 (42 U.S.C. 1786), the head start and early head start programs under the Head Start Act (42 U.S.C. 9801 et seq.), the school lunch program established under the Richard B. Russell National School Lunch Act, and an elementary or secondary school.

''(3) INDIANS; INDIAN TRIBE; TRIBAL ORGANIZATION; URBAN INDIAN ORGANIZATION.—The terms 'Indian', 'Indian tribe', 'tribal organization', and 'urban Indian organization' have the meanings given such terms in section 4 of the Indian Health Care Improvement Act (25 U.S.C. 1603).

''(4) COMMUNITY HEALTH WORKER.—The term 'community health worker' means an individual who promotes health or nutrition within the community in which the individual resides—

''(A) by serving as a liaison between communities and health care agencies;

''(B) by providing guidance and social assistance to community residents;

''(C) by enhancing community residents' ability to effectively communicate with health care providers;

''(D) by providing culturally and linguistically appropriate health or nutrition education;

''(E) by advocating for individual and community health or nutrition needs; and

''(F) by providing referral and followup services.

''(f) APPROPRIATION.—

''(1) IN GENERAL.—There is appropriated, out of any money in the Treasury not otherwise appropriated, for the purpose of awarding grants under this section—

''(A) $100,000,000 for each of fiscal years 2009 and 2010;

''(B) $75,000,000 for each of fiscal years 2011 and 2012; and

''(C) $50,000,000 for fiscal year 2013.

''(2) GRANTS IN ADDITION TO OTHER AMOUNTS PAID.—Amounts appropriated and paid under the authority of this section shall be in addition to amounts appropriated under section 2104 and paid to States in accordance with section 2105, including with respect to expenditures for outreach activities in accordance with subsections (a)(1)(D)(iii) and (c)(2)(C) of that section.

''(g) NATIONAL ENROLLMENT CAMPAIGN.—From the amounts made available under subsection (a)(2) for a fiscal year, the Secretary shall develop and implement a national enrollment campaign to improve the enrollment of underserved child populations in the programs established under this title and title XIX. Such campaign may include—

''(1) the establishment of partnerships with the Secretary of Education and the Secretary of Agriculture to develop national campaigns to link the eligibility and enrollment systems for the assistance programs each Secretary administers that often serve the same children;

''(2) the integration of information about the programs established under this title and title XIX in public health awareness campaigns administered by the Secretary;

''(3) increased financial and technical support for enrollment hotlines maintained by the Secretary to ensure that all States participate in such hotlines;

''(4) the establishment of joint public awareness outreach initiatives with the Secretary of Education and the Secretary of Labor regarding the importance of health insurance to building strong communities and the economy;

''(5) the development of special outreach materials for Native Americans or for individuals with limited English proficiency; and

''(6) such other outreach initiatives as the Secretary determines would increase public awareness of the programs under this title and title XIX.''.

(b) NONAPPLICATION OF ADMINISTRATIVE EXPENDITURES CAP.—Section 2105(c)(2) of the Social Security Act (42 U.S.C. 1397ee(c)(2)) is amended by adding at the end the following:

''(C) NONAPPLICATION TO EXPENDITURES FOR OUTREACH AND ENROLLMENT.—The limitation under subparagraph (A) shall not apply with respect to expenditures for outreach activities under section 2102(c)(1), or for enrollment activities, for children eligible for child health assistance under the State child health plan or medical assistance under the State plan under title XIX.''.

SEC. 8. IMPROVED STATE OPTION FOR OFFERING PREMIUM ASSISTANCE FOR COVERAGE OF CHILDREN THROUGH PRIVATE PLANS UNDER SCHIP AND MEDICAID.

(a) IN GENERAL.—Section 2105(c) of the Social Security Act (42 U.S.C. 1397ee(c)), as amended by section 4(a) is amended by adding at the end the following:

''(9) ADDITIONAL STATE OPTION FOR OFFERING PREMIUM ASSISTANCE.—

''(A) IN GENERAL.—Subject to the succeeding provisions of this paragraph, a State

may elect to offer a premium assistance subsidy (as defined in subparagraph (C)) for qualified coverage (as defined in subparagraph (B)) to all targeted low-income children who are eligible for child health assistance under the plan and have access to such coverage in accordance with the requirements of this paragraph.

''(B) QUALIFIED COVERAGE.—In this paragraph, the term 'qualified coverage' means the following:

''(i) QUALIFIED EMPLOYER SPONSORED COVERAGE.—

''(I) IN GENERAL.—A group health plan or health insurance coverage offered through an employer that is—

''(aa) substantially equivalent to the benefits coverage in a benchmark benefit package described in section 2103(b) or benchmark-equivalent coverage that meets the requirements of section 2103(a)(2);

''(bb) made similarly available to all of the employer's employees and for which the employer makes a contribution to the premium that is not less for employees receiving a premium assistance subsidy under any option available under the State child health plan under this title or the State plan under title XIX to provide such assistance than the employer contribution provided for all other employees; and

''(cc) cost-effective, as determined under subclause (II).

''(II) COST-EFFECTIVENESS.—A group health plan or health insurance coverage offered through an employer shall be considered to be cost-effective if—

''(aa) the marginal premium cost to purchase family coverage through the employer is less than the State cost of providing child health assistance through the State child health plan for all the children in the family who are targeted low-income children; or

''(bb) the marginal premium cost between individual coverage and purchasing family coverage through the employer is not greater than 175 percent of the cost to the State to provide child health assistance through the State child health plan for a targeted low-income child.

''(ii) QUALIFIED NON-GROUP COVERAGE.—Health insurance coverage offered to individuals in the non-group health insurance market that is substantially equivalent to the benefits coverage in a benchmark benefit package described in section 2103(b) or benchmark-equivalent coverage that meets the requirements of section 2103(a)(2).

''(iii) HIGH DEDUCTIBLE HEALTH PLAN.—A high deductible health plan (as defined in section 223(c)(2) of the Internal Revenue Code of 1986) purchased through a health savings account (as defined under section 223(d) of such Code).

''(C) PREMIUM ASSISTANCE SUBSIDY.—

''(i) IN GENERAL.—In this paragraph, the term 'premium assistance subsidy' means, with respect to a targeted low-income child, the amount equal to the difference between the employee contribution required for enrollment only of the employee under qualified employer sponsored coverage and the employee contribution required for enrollment of the employee and the child in such coverage, less any applicable premium cost-sharing applied under the State child health plan, subject to the annual aggregate cost-sharing limit applied under section 2103(e)(3)(B).

''(ii) STATE PAYMENT OPTION.—Subject to clause (iii), a State may provide a premium assistance subsidy directly to an employer or as reimbursement to an employee for out-of-pocket expenditures.

''(iii) REQUIREMENT FOR DIRECT PAYMENT TO EMPLOYEE.—A State shall not pay a premium assistance subsidy directly to the employee, unless the State has established procedures to ensure that the targeted low-income child on whose behalf such payments are made are actually enrolled in the qualified employer sponsored coverage.

''(iv) TREATMENT AS CHILD HEALTH ASSISTANCE.—Expenditures for the provision of premium assistance subsidies shall be considered child health assistance described in paragraph (1)(C) of subsection (a) for purposes of making payments under that subsection.

''(v) STATE OPTION TO REQUIRE ACCEPTANCE OF SUBSIDY.—A State may condition the provision of child health assistance under the State child health plan for a targeted low-income child on the receipt of a premium assistance subsidy for enrollment in qualified employer sponsored coverage if the State determines the provision of such a subsidy to be more cost-effective in accordance with subparagraph (B)(ii).

''(vi) NOT TREATED AS INCOME.—Notwithstanding any other provision of law, a premium assistance subsidy provided in accordance with this paragraph shall not be treated as income to the child or the parent of the child for whom such subsidy is provided.

''(D) NO REQUIREMENT TO PROVIDE SUPPLEMENTAL COVERAGE FOR BENEFITS AND ADDITIONAL COST-SHARING PROTECTION PROVIDED UNDER THE STATE CHILD HEALTH PLAN.—

''(i) IN GENERAL.—A State that elects the option to provide a premium assistance subsidy under this paragraph shall not be required to provide a targeted low-income child enrolled in qualified employer sponsored coverage with supplemental coverage for items or services that are not covered, or are only partially covered, under the qualified employer sponsored coverage or cost-sharing protection other than the protection required under section 2103(e)(3)(B).

''(ii) NOTICE OF COST-SHARING REQUIREMENTS.—A State shall provide a targeted low-income child or the parent of such a child (as appropriate) who is provided with a premium assistance subsidy in accordance with this paragraph with notice of the cost-sharing requirements and limitations imposed under the qualified employer sponsored coverage in which the child is enrolled upon the enrollment of the child in such coverage and annually thereafter.

''(iii) RECORD KEEPING REQUIREMENTS.—A State may require a parent of a targeted low-income child that is enrolled in qualified employer-sponsored coverage to bear the responsibility for keeping track of out-of-pocket expenditures incurred for cost-sharing imposed under such coverage and to notify the State when the limit on such expenditures imposed under section 2103(e)(3)(B) has been reached for a year from the effective date of enrollment for such year.

''(iv) STATE OPTION FOR REIMBURSEMENT.—A State may retroactively reimburse a parent of a targeted low-income child for out-of-pocket expenditures incurred after reaching the 5 percent cost-sharing limitation imposed under section 2103(e)(3)(B) for a year.

''(E) 6-MONTH WAITING PERIOD REQUIRED.—A State shall impose at least a 6-month waiting period from the time an individual is enrolled in private health insurance prior to the provision of a premium assistance subsidy for a targeted low-income child in accordance with this paragraph.

''(F) NON APPLICATION OF WAITING PERIOD FOR ENROLLMENT IN THE STATE MEDICAID PLAN OR THE STATE CHILD HEALTH PLAN.—A targeted low-income child provided a premium assistance subsidy in accordance with this paragraph who loses eligibility for such subsidy shall not be treated as having been enrolled in private health insurance coverage for purposes of applying any waiting period imposed under the State child health plan or the State plan under title XIX for the enrollment of the child under such plan.

''(G) ASSURANCE OF SPECIAL ENROLLMENT PERIOD UNDER GROUP HEALTH PLANS IN CASE OF ELIGIBILITY FOR PREMIUM SUBSIDY ASSISTANCE.—No payment shall be made under subsection (a) for amounts expended for the provision of premium assistance subsidies under this paragraph unless a State provides assurances to the Secretary that the State has in effect laws requiring a group health plan, a health insurance issuer offering group health insurance coverage in connection with a group health plan, and a self-funded health plan, to permit an employee who is eligible, but not enrolled, for coverage under the terms of the plan (or a child of such an employee if the child is eligible, but not enrolled, for coverage under such terms) to enroll for coverage under the terms of the plan if the employee's child becomes eligible for a premium assistance subsidy under this paragraph.

''(H) NO EFFECT ON PREVIOUSLY APPROVED PREMIUM ASSISTANCE PROGRAMS.—Nothing in this paragraph shall be construed as limiting the authority of a State to offer premium assistance under section 1906, a waiver described in paragraph (2)(B) or (3), a waiver approved under section 1115, or other authority in effect on February 1, 2009.

''(I) NOTICE OF AVAILABILITY.—A State shall—

''(i) include on any application or enrollment form for child health assistance a notice of the availability of premium assistance subsidies for the enrollment of targeted low-income children in qualified employer sponsored coverage;

''(ii) provide, as part of the application and enrollment process under the State child health plan, information describing the availability of such subsidies and how to elect to obtain such a subsidy; and

''(iii) establish such other procedures as the State determines necessary to ensure that parents are informed of the availability of such subsidies under the State child health plan.''.

(b) APPLICATION TO MEDICAID.—Section 1906 of the Social Security Act (42 U.S.C. 1396e) is amended by inserting after subsection (c) the following:

''(d) The provisions of section 2105(c)(9) shall apply to a child who is eligible for medical assistance under the State plan in the same manner as such provisions apply to a targeted low-income child under a State child health plan under title XXI. Section 1902(a)(34) shall not apply to a child who is provided a premium assistance subsidy under the State plan in accordance with the preceding sentence.''.

SEC. 9. TREATMENT OF UNBORN CHILDREN.

(a) CODIFICATION OF CURRENT REGULATIONS.—Section 2110(c)(1) of the Social Security Act (42 U.S.C. 1397jj(c)(1)) is amended by striking the period at the end and inserting the following: '', and includes, at the option of a State, an unborn child. For purposes of the previous sentence, the term 'unborn child' means a member of the species Homo sapiens, at any stage of development, who is carried in the womb.''.

(b) CLARIFICATIONS REGARDING COVERAGE OF MOTHERS.—Section 2103 (42 U.S.C. 1397cc) is amended by adding at the end the following new subsection:

''(g) CLARIFICATIONS REGARDING AUTHORITY TO PROVIDE POSTPARTUM SERVICES AND MATERNAL HEALTH CARE.—Any State that provides child health assistance to an unborn child under the option described in section 2110(c)(1) may—

''(1) continue to provide such assistance to the mother, as well as postpartum services, through the end of the month in which the

60-day period (beginning on the last day of pregnancy) ends; and

''(2) in the interest of the child to be born, have flexibility in defining and providing services to benefit either the mother or unborn child consistent with the health of both.''.

SEC. 10. 50 PERCENT MATCHING RATE FOR ALL MEDICAID ADMINISTRATIVE COSTS.

Section 1903(a) of the Social Security Act (42 U.S.C. 1396b(a)) is amended—

(1) by striking paragraph (2);

(2) by redesignating paragraph (3)(E) as paragraph (2) and re-locating and indenting it appropriately;

(3) in paragraph (2), as so redesignated, by redesignating clauses (i) and (ii) as subparagraphs (A) and (B), and indenting them appropriately;

(4) by striking paragraphs (3) and (4);

(5) in paragraph (5), by striking ''which are attributable to the offering, arranging, and furnishing'' and inserting ''which are for the medical assistance costs of furnishing'';

(6) by striking paragraph (6);

(7) in paragraph (7), by striking ''subject to section 1919(g)(3)(B),''; and

(8) by redesignating paragraphs (5) and (7) as paragraphs (3) and (4), respectively.

SEC. 11. REDUCTION IN PAYMENTS FOR MEDICAID ADMINISTRATIVE COSTS TO PREVENT DUPLICATION OF SUCH PAYMENTS UNDER TANF.

Section 1903 of the Social Security Act (42 U.S.C. 1396b) is amended—

(1) in subsection (a)(7), by striking ''section 1919(g)(3)(B)'' and inserting ''subsection (h)'';

(2) in subsection (a)(2)(D) by inserting '', subject to subsection (g)(3)(C) of such section'' after ''as are attributable to State activities under section 1919(g)''; and

(3) by adding after subsection (g) the following new subsection:

''(h) REDUCTION IN PAYMENTS FOR ADMINISTRATIVE COSTS TO PREVENT DUPLICATION OF PAYMENTS UNDER TITLE IV.—Beginning with the calendar quarter commencing April 1, 2009, the Secretary shall reduce the amount paid to each State under subsection (a)(7) for each quarter by an amount equal to ¼ of the annualized amount determined for the Medicaid program under section 16(k)(2)(B) of the Food Stamp Act of 1977 (7 U.S.C. 2025(k)(2)(B)).''.

SEC. 12. ELIMINATION OF WAIVER OF CERTAIN MEDICAID PROVIDER TAX PROVISIONS.

Effective October 1, 2009, subsection (c) of section 4722 of the Balanced Budget Act of 1997 (Public Law 105–33; 111 Stat. 515) is repealed.

SEC. 13. ELIMINATION OF SPECIAL PAYMENTS FOR CERTAIN PUBLIC HOSPITALS.

Effective October 1, 2009, subsection (d) of section 701 of the Medicare, Medicaid, and SCHIP Benefits Improvement and Protection Act of 2000, as enacted into law by section 1(a)(6) of Public Law 106–554 (42 U.S.C. 1396r–4 note), is repealed.

SEC. 14. EFFECTIVE DATE; COORDINATION OF FUNDING FOR FISCAL YEAR 2009.

(a) IN GENERAL.—Unless otherwise specified, subject to subsection (b), the amendments made by this Act shall take effect on the date of enactment of this Act.

(b) DELAY IF STATE LEGISLATION REQUIRED.—In the case of a State child health plan under title XXI of the Social Security Act or a waiver of such plan under section 1115 of such Act which the Secretary of Health and Human Services determines requires State legislation (other than legislation appropriating funds) in order for the plan or waiver to meet the additional requirements imposed by the amendments made by this Act, the State child health plan or waiver shall not be regarded as failing to comply with the requirements of such title XXI solely on the basis of its failure to meet such additional requirements before the first day of the first calendar quarter beginning after the close of the first regular session of the State legislature that begins after the date of the enactment of this Act. For purposes of the previous sentence, in the case of a State that has a 2-year legislative session, each year of such session shall be deemed to be a separate regular session of the State legislature.

(c) COORDINATION OF FUNDING FOR FISCAL YEAR 2009.—Notwithstanding any other provision of law, insofar as funds have been appropriated under section 2104(a)(11) of the Social Security Act, as amended by section 201(a) of Public Law 110–173 and in effect on January 1, 2009, to provide allotments to States under title XXI of the Social Security Act for fiscal year 2009—

(1) any amounts that are so appropriated that are not so allotted and obligated before the date of the enactment of this Act are rescinded; and

(2) any amount provided for allotments under title XXI of such Act to a State under the amendments made by this Act for such fiscal year shall be reduced by the amount of such appropriations so allotted and obligated before such date.

SA 41. Mr. GRASSLEY (for himself, Mr. HATCH, Mr. ROBERTS, Mr. VITTER, and Mr. CHAMBLISS) proposed an amendment to amendment SA 39 proposed by Mr. REID (for Mr. BAUCUS) to the bill H.R. 2, to amend title XXI of the Social Security Act to extend and improve the Children's Health Insurance Program, and for other purposes; as follows:

Strike section 214 and insert the following:

SEC. 214. INCREASED FUNDING FOR ENROLLMENT OF UNINSURED LOW INCOME AMERICAN CHILDREN.

Section 2105(a)(3)(E) (42 U.S.C. 1397ee(a)(3)(E)), as added by section 104, is amended by adding at the end the following:

''(iv) INCREASE IN BONUS PAYMENTS FOR FISCAL YEARS 2012 THROUGH 2019.—With respect to each of fiscal years 2012 through 2019:

''(I) Clause (i) of subparagraph (B) shall be applied by substituting '38 percent' for '15 percent'.

''(II) Clause (ii) of subparagraph (B) shall be applied by substituting '70 percent' for '62.5 percent'.

SA 42. Mr. DEMINT submitted an amendment intended to be proposed by him to the bill H.R. 2, to amend title XXI of the Social Security Act to extend and improve the Children's Health Insurance Program, and for other purposes; which was ordered to lie on the table; as follows:

At the appropriate place, add the following:

TITLE __—HEALTH CARE CHOICE

SEC. __01. SHORT TITLE OF TITLE.

This title may be cited as ''Health Care Choice Act of 2009''.

SEC. __02. SPECIFICATION OF CONSTITUTIONAL AUTHORITY FOR ENACTMENT OF LAW.

This title is enacted pursuant to the power granted Congress under article I, section 8, clause 3, of the United States Constitution.

SEC. __03. FINDINGS.

Congress finds the following:

(1) The application of numerous and significant variations in State law impacts the ability of insurers to offer, and individuals to obtain, affordable individual health insurance coverage, thereby impeding commerce in individual health insurance coverage.

(2) Individual health insurance coverage is increasingly offered through the Internet, other electronic means, and by mail, all of which are inherently part of interstate commerce.

(3) In response to these issues, it is appropriate to encourage increased efficiency in the offering of individual health insurance coverage through a collaborative approach by the States in regulating this coverage.

(4) The establishment of risk-retention groups has provided a successful model for the sale of insurance across State lines, as the acts establishing those groups allow insurance to be sold in multiple States but regulated by a single State.

SEC. __04. COOPERATIVE GOVERNING OF INDIVIDUAL HEALTH INSURANCE COVERAGE.

(a) IN GENERAL.—Title XXVII of the Public Health Service Act (42 U.S.C. 300gg et seq.) is amended by adding at the end the following new part:

''PART D—COOPERATIVE GOVERNING OF INDIVIDUAL HEALTH INSURANCE COVERAGE

''SEC. 2795. DEFINITIONS.

''In this part:

''(1) PRIMARY STATE.—The term 'primary State' means, with respect to individual health insurance coverage offered by a health insurance issuer, the State designated by the issuer as the State whose covered laws shall govern the health insurance issuer in the sale of such coverage under this part. An issuer, with respect to a particular policy, may only designate one such State as its primary State with respect to all such coverage it offers. Such an issuer may not change the designated primary State with respect to individual health insurance coverage once the policy is issued, except that such a change may be made upon renewal of the policy. With respect to such designated State, the issuer is deemed to be doing business in that State.

''(2) SECONDARY STATE.—The term 'secondary State' means, with respect to individual health insurance coverage offered by a health insurance issuer, any State that is not the primary State. In the case of a health insurance issuer that is selling a policy in, or to a resident of, a secondary State, the issuer is deemed to be doing business in that secondary State.

''(3) HEALTH INSURANCE ISSUER.—The term 'health insurance issuer' has the meaning given such term in section 2791(b)(2), except that such an issuer must be licensed in the primary State and be qualified to sell individual health insurance coverage in that State.

''(4) INDIVIDUAL HEALTH INSURANCE COVERAGE.—The term 'individual health insurance coverage' means health insurance coverage offered in the individual market, as defined in section 2791(e)(1).

''(5) APPLICABLE STATE AUTHORITY.—The term 'applicable State authority' means, with respect to a health insurance issuer in a State, the State insurance commissioner or official or officials designated by the State to enforce the requirements of this title for the State with respect to the issuer.

''(6) HAZARDOUS FINANCIAL CONDITION.—The term 'hazardous financial condition' means that, based on its present or reasonably anticipated financial condition, a health insurance issuer is unlikely to be able—

''(A) to meet obligations to policyholders with respect to known claims and reasonably anticipated claims; or

''(B) to pay other obligations in the normal course of business.

''(7) COVERED LAWS.—

''(A) IN GENERAL.—The term 'covered laws' means the laws, rules, regulations, agreements, and orders governing the insurance business pertaining to—

''(i) individual health insurance coverage issued by a health insurance issuer;

''(ii) the offer, sale, rating (including medical underwriting), renewal, and issuance of individual health insurance coverage to an individual;

''(iii) the provision to an individual in relation to individual health insurance coverage of health care and insurance related services;

''(iv) the provision to an individual in relation to individual health insurance coverage of management, operations, and investment activities of a health insurance issuer; and

''(v) the provision to an individual in relation to individual health insurance coverage of loss control and claims administration for a health insurance issuer with respect to liability for which the issuer provides insurance.

''(B) EXCEPTION.—Such term does not include any law, rule, regulation, agreement, or order governing the use of care or cost management techniques, including any requirement related to provider contracting, network access or adequacy, health care data collection, or quality assurance.

''(8) STATE.—The term 'State' means the 50 States and includes the District of Columbia, Puerto Rico, the Virgin Islands, Guam, American Samoa, and the Northern Mariana Islands.

''(9) UNFAIR CLAIMS SETTLEMENT PRACTICES.—The term 'unfair claims settlement practices' means only the following practices:

''(A) Knowingly misrepresenting to claimants and insured individuals relevant facts or policy provisions relating to coverage at issue.

''(B) Failing to acknowledge with reasonable promptness pertinent communications with respect to claims arising under policies.

''(C) Failing to adopt and implement reasonable standards for the prompt investigation and settlement of claims arising under policies.

''(D) Failing to effectuate prompt, fair, and equitable settlement of claims submitted in which liability has become reasonably clear.

''(E) Refusing to pay claims without conducting a reasonable investigation.

''(F) Failing to affirm or deny coverage of claims within a reasonable period of time after having completed an investigation related to those claims.

''(G) A pattern or practice of compelling insured individuals or their beneficiaries to institute suits to recover amounts due under its policies by offering substantially less than the amounts ultimately recovered in suits brought by them.

''(H) A pattern or practice of attempting to settle or settling claims for less than the amount that a reasonable person would believe the insured individual or his or her beneficiary was entitled by reference to written or printed advertising material accompanying or made part of an application.

''(I) Attempting to settle or settling claims on the basis of an application that was materially altered without notice to, or knowledge or consent of, the insured.

''(J) Failing to provide forms necessary to present claims within 15 calendar days of a requests with reasonable explanations regarding their use.

''(K) Attempting to cancel a policy in less time than that prescribed in the policy or by the law of the primary State.

''(10) FRAUD AND ABUSE.—The term 'fraud and abuse' means an act or omission committed by a person who, knowingly and with intent to defraud, commits, or conceals any material information concerning, one or more of the following:

''(A) Presenting, causing to be presented or preparing with knowledge or belief that it will be presented to or by an insurer, a reinsurer, broker or its agent, false information as part of, in support of or concerning a fact material to one or more of the following:

''(i) An application for the issuance or renewal of an insurance policy or reinsurance contract.

''(ii) The rating of an insurance policy or reinsurance contract.

''(iii) A claim for payment or benefit pursuant to an insurance policy or reinsurance contract.

''(iv) Premiums paid on an insurance policy or reinsurance contract.

''(v) Payments made in accordance with the terms of an insurance policy or reinsurance contract.

''(vi) A document filed with the commissioner or the chief insurance regulatory official of another jurisdiction.

''(vii) The financial condition of an insurer or reinsurer.

''(viii) The formation, acquisition, merger, reconsolidation, dissolution or withdrawal from one or more lines of insurance or reinsurance in all or part of a State by an insurer or reinsurer.

''(ix) The issuance of written evidence of insurance.

''(x) The reinstatement of an insurance policy.

''(B) Solicitation or acceptance of new or renewal insurance risks on behalf of an insurer, reinsurer or other person engaged in the business of insurance by a person who knows or should know that the insurer or other person responsible for the risk is insolvent at the time of the transaction.

''(C) Transaction of the business of insurance in violation of laws requiring a license, certificate of authority or other legal authority for the transaction of the business of insurance.

''(D) Attempt to commit, aiding or abetting in the commission of, or conspiracy to commit the acts or omissions specified in this paragraph.

''SEC. 2796. APPLICATION OF LAW.

''(a) IN GENERAL.—The covered laws of the primary State shall apply to individual health insurance coverage offered by a health insurance issuer in the primary State and in any secondary State, but only if the coverage and issuer comply with the conditions of this section with respect to the offering of coverage in any secondary State.

''(b) EXEMPTIONS FROM COVERED LAWS IN A SECONDARY STATE.—Except as provided in this section, a health insurance issuer with respect to its offer, sale, rating (including medical underwriting), renewal, and issuance of individual health insurance coverage in any secondary State is exempt from any covered laws of the secondary State (and any rules, regulations, agreements, or orders sought or issued by such State under or related to such covered laws) to the extent that such laws would—

''(1) make unlawful, or regulate, directly or indirectly, the operation of the health insurance issuer operating in the secondary State, except that any secondary State may require such an issuer—

''(A) to pay, on a nondiscriminatory basis, applicable premium and other taxes (including high risk pool assessments) which are levied on insurers and surplus lines insurers, brokers, or policyholders under the laws of the State;

''(B) to register with and designate the State insurance commissioner as its agent solely for the purpose of receiving service of legal documents or process;

''(C) to submit to an examination of its financial condition by the State insurance commissioner in any State in which the issuer is doing business to determine the issuer's financial condition, if—

''(i) the State insurance commissioner of the primary State has not done an examination within the period recommended by the National Association of Insurance Commissioners; and

''(ii) any such examination is conducted in accordance with the examiners' handbook of the National Association of Insurance Commissioners and is coordinated to avoid unjustified duplication and unjustified repetition;

''(D) to comply with a lawful order issued—

''(i) in a delinquency proceeding commenced by the State insurance commissioner if there has been a finding of financial impairment under subparagraph (C); or

''(ii) in a voluntary dissolution proceeding;

''(E) to comply with an injunction issued by a court of competent jurisdiction, upon a petition by the State insurance commissioner alleging that the issuer is in hazardous financial condition;

''(F) to participate, on a nondiscriminatory basis, in any insurance insolvency guaranty association or similar association to which a health insurance issuer in the State is required to belong;

''(G) to comply with any State law regarding fraud and abuse (as defined in section 2795(10)), except that if the State seeks an injunction regarding the conduct described in this subparagraph, such injunction must be obtained from a court of competent jurisdiction;

''(H) to comply with any State law regarding unfair claims settlement practices (as defined in section 2795(9)); or

''(I) to comply with the applicable requirements for independent review under section 2798 with respect to coverage offered in the State;

''(2) require any individual health insurance coverage issued by the issuer to be countersigned by an insurance agent or broker residing in that Secondary State; or

''(3) otherwise discriminate against the issuer issuing insurance in both the primary State and in any secondary State.

''(c) CLEAR AND CONSPICUOUS DISCLOSURE.—A health insurance issuer shall provide the following notice, in 12-point bold type, in any insurance coverage offered in a secondary State under this part by such a health insurance issuer and at renewal of the policy, with the 5 blank spaces therein being appropriately filled with the name of the health insurance issuer, the name of primary State, the name of the secondary State, the name of the secondary State, and the name of the secondary State, respectively, for the coverage concerned:

This policy is issued by _____ and is governed by the laws and regulations of the State of _____, and it has met all the laws of that State as determined by that State's Department of Insurance. This policy may be less expensive than others because it is not subject to all of the insurance laws and regulations of the State of _____, including coverage of some services or benefits mandated by the law of the State of _____. Additionally, this policy is not subject to all of the consumer protection laws or restrictions on rate changes of the State of _____. As with all insurance products, before purchasing this policy, you should carefully review the policy and determine what health care services the policy covers and what benefits it provides, including any exclusions, limitations, or conditions for such services or benefits.''.

''(d) PROHIBITION ON CERTAIN RECLASSIFICATIONS AND PREMIUM INCREASES.—

''(1) IN GENERAL.—For purposes of this section, a health insurance issuer that provides individual health insurance coverage to an individual under this part in a primary or secondary State may not upon renewal—

''(A) move or reclassify the individual insured under the health insurance coverage from the class such individual is in at the time of issue of the contract based on the health-status related factors of the individual; or

''(B) increase the premiums assessed the individual for such coverage based on a health status-related factor or change of a health status-related factor or the past or prospective claim experience of the insured individual.

''(2) CONSTRUCTION.—Nothing in paragraph (1) shall be construed to prohibit a health insurance issuer—

''(A) from terminating or discontinuing coverage or a class of coverage in accordance with subsections (b) and (c) of section 2742;

''(B) from raising premium rates for all policy holders within a class based on claims experience;

''(C) from changing premiums or offering discounted premiums to individuals who engage in wellness activities at intervals prescribed by the issuer, if such premium changes or incentives—

''(i) are disclosed to the consumer in the insurance contract;

''(ii) are based on specific wellness activities that are not applicable to all individuals; and

''(iii) are not obtainable by all individuals to whom coverage is offered;

''(D) from reinstating lapsed coverage; or

''(E) from retroactively adjusting the rates charged an insured individual if the initial rates were set based on material misrepresentation by the individual at the time of issue.

''(e) PRIOR OFFERING OF POLICY IN PRIMARY STATE.—A health insurance issuer may not offer for sale individual health insurance coverage in a secondary State unless that coverage is currently offered for sale in the primary State.

''(f) LICENSING OF AGENTS OR BROKERS FOR HEALTH INSURANCE ISSUERS.—Any State may require that a person acting, or offering to act, as an agent or broker for a health insurance issuer with respect to the offering of individual health insurance coverage obtain a license from that State, with commissions or other compensation subject to the provisions of the laws of that State, except that a State may not impose any qualification or requirement which discriminates against a nonresident agent or broker.

''(g) DOCUMENTS FOR SUBMISSION TO STATE INSURANCE COMMISSIONER.—Each health insurance issuer issuing individual health insurance coverage in both primary and secondary States shall submit—

''(1) to the insurance commissioner of each State in which it intends to offer such coverage, before it may offer individual health insurance coverage in such State—

''(A) a copy of the plan of operation or feasibility study or any similar statement of the policy being offered and its coverage (which shall include the name of its primary State and its principal place of business);

''(B) written notice of any change in its designation of its primary State; and

''(C) written notice from the issuer of the issuer's compliance with all the laws of the primary State; and

''(2) to the insurance commissioner of each secondary State in which it offers individual health insurance coverage, a copy of the issuer's quarterly financial statement submitted to the primary State, which statement shall be certified by an independent public accountant and contain a statement of opinion on loss and loss adjustment expense reserves made by—

''(A) a member of the American Academy of Actuaries; or

''(B) a qualified loss reserve specialist.

''(h) POWER OF COURTS TO ENJOIN CONDUCT.—Nothing in this section shall be construed to affect the authority of any Federal or State court to enjoin—

''(1) the solicitation or sale of individual health insurance coverage by a health insurance issuer to any person or group who is not eligible for such insurance; or

''(2) the solicitation or sale of individual health insurance coverage that violates the requirements of the law of a secondary State which are described in subparagraphs (A) through (H) of section 2796(b)(1).

''(i) POWER OF SECONDARY STATES TO TAKE ADMINISTRATIVE ACTION.—Nothing in this section shall be construed to affect the authority of any State to enjoin conduct in violation of that State's laws described in section 2796(b)(1).

''(j) STATE POWERS TO ENFORCE STATE LAWS.—

''(1) IN GENERAL.—Subject to the provisions of subsection (b)(1)(G) (relating to injunctions) and paragraph (2), nothing in this section shall be construed to affect the authority of any State to make use of any of its powers to enforce the laws of such State with respect to which a health insurance issuer is not exempt under subsection (b).

''(2) COURTS OF COMPETENT JURISDICTION.—If a State seeks an injunction regarding the conduct described in paragraphs (1) and (2) of subsection (h), such injunction must be obtained from a Federal or State court of competent jurisdiction.

''(k) STATES' AUTHORITY TO SUE.—Nothing in this section shall affect the authority of any State to bring action in any Federal or State court.

''(l) GENERALLY APPLICABLE LAWS.—Nothing in this section shall be construed to affect the applicability of State laws generally applicable to persons or corporations.

''(m) GUARANTEED AVAILABILITY OF COVERAGE TO HIPAA ELIGIBLE INDIVIDUALS.—To the extent that a health insurance issuer is offering coverage in a primary State that does not accommodate residents of secondary States or does not provide a working mechanism for residents of a secondary State, and the issuer is offering coverage under this part in such secondary State which has not adopted a qualified high risk pool as its acceptable alternative mechanism (as defined in section 2744(c)(2)), the issuer shall, with respect to any individual health insurance coverage offered in a secondary State under this part, comply with the guaranteed availability requirements for eligible individuals in section 2741.

''SEC. 2797. PRIMARY STATE MUST MEET FEDERAL FLOOR BEFORE ISSUER MAY SELL INTO SECONDARY STATES.

''A health insurance issuer may not offer, sell, or issue individual health insurance coverage in a secondary State if the State insurance commissioner does not use a risk-based capital formula for the determination of capital and surplus requirements for all health insurance issuers.

''SEC. 2798. INDEPENDENT EXTERNAL APPEALS PROCEDURES.

''(a) RIGHT TO EXTERNAL APPEAL.—A health insurance issuer may not offer, sell, or issue individual health insurance coverage in a secondary State under the provisions of this title unless——

''(1) both the secondary State and the primary State have legislation or regulations in place establishing an independent review process for individuals who are covered by individual health insurance coverage, or

''(2) in any case in which the requirements of subparagraph (A) are not met with respect to the either of such States, the issuer provides an independent review mechanism substantially identical (as determined by the applicable State authority of such State) to that prescribed in the 'Health Carrier External Review Model Act' of the National Association of Insurance Commissioners for all individuals who purchase insurance coverage under the terms of this part, except that, under such mechanism, the review is conducted by an independent medical reviewer, or a panel of such reviewers, with respect to whom the requirements of subsection (b) are met.

''(b) QUALIFICATIONS OF INDEPENDENT MEDICAL REVIEWERS.—In the case of any independent review mechanism referred to in subsection (a)(2)—

''(1) IN GENERAL.—In referring a denial of a claim to an independent medical reviewer, or to any panel of such reviewers, to conduct independent medical review, the issuer shall ensure that—

''(A) each independent medical reviewer meets the qualifications described in paragraphs (2) and (3);

''(B) with respect to each review, each reviewer meets the requirements of paragraph (4) and the reviewer, or at least 1 reviewer on the panel, meets the requirements described in paragraph (5); and

''(C) compensation provided by the issuer to each reviewer is consistent with paragraph (6).

''(2) LICENSURE AND EXPERTISE.—Each independent medical reviewer shall be a physician (allopathic or osteopathic) or health care professional who—

''(A) is appropriately credentialed or licensed in 1 or more States to deliver health care services; and

''(B) typically treats the condition, makes the diagnosis, or provides the type of treatment under review.

''(3) INDEPENDENCE.—

''(A) IN GENERAL.—Subject to subparagraph (B), each independent medical reviewer in a case shall—

''(i) not be a related party (as defined in paragraph (7));

''(ii) not have a material familial, financial, or professional relationship with such a party; and

''(iii) not otherwise have a conflict of interest with such a party (as determined under regulations).

''(B) EXCEPTION.—Nothing in subparagraph (A) shall be construed to—

''(i) prohibit an individual, solely on the basis of affiliation with the issuer, from serving as an independent medical reviewer if—

''(I) a non-affiliated individual is not reasonably available;

''(II) the affiliated individual is not involved in the provision of items or services in the case under review;

''(III) the fact of such an affiliation is disclosed to the issuer and the enrollee (or authorized representative) and neither party objects; and

''(IV) the affiliated individual is not an employee of the issuer and does not provide services exclusively or primarily to or on behalf of the issuer;

''(ii) prohibit an individual who has staff privileges at the institution where the treatment involved takes place from serving as an independent medical reviewer merely on the basis of such affiliation if the affiliation is disclosed to the issuer and the enrollee (or authorized representative), and neither party objects; or

''(iii) prohibit receipt of compensation by an independent medical reviewer from an entity if the compensation is provided consistent with paragraph (6).

''(4) PRACTICING HEALTH CARE PROFESSIONAL IN SAME FIELD.—

''(A) IN GENERAL.—In a case involving treatment, or the provision of items or services—

''(i) by a physician, a reviewer shall be a practicing physician (allopathic or osteopathic) of the same or similar specialty, as a physician who, acting within the appropriate scope of practice within the State in which the service is provided or rendered, typically treats the condition, makes the diagnosis, or provides the type of treatment under review; or

''(ii) by a non-physician health care professional, the reviewer, or at least 1 member of the review panel, shall be a practicing non-physician health care professional of the same or similar specialty as the non-physician health care professional who, acting within the appropriate scope of practice within the State in which the service is provided or rendered, typically treats the condition, makes the diagnosis, or provides the type of treatment under review.

''(B) PRACTICING DEFINED.—For purposes of this paragraph, the term 'practicing' means, with respect to an individual who is a physician or other health care professional, that the individual provides health care services to individual patients on average at least 2 days per week.

''(5) PEDIATRIC EXPERTISE.—In the case of an external review relating to a child, a reviewer shall have expertise under paragraph (2) in pediatrics.

''(6) LIMITATIONS ON REVIEWER COMPENSATION.—Compensation provided by the issuer to an independent medical reviewer in connection with a review under this section shall—

''(A) not exceed a reasonable level; and

''(B) not be contingent on the decision rendered by the reviewer.

''(7) RELATED PARTY DEFINED.—For purposes of this section, the term 'related party' means, with respect to a denial of a claim under a coverage relating to an enrollee, any of the following:

''(A) The issuer involved, or any fiduciary, officer, director, or employee of the issuer.

''(B) The enrollee (or authorized representative).

''(C) The health care professional that provides the items or services involved in the denial.

''(D) The institution at which the items or services (or treatment) involved in the denial are provided.

''(E) The manufacturer of any drug or other item that is included in the items or services involved in the denial.

''(F) Any other party determined under any regulations to have a substantial interest in the denial involved.

''(8) DEFINITIONS.—For purposes of this subsection:

''(A) ENROLLEE.—The term 'enrollee' means, with respect to health insurance coverage offered by a health insurance issuer, an individual enrolled with the issuer to receive such coverage.

''(B) HEALTH CARE PROFESSIONAL.—The term 'health care professional' means an individual who is licensed, accredited, or certified under State law to provide specified health care services and who is operating within the scope of such licensure, accreditation, or certification.

''SEC. 2799. ENFORCEMENT.

''(a) IN GENERAL.—Subject to subsection (b), with respect to specific individual health insurance coverage the primary State for such coverage has sole jurisdiction to enforce the primary State's covered laws in the primary State and any secondary State.

''(b) SECONDARY STATE'S AUTHORITY.—Nothing in subsection (a) shall be construed to affect the authority of a secondary State to enforce its laws as set forth in the exception specified in section 2796(b)(1).

''(c) COURT INTERPRETATION.—In reviewing action initiated by the applicable secondary State authority, the court of competent jurisdiction shall apply the covered laws of the primary State.

''(d) NOTICE OF COMPLIANCE FAILURE.—In the case of individual health insurance coverage offered in a secondary State that fails to comply with the covered laws of the primary State, the applicable State authority of the secondary State may notify the applicable State authority of the primary State.''.

(b) EFFECTIVE DATE.—The amendment made by subsection (a) shall apply to individual health insurance coverage offered, issued, or sold after the date that is one year after the date of the enactment of this Act.

(c) GAO ONGOING STUDY AND REPORTS.—

(1) STUDY.—The Comptroller General of the United States shall conduct an ongoing study concerning the effect of the amendment made by subsection (a) on—

(A) the number of uninsured and under-insured;

(B) the availability and cost of health insurance policies for individuals with pre-existing medical conditions;

(C) the availability and cost of health insurance policies generally;

(D) the elimination or reduction of different types of benefits under health insurance policies offered in different States; and

(E) cases of fraud or abuse relating to health insurance coverage offered under such amendment and the resolution of such cases.

(2) ANNUAL REPORTS.—The Comptroller General shall submit to Congress an annual report, after the end of each of the 5 years following the effective date of the amendment made by subsection (a), on the ongoing study conducted under paragraph (1).

SEC. __05. SEVERABILITY.

If any provision of this title or the application of such provision to any person or circumstance is held to be unconstitutional, the remainder of this title and the application of the provisions of such to any other person or circumstance shall not be affected.

SA 43. Mr. DEMINT submitted an amendment intended to be proposed to amendment SA 39 proposed by Mr. REID (for Mr. BAUCUS) to the bill H.R. 2, to amend title XXI of the Social Security Act to extend and improve the Children's Health Insurance Program, and for other purposes; as follows:

At the appropriate place, add the following:

SEC. ___. REQUIRED COST-SHARING FOR HIGHER INCOME INDIVIDUALS.

Section 2103(e) (42 U.S.C. 1397cc(e)) is amended—

(1) in paragraph (3)(B), by striking ''and (2)'' and inserting '', (2), and (5)'';

(2) in paragraph (4), by striking ''Nothing'' and inserting ''Except as provided in paragraph (5), nothing''; and

(3) by adding at the end the following new paragraph:

''(5) REQUIRED COST-SHARING FOR HIGHER INCOME INDIVIDUALS.—Subject to paragraphs (1)(B) and (2), a State child health plan shall impose premiums, deductibles, coinsurance, and other cost-sharing (regardless of whether such plan is implemented under this title, title XIX, or both) for any targeted low-income child or other individual enrolled in the plan whose family income exceeds 200 percent of the poverty line in a manner that is consistent with the authority and limitations for imposing cost-sharing under section 1916A.''.

SA 44. Mr. DEMINT (for himself and Mr. VITTER) submitted an amendment intended to be proposed by him to the bill H.R. 2, to amend title XXI of the Social Security Act to extend and improve the Children's Health Insurance Program, and for other purposes; which was ordered to lie on the table; as follows:

At the appropriate place, insert the following:

SEC. —. PROHIBITION ON CONSIDERATION OF REVENUE PROVISIONS WITHOUT CERTIFICATION OF TAX BURDEN EFFECTS.

(a) IN GENERAL.—It shall not be in order to consider a bill, resolution, amendment, or conference report that proposes any provision amending the Internal Revenue Code of 1986 or affecting the application of such Code unless the Joint Committee on Taxation provides a written certification that such provision does not increase the net yearly tax burden for any family whose taxable income for any taxable year to which such provision applies is less than $250,000.

(b) SUPERMAJORITY WAIVER AND APPEAL.—

(1) WAIVER.—A point of order raised under subsection (a) may be waived or suspended in the Senate only by an affirmative vote of two-thirds of the Members, duly chosen and sworn.

(2) APPEAL.—An affirmative vote of two-thirds of the Members of the Senate, duly chosen and sworn, shall be required in the Senate to sustain an appeal of the ruling of the Chair on a point of order raised under subsection (a).

(c) DEFINITION.—For purposes of this section, the term ''family'' means a married couple filing jointly or an individual filing as a head of household.

SA 45. Mr. HATCH (for himself, Mr. GRASSLEY, and Mr. WICKER) proposed an amendment to amendment SA 39 proposed by Mr. REID (for Mr. BAUCUS) to the bill H.R. 2, to amend title XXI of the Social Security Act to extend and improve the Children's Health Insurance Program, and for other purposes; as follows:

On page 136, between lines 15 and 16, insert the following:

(c) CONDITION FOR FEDERAL MATCHING PAYMENTS.—

(1) IN GENERAL.—Section 1903(i) (42 U.S.C. 1396b(i)) is amended—

(A) in paragraph (23), by striking ''or'' after the semicolon;

(B) in paragraph (24)(C), by striking the period and inserting ''; or''; and

(C) by inserting after paragraph (24)(C), the following:

''(25) with respect to amounts expended for medical assistance for an immigrant child or pregnant woman under an election made pursuant to paragraph (4) of subsection (v) for any fiscal year quarter occurring before the first fiscal year quarter for which the State demonstrates to the Secretary (on the basis of the best data reasonably available to the Secretary and in accordance with such techniques for sampling and estimating as the Secretary determines appropriate) that the State has enrolled in the State plan under this title, the State child health plan under title XXI, or under a waiver of either such plan, at least 95 percent of the children who reside in the State, whose family income (as determined without regard to the application of any general exclusion or disregard of a block of income that is not determined by type of expense or type of income (regardless of whether such an exclusion or disregard is

permitted under section 1902(r))) does not exceed 200 percent of the poverty line (as defined in section 2110(c)(5)), and who are eligible for medical assistance under the State plan under this title or child health assistance or health benefits coverage under the State child health plan under title XXI.''.

(2) APPLICATION TO CHIP.—Section 2107(e)(1)(E) (42 U.S.C. 1397gg(e)(1)(E)) (as amended by section 503(a)(1)) is amended by striking ''and (17)'' and inserting ''(17), and (25)''.

SA 46. Mr. KYL submitted an amendment intended to be proposed by him to the bill H.R. 2, to amend title XXI of the Social Security Act to extend and improve the Children's Health Insurance Program, and for other purposes; which was ordered to lie on the table; as follows:

On page 76, after line 23, add the following:

SEC. 116. PREVENTING SUBSTITUTION OF CHIP COVERAGE FOR PRIVATE COVERAGE.

(a) FINDINGS.—

(1) Congress agrees with the President that low-income children should be the first priority of all States in providing child health assistance under CHIP.

(2) Congress agrees with the President and the Congressional Budget Office that the substitution of CHIP coverage for private coverage occurs more frequently for children in families at higher income levels.

(3) Congress agrees with the President that it is appropriate that States that expand CHIP eligibility to children at higher income levels should have achieved a high level of health benefits coverage for low-income children and should implement strategies to address such substitution.

(4) Congress concludes that the policies specified in this section (and the amendments made by this section) are the appropriate policies to address these issues.

(b) ANALYSES OF BEST PRACTICES AND METHODOLOGY IN ADDRESSING CROWD-OUT.—

(1) GAO REPORT.—Not later than 18 months after the date of the enactment of this Act, the Comptroller General of the United States shall submit to the Committee on Finance of the Senate and the Committee on Energy and Commerce of the House of Representatives and the Secretary a report describing the best practices by States in addressing the issue of CHIP crowd-out. Such report shall include analyses of—

(A) the impact of different geographic areas, including urban and rural areas, on CHIP crowd-out;

(B) the impact of different State labor markets on CHIP crowd-out;

(C) the impact of different strategies for addressing CHIP crowd-out;

(D) the incidence of crowd-out for children with different levels of family income; and

(E) the relationship (if any) between changes in the availability and affordability of dependent coverage under employer-sponsored health insurance and CHIP crowd-out.

(2) IOM REPORT ON METHODOLOGY.—The Secretary shall enter into an arrangement with the Institute of Medicine under which the Institute submits to the Committee on Finance of the Senate and the Committee on Energy and Commerce of the House of Representatives and the Secretary, not later than 18 months after the date of the enactment of this Act, a report on—

(A) the most accurate, reliable, and timely way to measure—

(i) on a State-by-State basis, the rate of public and private health benefits coverage among low-income children with family income that does not exceed 200 percent of the poverty line; and

(ii) CHIP crowd-out, including in the case of children with family income that exceeds 200 percent of the poverty line; and

(B) the least burdensome way to gather the necessary data to conduct the measurements described in subparagraph (A).

Out of any money in the Treasury not otherwise appropriated, there are hereby appropriated $2,000,000 to carry out this paragraph for the period ending September 30, 2010.

(3) INCORPORATION OF DEFINITIONS.—In this section, the terms ''CHIP crowd-out'', ''children'', ''poverty line'', and ''State'' have the meanings given such terms for purposes of CHIP.

(4) DEFINITION OF CHIP CROWD-OUT.—Section 2110(c) (42 U.S.C. 1397jj(c)) is amended by adding at the end the following:

''(9) CHIP CROWD-OUT.—The term 'CHIP crowd-out' means the substitution of—

''(A) health benefits coverage for a child under this title, for

''(B) health benefits coverage for the child other than under this title or title XIX.''.

(c) DEVELOPMENT OF BEST PRACTICE RECOMMENDATIONS.—Section 2107 (42 U.S.C. 1397gg) is amended by adding at the end the following:

''(g) DEVELOPMENT OF BEST PRACTICE RECOMMENDATIONS.—Within 6 months after the date of receipt of the reports under subsections (a) and (b) of section 116 of the Children's Health Insurance Program Reauthorization Act of 2009, the Secretary, in consultation with States, including Medicaid and CHIP directors in States, shall publish in the Federal Register, and post on the public website for the Department of Health and Human Services—

''(1) recommendations regarding best practices for States to use to address CHIP crowd-out; and

''(2) uniform standards for data collection by States to measure and report—

''(A) health benefits coverage for children with family income below 200 percent of the poverty line; and

''(B) on CHIP crowd-out, including for children with family income that exceeds 200 percent of the poverty line.

The Secretary, in consultation with States, including Medicaid and CHIP directors in States, may from time to time update the best practice recommendations and uniform standards set published under paragraphs (1) and (2) and shall provide for publication and posting of such updated recommendations and standards.''.

(d) REQUIREMENT TO ADDRESS CHIP CROWD-OUT; SECRETARIAL REVIEW.—Section 2106 (42 U.S.C. 1397ff) is amended by adding at the end the following:

''(f) REQUIREMENT TO ADDRESS CHIP CROWD-OUT; SECRETARIAL REVIEW.—

''(1) IN GENERAL.—Not later than 6 months after the best practice application date described in paragraph (2), each State that has a State child health plan shall submit to the Secretary a State plan amendment describing how the State—

''(A) will address CHIP crowd-out; and

''(B) will incorporate recommended best practices referred to in such paragraph.

''(2) BEST PRACTICE APPLICATION DATE.—The best practice application date described in this paragraph is the date that is 6 months after the date of publication of recommendations regarding best practices under section 2107(g)(1).

''(3) SECRETARIAL REVIEW.—The Secretary shall—

''(A) review each State plan amendment submitted under paragraph (1);

''(B) determine whether the amendment incorporates recommended best practices referred to in paragraph (2);

''(C) in the case of a higher income eligibility State (as defined in section 2105(c)(9)(B)), determine whether the State meets the enrollment targets required under reference section 2105(c)(9)(C); and

''(D) notify the State of such determinations.''.

(e) LIMITATION ON PAYMENTS FOR STATES COVERING HIGHER INCOME CHILDREN.—

(1) IN GENERAL.—Section 2105(c) (42 U.S.C. 1397ee(c)), as amended by section 114(a), is amended by adding at the end the following new paragraph:

''(9) LIMITATION ON PAYMENTS FOR STATES COVERING HIGHER INCOME CHILDREN.—

''(A) DETERMINATIONS.—

''(i) IN GENERAL.—The Secretary shall determine, for each State that is a higher income eligibility State as of April 1 of 2011 and each subsequent year, whether the State meets the target rate of coverage of low-income children required under subparagraph (C) and shall notify the State in that month of such determination.

''(ii) DETERMINATION OF FAILURE.—If the Secretary determines in such month that a higher income eligibility State does not meet such target rate of coverage, subject to subparagraph (E), no payment shall be made as of October 1 of such year on or after October 1, 2011, under this section for child health assistance provided for higher-income children (as defined in subparagraph (D)) under the State child health plan unless and until the State establishes it is in compliance with such requirement.

''(B) HIGHER INCOME ELIGIBILITY STATE.—A higher income eligibility State described in this clause is a State that—

''(i) applies under its State child health plan an eligibility income standard for targeted low-income children that exceeds 300 percent of the poverty line; or

''(ii) because of the application of a general exclusion of a block of income that is not determined by type of expense or type of income, applies an effective income standard under the State child health plan for such children that exceeds 300 percent of the poverty line.

''(C) REQUIREMENT FOR TARGET RATE OF COVERAGE OF LOW-INCOME CHILDREN.—

''(i) IN GENERAL.—The requirement of this subparagraph for a State is that the rate of health benefits coverage (both private and public) for low-income children in the State is not statistically significantly (at a p=0.05 level) less than the target rate of coverage specified in clause (ii).

''(ii) TARGET RATE.—The target rate of coverage specified in this clause is the average rate (determined by the Secretary) of health benefits coverage (both private and public) as of January 1, 2011, among the 10 of the 50 States and the District of Columbia with the highest percentage of health benefits coverage (both private and public) for low-income children.

''(iii) STANDARDS FOR DATA.—In applying this subparagraph, rates of health benefits coverage for States shall be determined using the uniform standards identified by the Secretary under section 2107(g)(2).

''(D) HIGHER-INCOME CHILD.—For purposes of this paragraph, the term 'higher income child' means, with respect to a State child health plan, a targeted low-income child whose family income—

''(i) exceeds 300 percent of the poverty line; or

''(ii) would exceed 300 percent of the poverty line if there were not taken into account any general exclusion described in subparagraph (B)(ii).

''(E) NOTICE AND OPPORTUNITY TO COMPLY WITH TARGET RATE.—If the Secretary makes a determination described in subparagraph (A)(ii) in April of a year, the Secretary—

''(i) shall provide the State with the opportunity to submit and implement a corrective

action plan for the State to come into compliance with the requirement of subparagraph (C) before October 1 of such year;

''(ii) shall not effect a denial of payment under subparagraph (A) on the basis of such determination before October 1 of such year; and

''(iii) shall not effect such a denial if the Secretary determines that there is a reasonable likelihood that the implementation of such a correction action plan will bring the State into compliance with the requirement of subparagraph (C).''.

(2) CONSTRUCTION.—Nothing in the amendment made by paragraph (1) or this section this shall be construed as authorizing the Secretary to limit payments under title XXI of the Social Security Act in the case of a State that is not a higher income eligibility State (as defined in section 2105(c)(9)(B) of such Act, as added by paragraph (1)).

(f) TREATMENT OF MEDICAL SUPPORT ORDERS.—Section 2102(b) (42 U.S.C. 1397bb(c)) is amended by adding at the end the following:

''(5) TREATMENT OF MEDICAL SUPPORT ORDERS.—

''(A) IN GENERAL.—Nothing in this title shall be construed to allow the Secretary to require that a State deny eligibility for child health assistance to a child who is otherwise eligible on the basis of the existence of a valid medical support order being in effect.

''(B) STATE ELECTION.—A State may elect to limit eligibility for child health assistance to a targeted low-income child on the basis of the existence of a valid medical support order on the child's behalf, but only if the State does not deny such eligibility for a child on such basis if the child asserts that the order is not being complied with for any of the reasons described in subparagraph (C) unless the State demonstrates that none of such reasons applies in the case involved.

''(C) REASONS FOR NONCOMPLIANCE.—The reasons described in this subparagraph for noncompliance with a medical support order with respect to a child are that the child is not being provided health benefits coverage pursuant to such order because—

''(i) of failure of the noncustodial parent to comply with the order;

''(ii) of the failure of an employer, group health plan or health insurance issuer to comply with such order; or

''(iii) the child resides in a geographic area in which benefits under the health benefits coverage are generally unavailable.''.

(g) EFFECTIVE DATE OF AMENDMENTS; CONSISTENCY OF POLICIES.—The amendments made by this section shall take effect as if enacted on August 16, 2007. The Secretary may not impose (or continue in effect) any requirement, prevent the implementation of any provision, or condition the approval of any provision under any State child health plan, State plan amendment, or waiver request on the basis of any policy or interpretation relating to CHIP crowd-out, coordination with other sources of coverage, target rate of coverage, or medical support order other than under the amendments made by this section. In the case of a State plan amendment which was denied on or after August 16, 2007, on the basis of any such policy or interpretation in effect before the date of the enactment of this Act, if the State submits a modification of such State plan amendment that complies with title XXI of the Social Security Act as amended by this Act, such submitted State plan amendment, as so modified, shall be considered as if it had been submitted (as so modified) as of the date of its original submission, but such State plan amendment shall not be effective before the date of the enactment of this Act.

SA 47. Mr. COBURN (for himself and Mr. THUNE) submitted an amendment intended to be proposed by him to the bill H.R. 2, to amend title XXI of the Social Security Act to extend and improve the Children's Health Insurance Program, and for other purposes; which was ordered to lie on the table; as follows:

On page 153, between lines 3 and 4, insert the following:

(c) REQUIRED OFFERING OF PREMIUM ASSISTANCE FOR COVERAGE OF CHILDREN THROUGH PRIVATE PLANS UNDER SCHIP AND MEDICAID IF THE STATE EXPANDS THEIR PROGRAM BEYOND CURRENT ELIGIBILITY LEVELS.—

(1) IN GENERAL.—Section 2105(c) (42 U.S.C. 1397ee(c)), as amended by section 601, is amended by adding at the end the following:

''(12) REQUIRED OFFERING OF PREMIUM ASSISTANCE.—

''(A) IN GENERAL.—Notwithstanding any other provision of this title, the child health assistance provided to any child whose family income exceeds the income eligibility level in effect under the State children's plan as of January 1, 2009, shall consist of a State premium assistance subsidy (as defined in subparagraph (C)) for qualified coverage (as defined in subparagraph (B)) in accordance with the requirements of this paragraph.

''(B) QUALIFIED COVERAGE.—In this paragraph, the term 'qualified coverage' means the following:

''(i) QUALIFIED EMPLOYER SPONSORED COVERAGE.—

''(I) IN GENERAL.—A group health plan or health insurance coverage offered through an employer that is—

''(aa) substantially equivalent to the benefits coverage in a benchmark benefit package described in section 2103(b) or benchmark-equivalent coverage that meets the requirements of section 2103(a)(2);

''(bb) made similarly available to all of the employer's employees and for which the employer makes a contribution to the premium that is not less for employees receiving a premium assistance subsidy under any option available under the State child health plan under this title or the State plan under title XIX to provide such assistance than the employer contribution provided for all other employees; and

''(cc) cost-effective, as determined under subclause (II).

''(II) COST-EFFECTIVENESS.—A group health plan or health insurance coverage offered through an employer shall be considered to be cost-effective if—

''(aa) the marginal premium cost to purchase family coverage through the employer is less than the State cost of providing child health assistance through the State child health plan for all the children in the family who are targeted low-income children; or

''(bb) the marginal premium cost between individual coverage and purchasing family coverage through the employer is not greater than 175 percent of the cost to the State to provide child health assistance through the State child health plan for a targeted low-income child.

''(ii) QUALIFIED NON-GROUP COVERAGE.—Health insurance coverage offered to individuals in the non-group health insurance market that is substantially equivalent to the benefits coverage in a benchmark benefit package described in section 2103(b) or benchmark-equivalent coverage that meets the requirements of section 2103(a)(2).

''(iii) HIGH DEDUCTIBLE HEALTH PLAN.—A high deductible health plan (as defined in section 223(c)(2) of the Internal Revenue Code of 1986) purchased through a health savings account (as defined under section 223(d) of such Code).

''(C) PREMIUM ASSISTANCE SUBSIDY.—

''(i) IN GENERAL.—In this paragraph, the term 'premium assistance subsidy' means, with respect to a targeted low-income child, the amount equal to the difference between the employee contribution required for enrollment only of the employee under qualified employer sponsored coverage and the employee contribution required for enrollment of the employee and the child in such coverage, less any applicable premium cost-sharing applied under the State child health plan, subject to the annual aggregate cost-sharing limit applied under section 2103(e)(3)(B).

''(ii) STATE PAYMENT OPTION.—Subject to clause (iii), a State may provide a premium assistance subsidy directly to an employer or as reimbursement to an employee for out-of-pocket expenditures.

''(iii) REQUIREMENT FOR DIRECT PAYMENT TO EMPLOYEE.—A State shall not pay a premium assistance subsidy directly to the employee, unless the State has established procedures to ensure that the targeted low-income child on whose behalf such payments are made are actually enrolled in the qualified employer sponsored coverage.

''(iv) TREATMENT AS CHILD HEALTH ASSISTANCE.—Expenditures for the provision of premium assistance subsidies shall be considered child health assistance described in paragraph (1)(C) of subsection (a) for purposes of making payments under that subsection.

''(v) STATE OPTION TO REQUIRE ACCEPTANCE OF SUBSIDY.—A State may condition the provision of child health assistance under the State child health plan for a targeted low-income child on the receipt of a premium assistance subsidy for enrollment in qualified employer sponsored coverage if the State determines the provision of such a subsidy to be more cost-effective in accordance with subparagraph (B)(ii).

''(vi) NOT TREATED AS INCOME.—Notwithstanding any other provision of law, a premium assistance subsidy provided in accordance with this paragraph shall not be treated as income to the child or the parent of the child for whom such subsidy is provided.

''(D) NO REQUIREMENT TO PROVIDE SUPPLEMENTAL COVERAGE FOR BENEFITS AND ADDITIONAL COST-SHARING PROTECTION PROVIDED UNDER THE STATE CHILD HEALTH PLAN.—

''(i) IN GENERAL.—A State that elects the option to provide a premium assistance subsidy under this paragraph shall not be required to provide a targeted low-income child enrolled in qualified employer sponsored coverage with supplemental coverage for items or services that are not covered, or are only partially covered, under the qualified employer sponsored coverage or cost-sharing protection other than the protection required under section 2103(e)(3)(B).

''(ii) NOTICE OF COST-SHARING REQUIREMENTS.—A State shall provide a targeted low-income child or the parent of such a child (as appropriate) who is provided with a premium assistance subsidy in accordance with this paragraph with notice of the cost-sharing requirements and limitations imposed under the qualified employer sponsored coverage in which the child is enrolled upon the enrollment of the child in such coverage and annually thereafter.

''(iii) RECORD KEEPING REQUIREMENTS.—A State may require a parent of a targeted low-income child that is enrolled in qualified employer-sponsored coverage to bear the responsibility for keeping track of out-of-pocket expenditures incurred for cost-sharing imposed under such coverage and to notify the State when the limit on such expenditures imposed under section 2103(e)(3)(B) has been reached for a year from the effective date of enrollment for such year.

''(iv) STATE OPTION FOR REIMBURSEMENT.—A State may retroactively reimburse a parent of a targeted low-income child for out-of-pocket expenditures incurred after reaching the 5 percent cost-sharing limitation imposed under section 2103(e)(3)(B) for a year.

''(E) 6-MONTH WAITING PERIOD REQUIRED.—A State shall impose at least a 6-month waiting period from the time an individual is enrolled in private health insurance prior to the provision of a premium assistance subsidy for a targeted low-income child in accordance with this paragraph.

''(F) NON APPLICATION OF WAITING PERIOD FOR ENROLLMENT IN THE STATE MEDICAID PLAN OR THE STATE CHILD HEALTH PLAN.—A targeted low-income child provided a premium assistance subsidy in accordance with this paragraph who loses eligibility for such subsidy shall not be treated as having been enrolled in private health insurance coverage for purposes of applying any waiting period imposed under the State child health plan or the State plan under title XIX for the enrollment of the child under such plan.

''(G) ASSURANCE OF SPECIAL ENROLLMENT PERIOD UNDER GROUP HEALTH PLANS IN CASE OF ELIGIBILITY FOR PREMIUM SUBSIDY ASSISTANCE.—No payment shall be made under subsection (a) for amounts expended for the provision of premium assistance subsidies under this paragraph unless a State provides assurances to the Secretary that the State has in effect laws requiring a group health plan, a health insurance issuer offering group health insurance coverage in connection with a group health plan, and a self-funded health plan, to permit an employee who is eligible, but not enrolled, for coverage under the terms of the plan (or a child of such an employee if the child is eligible, but not enrolled, for coverage under such terms) to enroll for coverage under the terms of the plan if the employee's child becomes eligible for a premium assistance subsidy under this paragraph.

''(H) NO EFFECT ON PREVIOUSLY APPROVED PREMIUM ASSISTANCE PROGRAMS.—Nothing in this paragraph shall be construed as limiting the authority of a State to offer premium assistance under section 1906, a waiver described in paragraph (2)(B) or (3), a waiver approved under section 1115, or other authority in effect on February 1, 2009.

''(I) NOTICE OF AVAILABILITY.—A State shall—

''(i) include on any application or enrollment form for child health assistance a notice of the availability of premium assistance subsidies for the enrollment of targeted low-income children in qualified employer sponsored coverage;

''(ii) provide, as part of the application and enrollment process under the State child health plan, information describing the availability of such subsidies and how to elect to obtain such a subsidy; and

''(iii) establish such other procedures as the State determines necessary to ensure that parents are informed of the availability of such subsidies under the State child health plan.''.

(2) APPLICATION TO MEDICAID.—Section 1906 (42 U.S.C. 1396e) is amended by inserting after subsection (c) the following:

''(d) The provisions of section 2105(c)(12) shall apply to a child who is eligible for medical assistance under the State plan in the same manner as such provisions apply to a targeted low-income child under a State child health plan under title XXI. Section 1902(a)(34) shall not apply to a child who is provided a premium assistance subsidy under the State plan in accordance with the preceding sentence.''.

SA 48. Mr. COBURN submitted an amendment intended to be proposed by him to the bill H.R. 2, to amend title XXI of the Social Security Act to extend and improve the Children's Health Insurance Program, and for other purposes; which was ordered to lie on the table; as follows:

At the appropriate place, insert the following:

SEC. ____. COMPLIANCE WITH STATE PARENTAL NOTIFICATION AND CONSENT LAWS.

Notwithstanding any other provision of law, no Federal funds shall be made available under this Act (or an amendment made by this Act) to a health care provider to reimburse such provider for services provided to a minor unless such provider complies with all applicable parental notification and consent laws of the State of residence of the minor.

SA 49. Mr. COBURN submitted an amendment intended to be proposed by him to the bill H.R. 2, to amend title XXI of the Social Security Act to extend and improve the Children's Health Insurance Program, and for other purposes; which was ordered to lie on the table; as follows:

Strike section 602 and insert the following:

SEC. 602. LIMITATION ON EXPANSION.

Section 2105(c)(8) (42 U.S.C. 1397ee(c)(8)), as added by section 114(a), is amended by adding at the end the following:

''(C) REQUIREMENT.—Notwithstanding subparagraphs (A) and (B), on or after the date of enactment of this subparagraph, the Secretary may not approve a State plan amendment or waiver for child health assistance or health benefits to children whose family income exceeds 300 percent of the poverty line unless the improper payment rate for Medicaid and CHIP (as measured by the payment error rate measurement (PERM)) is equal to or is less than 3.5 percent.''.

SA 50. Mr. COBURN submitted an amendment intended to be proposed by him to the bill H.R. 2, to amend title XXI of the Social Security Act to extend and improve the Children's Health Insurance Program, and for other purposes; which was ordered to lie on the table; as follows:

At the end of section 601, add the following:

(g) TIME FOR PROMULGATION OF FINAL RULE.—The final rule implementing the PERM requirements under subsection (b) shall be promulgated not later than 6 months after the date of enactment of this Act.

SA 51. Mr. GRASSLEY submitted an amendment intended to be proposed by him to the bill H.R. 2, to amend title XXI of the Social Security Act to extend and improve the Children's Health Insurance Program, and for other purposes; which was ordered to lie on the table; as follows:

On page 93, between lines 16 and 17, insert the following:

''(VI) ATTESTATION.—The State requires that an application for medical assistance under this title or for child health assistance under title XXI shall not be complete until the parent or guardian of the child for whose eligibility the State is relying on a finding from an Express Lane agency attests under penalty of perjury that the information provided to verify the citizenship or nationality of the child is accurate, to the best of the parent's or guardian's knowledge.

SA 52. Mr. GRASSLEY submitted an amendment intended to be proposed by him to the bill H.R. 2, to amend title XXI of the Social Security Act to extend and improve the Children's Health Insurance Program, and for other purposes; which was ordered to lie on the table; as follows:

On page 130, between lines 7 and 8, insert the following:

(d) GAO STUDY AND REPORT.—The Comptroller General or the United States shall study and report to Congress on the extent to which States use the option to provide presumptive eligibility for medical assistance under Medicaid or child health assistance under CHIP to avoid complying with the verification of citizenship or nationality documentation requirements of section 1903(x) of the Social Security Act or any other eligibility requirements for receipt of medical assistance or child health assistance.

SA 53. Mr. GRASSLEY submitted an amendment intended to be proposed by him to the bill H.R. 2, to amend title XXI of the Social Security Act to extend and improve the Children's Health Insurance Program, and for other purposes; which was ordered to lie on the table; as follows:

On page 93, between lines 16 and 17, insert the following:

''(VI) NOTICE AND AFFIRMATIVE CONSENT.—The State requires an Express Lane Agency to provide affirmative notice and obtain consent in the form of a signature from all potential enrollees in the State plan under this title or title XXI (or the parent or guardian of a potential enrollee, in the case of a child under age 18) that the information gathered for purposes of applying for a specific program administered by the Express Lane Agency may also be used for purposes of determining one or more components of eligibility for medical assistance under this title or for child health assistance under title XXI.

SA 54. Mr. GRASSLEY submitted an amendment intended to be proposed by him to the bill H.R. 2, to amend title XXI of the Social Security Act to extend and improve the Children's Health Insurance Program, and for other purposes; which was ordered to lie on the table; as follows:

On page 93, lines 12 and 13, strike ''1902(a)(46)(B) or 2105(c)(9), as applicable'' and insert ''1903(x)''.

SA 55. Mr. GRASSLEY submitted an amendment intended to be proposed by him to the bill H.R. 2, to amend title XXI of the Social Security Act to extend and improve the Children's Health Insurance Program, and for other purposes; which was ordered to lie on the table; as follows:

Beginning on page 121, strike line 20, and all that follows through page 122, line 20, and insert the following:

''(B) Payments under the State plan for providing medical assistance to individuals who provided inconsistent information and were provided with a reasonable period of time to resolve the inconsistency under this subsection or under section 1903(x)(4) shall be included in the determination of the State's erroneous excess payments for medical assistance ratio under section 1903(u).

SA 56. Mr. GRASSLEY submitted an amendment intended to be proposed by

him to the bill H.R. 2, to amend title XXI of the Social Security Act to extend and improve the Children's Health Insurance Program, and for other purposes; which was ordered to lie on the table; as follows:

On page 135, strike lines 14 through 20, and insert the following:

''(B) In the case of a State that has elected to provide medical assistance to a category of individuals under subparagraph (A), the Secretary may impose a debt under an affidavit of support against any sponsor of such an individual on the basis of the provision of medical assistance to such individual, consisting of all or a portion of the cost of providing such assistance, which may include a reasonable fee, and which shall be considered as an unreimbursed cost, subject to such limit on the total amount of debt as the Secretary may establish.

SA 57. Mr. GRASSLEY submitted an amendment intended to be proposed by him to the bill H.R. 2, to amend title XXI of the Social Security Act to extend and improve the Children's Health Insurance Program, and for other purposes; which was ordered to lie on the table; as follows:

Strike section 601.

SA 58. Mr. WEBB (for himself, Mrs. HAGAN, and Mr. SANDERS) submitted an amendment intended to be proposed by him to the bill H.R. 2, to amend title XXI of the Social Security Act to extend and improve the Children's Health Insurance Program, and for other purposes; which was ordered to lie on the table; as follows:

Beginning on page 271, line 9, strike all through page 273, line 8, and insert the following:

SEC. 700. INCOME OF PARTNERS FOR PERFORMING INVESTMENT MANAGEMENT SERVICES TREATED AS ORDINARY INCOME RECEIVED FOR PERFORMANCE OF SERVICES.

(a) IN GENERAL.—Part I of subchapter K of chapter 1 of the Internal Revenue Code of 1986 is amended by adding at the end the following new section:

"SEC. 710. SPECIAL RULES FOR PARTNERS PROVIDING INVESTMENT MANAGEMENT SERVICES TO PARTNERSHIP.

''(a) TREATMENT OF DISTRIBUTIVE SHARE OF PARTNERSHIP ITEMS.—For purposes of this title, in the case of an investment services partnership interest—

''(1) IN GENERAL.—Notwithstanding section 702(b)—

''(A) any net income with respect to such interest for any partnership taxable year shall be treated as ordinary income for the performance of services, and

''(B) any net loss with respect to such interest for such year, to the extent not disallowed under paragraph (2) for such year, shall be treated as an ordinary loss.

All items of income, gain, deduction, and loss which are taken into account in computing net income or net loss shall be treated as ordinary income or ordinary loss (as the case may be).

''(2) TREATMENT OF LOSSES.—

''(A) LIMITATION.—Any net loss with respect to such interest shall be allowed for any partnership taxable year only to the extent that such loss does not exceed the excess (if any) of—

''(i) the aggregate net income with respect to such interest for all prior partnership taxable years, over

''(ii) the aggregate net loss with respect to such interest not disallowed under this subparagraph for all prior partnership taxable years.

''(B) CARRYFORWARD.—Any net loss for any partnership taxable year which is not allowed by reason of subparagraph (A) shall be treated as an item of loss with respect to such partnership interest for the succeeding partnership taxable year.

''(C) BASIS ADJUSTMENT.—No adjustment to the basis of a partnership interest shall be made on account of any net loss which is not allowed by reason of subparagraph (A).

''(D) EXCEPTION FOR BASIS ATTRIBUTABLE TO PURCHASE OF A PARTNERSHIP INTEREST.—In the case of an investment services partnership interest acquired by purchase, paragraph (1)(B) shall not apply to so much of any net loss with respect to such interest for any taxable year as does not exceed the excess of—

''(i) the basis of such interest immediately after such purchase, over

''(ii) the aggregate net loss with respect to such interest to which paragraph (1)(B) did not apply by reason of this subparagraph for all prior taxable years.

Any net loss to which paragraph (1)(B) does not apply by reason of this subparagraph shall not be taken into account under subparagraph (A).

''(E) PRIOR PARTNERSHIP YEARS.—Any reference in this paragraph to prior partnership taxable years shall only include prior partnership taxable years to which this section applies.

''(3) NET INCOME AND LOSS.—For purposes of this section—

''(A) NET INCOME.—The term 'net income' means, with respect to any investment services partnership interest, for any partnership taxable year, the excess (if any) of—

''(i) all items of income and gain taken into account by the holder of such interest under section 702 with respect to such interest for such year, over

''(ii) all items of deduction and loss so taken into account.

''(B) NET LOSS.—The term 'net loss' means with respect to such interest for such year, the excess (if any) of the amount described in subparagraph (A)(ii) over the amount described in subparagraph (A)(i).

''(b) DISPOSITIONS OF PARTNERSHIP INTERESTS.—

''(1) GAIN.—Any gain on the disposition of an investment services partnership interest shall be treated as ordinary income for the performance of services.

''(2) LOSS.—Any loss on the disposition of an investment services partnership interest shall be treated as an ordinary loss to the extent of the excess (if any) of—

''(A) the aggregate net income with respect to such interest for all partnership taxable years, over

''(B) the aggregate net loss with respect to such interest allowed under subsection (a)(2) for all partnership taxable years.

''(3) DISPOSITION OF PORTION OF INTEREST.—In the case of any disposition of an investment services partnership interest, the amount of net loss which otherwise would have (but for subsection (a)(2)(C)) applied to reduce the basis of such interest shall be disregarded for purposes of this section for all succeeding partnership taxable years.

''(4) DISTRIBUTIONS OF PARTNERSHIP PROPERTY.—In the case of any distribution of property by a partnership with respect to any investment services partnership interest held by a partner—

''(A) the excess (if any) of—

''(i) the fair market value of such property at the time of such distribution, over

''(ii) the adjusted basis of such property in the hands of the partnership,

shall be taken into account as an increase in such partner's distributive share of the taxable income of the partnership (except to the extent such excess is otherwise taken into account in determining the taxable income of the partnership),

''(B) such property shall be treated for purposes of subpart B of part II as money distributed to such partner in an amount equal to such fair market value, and

''(C) the basis of such property in the hands of such partner shall be such fair market value.

Subsection (b) of section 734 shall be applied without regard to the preceding sentence.

''(5) APPLICATION OF SECTION 751.—In applying section 751(a), an investment services partnership interest shall be treated as an inventory item.

''(c) INVESTMENT SERVICES PARTNERSHIP INTEREST.—For purposes of this section—

''(1) IN GENERAL.—The term 'investment services partnership interest' means any interest in a partnership which is held by any person if such person provides (directly or indirectly) a substantial quantity of any of the following services with respect to the assets of the partnership in the conduct of the trade or business of providing such services:

''(A) Advising as to the advisability of investing in, purchasing, or selling any specified asset.

''(B) Managing, acquiring, or disposing of any specified asset.

''(C) Arranging financing with respect to acquiring specified assets.

''(D) Any activity in support of any service described in subparagraphs (A) through (C).

For purposes of this paragraph, the term 'specified asset' means securities (as defined in section 475(c)(2) without regard to the last sentence thereof), real estate, commodities (as defined in section 475(e)(2))), or options or derivative contracts with respect to securities (as so defined), real estate, or commodities (as so defined).

''(2) EXCEPTION FOR CERTAIN CAPITAL INTERESTS.—

''(A) IN GENERAL.—If—

''(i) a portion of an investment services partnership interest is acquired on account of a contribution of invested capital, and

''(ii) the partnership makes a reasonable allocation of partnership items between the portion of the distributive share that is with respect to invested capital and the portion of such distributive share that is not with respect to invested capital,

then subsection (a) shall not apply to the portion of the distributive share that is with respect to invested capital. An allocation will not be treated as reasonable for purposes of this subparagraph if such allocation would result in the partnership allocating a greater portion of income to invested capital than any other partner not providing services would have been allocated with respect to the same amount of invested capital.

''(B) SPECIAL RULE FOR DISPOSITIONS.—In any case to which subparagraph (A) applies, subsection (b) shall not apply to any gain or loss allocable to invested capital. The portion of any gain or loss attributable to invested capital is the proportion of such gain or loss which is based on the distributive share of gain or loss that would have been allocable to invested capital under subparagraph (A) if the partnership sold all of its assets immediately before the disposition.

''(C) INVESTED CAPITAL.—For purposes of this paragraph, the term 'invested capital' means, the fair market value at the time of contribution of any money or other property contributed to the partnership.

''(D) TREATMENT OF CERTAIN LOANS.—

''(i) PROCEEDS OF PARTNERSHIP LOANS NOT TREATED AS INVESTED CAPITAL OF SERVICE PROVIDING PARTNERS.—For purposes of this paragraph, an investment services partnership interest shall not be treated as acquired

on account of a contribution of invested capital to the extent that such capital is attributable to the proceeds of any loan or other advance made or guaranteed, directly or indirectly, by any partner or the partnership.

''(ii) LOANS FROM NONSERVICE PROVIDING PARTNERS TO THE PARTNERSHIP TREATED AS INVESTED CAPITAL.—For purposes of this paragraph, any loan or other advance to the partnership made or guaranteed, directly or indirectly, by a partner not providing services to the partnership shall be treated as invested capital of such partner and amounts of income and loss treated as allocable to invested capital shall be adjusted accordingly.

''(d) OTHER INCOME AND GAIN IN CONNECTION WITH INVESTMENT MANAGEMENT SERVICES.—

''(1) IN GENERAL.—If—

''(A) a person performs (directly or indirectly) investment management services for any entity,

''(B) such person holds a disqualified interest with respect to such entity, and

''(C) the value of such interest (or payments thereunder) is substantially related to the amount of income or gain (whether or not realized) from the assets with respect to which the investment management services are performed,

any income or gain with respect to such interest shall be treated as ordinary income for the performance of services. Rules similar to the rules of subsection (c)(2) shall apply where such interest was acquired on account of invested capital in such entity.

''(2) DEFINITIONS.—For purposes of this subsection—

''(A) DISQUALIFIED INTEREST.—The term 'disqualified interest' means, with respect to any entity—

''(i) any interest in such entity other than indebtedness,

''(ii) convertible or contingent debt of such entity,

''(iii) any option or other right to acquire property described in clause (i) or (ii), and

''(iv) any derivative instrument entered into (directly or indirectly) with such entity or any investor in such entity.

Such term shall not include a partnership interest and shall not include stock in a taxable corporation.

''(B) TAXABLE CORPORATION.—The term 'taxable corporation' means—

''(i) a domestic C corporation, or

''(ii) a foreign corporation subject to a comprehensive foreign income tax.

''(C) INVESTMENT MANAGEMENT SERVICES.—The term 'investment management services' means a substantial quantity of any of the services described in subsection (c)(1) which are provided in the conduct of the trade or business of providing such services.

''(D) COMPREHENSIVE FOREIGN INCOME TAX.—The term 'comprehensive foreign income tax' means, with respect to any foreign corporation, the income tax of a foreign country if—

''(i) such corporation is eligible for the benefits of a comprehensive income tax treaty between such foreign country and the United States, or

''(ii) such corporation demonstrates to the satisfaction of the Secretary that such foreign country has a comprehensive income tax.

''(e) REGULATIONS.—The Secretary shall prescribe such regulations as are necessary or appropriate to carry out the purposes of this section, including regulations to—

''(1) prevent the avoidance of the purposes of this section, and

''(2) coordinate this section with the other provisions of this subchapter.

''(f) CROSS REFERENCE.—For 40 percent no fault penalty on certain underpayments due to the avoidance of this section, see section 6662.''.

(b) APPLICATION TO REAL ESTATE INVESTMENT TRUSTS.—

(1) IN GENERAL.—Subsection (c) of section 856 of the Internal Revenue Code of 1986 is amended by adding at the end the following new paragraph:

''(9) EXCEPTION FROM RECHARACTERIZATION OF INCOME FROM INVESTMENT SERVICES PARTNERSHIP INTERESTS.—

''(A) IN GENERAL.—Paragraphs (2), (3), and (4) shall be applied without regard to section 710 (relating to special rules for partners providing investment management services to partnership).

''(B) SPECIAL RULE FOR PARTNERSHIPS OWNED BY REITS.—Section 7704 shall be applied without regard to section 710 in the case of a partnership which meets each of the following requirements:

''(i) Such partnership is treated as publicly traded under section 7704 solely by reason of interests in such partnership being convertible into interests in a real estate investment trust which is publicly traded.

''(ii) 50 percent or more of the capital and profits interests of such partnership are owned, directly or indirectly, at all times during the taxable year by such real estate investment trust (determined with the application of section 267(c)).

''(iii) Such partnership meets the requirements of paragraphs (2), (3), and (4) (applied without regard to section 710).''.

(2) CONFORMING AMENDMENT.—Paragraph (4) of section 7704(d) of such Code is amended by inserting ''(determined without regard to section 856(c)(8))'' after ''856(c)(2)''.

(c) IMPOSITION OF PENALTY ON UNDERPAYMENTS.—

(1) IN GENERAL.—Subsection (b) of section 6662 of the Internal Revenue Code of 1986 is amended by inserting after paragraph (5) the following new paragraph:

''(6) The application of subsection (d) of section 710 or the regulations prescribed under section 710(e) to prevent the avoidance of the purposes of section 710.''.

(2) AMOUNT OF PENALTY.—

(A) IN GENERAL.—Section 6662 of such Code is amended by adding at the end the following new subsection:

''(i) INCREASE IN PENALTY IN CASE OF PROPERTY TRANSFERRED FOR INVESTMENT MANAGEMENT SERVICES.—In the case of any portion of an underpayment to which this section applies by reason of subsection (b)(6), subsection (a) shall be applied with respect to such portion by substituting '40 percent' for '20 percent'.''.

(B) CONFORMING AMENDMENTS.—Subparagraph (B) of section 6662A(e)(2) of such Code is amended—

(i) by striking ''section 6662(h)'' and inserting ''subsection (h) or (i) of section 6662'', and

(ii) by striking ''GROSS VALUATION MISSTATEMENT PENALTY'' in the heading and inserting ''CERTAIN INCREASED UNDERPAYMENT PENALTIES''.

(3) REASONABLE CAUSE EXCEPTION NOT APPLICABLE.—Subsection (c) of section 6664 of such Code is amended—

(A) by redesignating paragraphs (2) and (3) as paragraphs (3) and (4), respectively,

(B) by striking ''paragraph (2)'' in paragraph (4), as so redesignated, and inserting ''paragraph (3)'', and

(C) by inserting after paragraph (1) the following new paragraph:

''(2) EXCEPTION.—Paragraph (1) shall not apply to any portion of an underpayment to which this section applies by reason of subsection (b)(6).''.

(d) CONFORMING AMENDMENTS.—

(1) Subsection (d) of section 731 of the Internal Revenue Code of 1986 is amended by inserting ''section 710(b)(4) (relating to distributions of partnership property),'' before ''section 736''.

(2) Section 741 of such Code is amended by inserting ''or section 710 (relating to special rules for partners providing investment management services to partnership)'' before the period at the end.

(3) Paragraph (13) of section 1402(a) of such Code is amended—

(A) by striking ''other than guaranteed'' and inserting ''other than—

''(A) guaranteed'',

(B) by striking the semicolon at the end and inserting '', and'', and

(C) by adding at the end the following new subparagraph:

''(B) any income treated as ordinary income under section 710 received by an individual who provides investment management services (as defined in section 710(d)(2));''.

(4) Paragraph (12) of section 211(a) of the Social Security Act is amended—

(A) by striking ''other than guaranteed'' and inserting ''other than—

''(A) guaranteed'',

(B) by striking the semicolon at the end and inserting '', and'', and

(C) by adding at the end the following new subparagraph:

''(B) any income treated as ordinary income under section 710 of the Internal Revenue Code of 1986 received by an individual who provides investment management services (as defined in section 710(d)(2) of such Code);''.

(5) The table of sections for part I of subchapter K of chapter 1 of such Code is amended by adding at the end the following new item:

''Sec. 710. Special rules for partners providing investment management services to partnership.''.

(e) EFFECTIVE DATE.—

(1) IN GENERAL.—Except as otherwise provided in this subsection, the amendments made by this section shall apply to taxable years ending after January 27, 2009.

(2) PARTNERSHIP TAXABLE YEARS WHICH INCLUDE EFFECTIVE DATE.—In applying section 710(a) of the Internal Revenue Code of 1986 (as added by this section) in the case of any partnership taxable year which includes January 27, 2009, the amount of the net income referred to in such section shall be treated as being the lesser of the net income for the entire partnership taxable year or the net income determined by only taking into account items attributable to the portion of the partnership taxable year which is after such date.

(3) DISPOSITIONS OF PARTNERSHIP INTERESTS.—Section 710(b) of the Internal Revenue Code of 1986 (as added by this section) shall apply to dispositions and distributions after January 27, 2009.

(4) OTHER INCOME AND GAIN IN CONNECTION WITH INVESTMENT MANAGEMENT SERVICES.—Section 710(d) of such Code (as added by this section) shall take effect on January 27, 2009.

(5) PUBLICLY TRADED PARTNERSHIPS.—For purposes of applying section 7704, the amendments made by this section shall apply to taxable years beginning after December 31, 2010.

SEC. 701. INCREASE IN EXCISE TAX RATE ON TOBACCO PRODUCTS.

(a) CIGARS.—Section 5701(a) of the Internal Revenue Code of 1986 is amended—

(1) by striking ''$1.828 cents per thousand ($1.594 cents per thousand on cigars removed during 2000 or 2001)'' in paragraph (1) and inserting ''$38.05 per thousand'',

(2) by striking ''20.719 percent (18.063 percent on cigars removed during 2000 or 2001)'' in paragraph (2) and inserting ''39.9 percent'', and

(3) by striking ''$48.75 per thousand ($42.50 per thousand on cigars removed during 2000

or 2001)'' in paragraph (2) and inserting ''30.44 cents per cigar''.

(b) CIGARETTES.—Section 5701(b) of such Code is amended—

(1) by striking ''$19.50 per thousand ($17 per thousand on cigarettes removed during 2000 or 2001)'' in paragraph (1) and inserting ''$38.05 per thousand'', and

(2) by striking ''$40.95 per thousand ($35.70 per thousand on cigarettes removed during 2000 or 2001)'' in paragraph (2) and inserting ''$79.91 per thousand''.

(c) CIGARETTE PAPERS.—Section 5701(c) of such Code is amended by striking ''1.22 cents (1.06 cents on cigarette papers removed during 2000 or 2001)'' and inserting ''2.38 cents''.

(d) CIGARETTE TUBES.—Section 5701(d) of such Code is amended by striking ''2.44 cents (2.13 cents on cigarette tubes removed during 2000 or 2001)'' and inserting ''4.76 cents''.

(e) SMOKELESS TOBACCO.—Section 5701(e) of such Code is amended—

(1) by striking ''58.5 cents (51 cents on snuff removed during 2000 or 2001)'' in paragraph (1) and inserting ''$1.142 cents'', and

(2) by striking ''19.5 cents (17 cents on chewing tobacco removed during 2000 or 2001)'' in paragraph (2) and inserting ''38.05 cents''.

(f) PIPE TOBACCO.—Section 5701(f) of such Code is amended by striking ''$1.0969 cents (95.67 cents on pipe tobacco removed during 2000 or 2001)'' and inserting ''$2.1404 cents''.

(g) ROLL-YOUR-OWN TOBACCO.—Section 5701(g) of such Code is amended by striking ''$1.0969 cents (95.67 cents on roll-your-own tobacco removed during 2000 or 2001)'' and inserting ''$18.73''.

SA 59. Mr. VITTER submitted an amendment intended to be proposed by him to the bill H.R. 2, to amend title XXI of the Social Security Act to extend and improve the Children's Health Insurance Program, and for other purposes; which was ordered to lie on the table; as follows:

Strike section 114 and insert the following:

SEC. 114. CHIP GROSS INCOME ELIGIBILITY CEILING.

(a) APPLICATION OF CHIP ELIGIBILITY CEILING.—

(1) IN GENERAL.—Section 2110 (42 U.S.C. 1397jj) is amended—

(A) in subsection (b)(1)—

(i) by striking ''and'' at the end of subparagraph (B);

(ii) by striking the period at the end of subparagraph (C) and inserting ''; and''; and

(iii) by adding at the end the following new subparagraph:

''(D) whose gross family income (as defined in subsection (c)(9)) does not exceed 250 percent of the poverty line.''; and

(B) in subsection (c), by adding at the end the following new paragraph:

''(9) GROSS FAMILY INCOME.—

''(A) IN GENERAL.—Subject to subparagraph (B), the term 'gross family income' means, with respect to an individual, gross income (as defined by the Secretary in regulations) for the members of the individual's family. For purposes of the previous sentence, in defining 'gross income' the Secretary shall, to the maximum extent practicable, include income from whatever source, other than amounts deducted under section 62(a)(1) of the Internal Revenue Code of 1986.

''(B) INCOME DISREGARDS AUTHORIZED.—A State may provide, through a State plan amendment and with the approval of the Secretary, for the disregard from gross family income of one or more amounts so long as the total amount of such disregards for a family does not exceed $250 per month, or $3,000 per year.''.

(2) DENIAL OF FEDERAL MATCHING PAYMENTS FOR STATE SCHIP EXPENDITURES FOR INDIVIDUALS WITH GROSS FAMILY INCOME ABOVE 250 PERCENT OF THE POVERTY LINE.—Section 2105(c) (42 U.S.C. 1397ee(c)) is amended by adding at the end the following new paragraph:

''(8) DENIAL OF PAYMENTS FOR EXPENDITURES FOR CHILD HEALTH ASSISTANCE FOR INDIVIDUALS WHOSE GROSS FAMILY INCOME EXCEEDS 250 PERCENT OF THE POVERTY LINE.—No payment may be made under this section, for any expenditures for providing child health assistance or health benefits coverage under a State child health plan under this title, including under a waiver under section 1115, with respect to an individual whose gross family income (as defined in section 2110(c)(9)) exceeds 250 percent of the poverty line.''.

(b) EFFECTIVE DATE; TRANSITION.—

(1) IN GENERAL.—Subject to paragraph (2), the amendments made by this section shall apply to payments made for items and services furnished on or after the first day of the first calendar quarter beginning more than 90 days after the date of the enactment of this Act.

(2) TRANSITION.—The amendments made by—

(A) subsection (a)(1) shall not apply to an individual who was receiving, or was determined eligible to receive, child health assistance or health benefits coverage under a State child health plan under title XXI of the Social Security Act, including under a waiver under section 1115 of such Act, as of the day before the date of the enactment of this Act, until such date as the individual is determined ineligible using income standards or methodologies in place as of the day before the date of the enactment of this Act; and

(B) subsection (a)(2) shall not apply to payment for items and services furnished to an individual described in subparagraph (B).

SA 60. Mr. WICKER (for himself and Mr. COCHRAN) submitted an amendment intended to be proposed by him to the bill H.R. 2, to amend title XXI of the Social Security Act to extend and improve the Children's Health Insurance Program, and for other purposes; which was ordered to lie on the table; as follows:

On page 76, after line 23, add the following:

SEC. 116. ASSURING COVERAGE OF LOW-INCOME CHILDREN.

Section 2105(c) (42 U.S.C. 1397ee(c)), as amended by section 601(a)(1), is amended by adding at the end the following new paragraph:

''(12) NO PAYMENTS TO ANY STATE FOR EXPENDITURES FOR CHILD HEALTH ASSISTANCE OR HEALTH BENEFITS COVERAGE FOR INDIVIDUALS WHOSE GROSS FAMILY INCOME EXCEEDS 200 PERCENT OF THE POVERTY LINE UNTIL AT LEAST 90 PERCENT OF ALL UNITED STATES ELIGIBLE CHILDREN WHOSE GROSS FAMILY INCOME DOES NOT EXCEED 200 PERCENT OF THE POVERTY LINE ARE ENROLLED IN MEDICAID OR CHIP .—Notwithstanding any other provision of this title or title XIX, for fiscal year quarters beginning on or after January 1, 2009, no payments shall be made to any State under subsection (a)(1) or section 1903(a) on the basis of the enhanced FMAP for providing child health assistance or health benefits coverage for any individual whose gross family income (as defined by the Secretary) exceeds 200 percent of the poverty line for any fiscal year quarter that begins before the date on which the Secretary certifies to Congress that at least 90 percent of all children in the United States whose gross family income (as so defined) does not exceed 200 percent of the poverty line, and who are eligible for child health assistance under a State child health plan under this title or for medical assistance under a State plan under title XIX (or under a waiver of such plans), are enrolled in such plans.''.

SA 61. Mr. BINGAMAN submitted an amendment intended to be proposed by him to the bill H.R. 2, to amend title XXI of the Social Security Act to extend and improve the Children's Health Insurance Program, and for other purposes; which was ordered to lie on the table; as follows:

On page 130, strike lines 8 through 13, and insert the following:

(d) APPLICABILITY; GENERAL EFFECTIVE DATE.—

(1) CONDITION FOR APPLICATION.—

(A) IN GENERAL.—

(i) GENERAL EFFECTIVE DATE.—Subject to clause (ii), except as provided in subparagraph (B), the amendments made by this section shall take effect on January 1, 2010.

(ii) CERTIFICATION REQUIREMENT.—Notwithstanding any other provision of law, no State with a State plan under Medicaid or a State child health plan under CHIP shall be required to comply with section 1902(a)(46)(B) or 2105(c)(9) of the Social Security Act before the date on which the Secretary and the Commissioner of Social Security jointly certify that a significant number of United States citizens, including citizen children, who are eligible for coverage under such plans will not lose that coverage as a result of the application of such requirements. For purposes of the preceding sentence, the Secretary and the Commissioner of Social Security shall determine what is a significant number of such citizens on the basis of the best estimates available of the number of non-citizens that the application of such requirements may prevent from fraudulently obtaining assistance under such plans, compared to the best estimates available of the number of United States citizens that may be inappropriately disenrolled from, or prevented from enrolling in, such plans as a result of the application of such requirements.

(iii) EXTENSION OF PRESCRIPTION DRUG DISCOUNTS TO ENROLLEES OF MEDICAID MANAGED CARE ORGANIZATIONS.—Section 1903(m)(2)(A) (42 U.S.C. 1396b(m)(2)(A)) is amended—

(I) IN GENERAL.—

(aa) in clause (xi), by striking ''and'' at the end;

(bb) in clause (xii), by striking the period at the end and inserting ''; and''; and

(cc) by adding at the end the following:

''(xiii) such contract provides that (I) payment for covered outpatient drugs dispensed to individuals eligible for medical assistance who are enrolled with the entity shall be subject to the same rebate required by the agreement entered into under section 1927 as the State is subject to and that the State shall allow the entity to collect such rebates from manufacturers, and (II) capitation rates paid to the entity shall be based on actual cost experience related to rebates and subject to the Federal regulations requiring actuarially sound rates.''.

(II) CONFORMING AMENDMENTS.—Section 1927 (42 U.S.C. 1396r–8) is amended—

(aa) in subsection (d)—

(AA) in paragraph (1), by adding at the end the following:

''(C) Notwithstanding the subparagraphs (A) and (B)—

''(i) a medicaid managed care organization with a contract under section 1903(m) may exclude or otherwise restrict coverage of a covered outpatient drug on the basis of policies or practices of the organization, such as

those affecting utilization management, formulary adherence, and cost sharing or dispute resolution, in lieu of any State policies or practices relating to the exclusion or restriction of coverage of such drugs; and

''(ii) nothing in this section or paragraph (2)(A)(xiii) of section 1903(m) shall be construed as requiring a medicaid managed care organization with a contract under such section to maintain the same such polices and practices as those established by the State for purposes of individuals who receive medical assistance for covered outpatient drugs on a fee-for service basis.''; and

(bb) in paragraph (4), by inserting after subparagraph (E) the following:

''(F) Notwithstanding the preceding subparagraphs of this paragraph, any formulary established by medicaid managed care organization with a contract under section 1903(m) may be based on positive inclusion of drugs selected by a formulary committee consisting of physicians, pharmacists, and other individuals with appropriate clinical experience as long as drugs excluded from the formulary are available through prior authorization, as described in paragraph (5).''; and

(cc) in subsection (j), by striking paragraph (1) and inserting the following:

''(1) Covered outpatients drugs are not subject to the requirements of this section if such drugs are—

''(A) dispensed by a health maintenance organization other than a medicaid managed care organization with a contract under section 1903(m); and

''(B) subject to discounts under section 340B of the Public Health Service Act.''.

(III) EFFECTIVE DATE.—The amendments made by this subsection take effect on the date of enactment of this Act and apply to rebate agreements entered into or renewed under section 1927 of the Social Security Act (42 U.S.C. 1396r–8) on or after such date.

(iv) INCREASED FUNDING FOR THE MEDICAID IMPROVEMENT FUND.—[*Review with CBO to specify numbers and whether savings all go to 2014 or also to 2015 through 2018*]Section 1941(b)(1)(A) (42 U.S.C. 1936w–1(b)(1)(A)) is amended by striking ''$100,000,000'' and inserting ''$_____''.

SA 62. Mr. BINGAMAN submitted an amendment intended to be proposed by him to the bill H.R. 2, to amend title XXI of the Social Security Act to extend and improve the Children's Health Insurance Program, and for other purposes; which was ordered to lie on the table; as follows:

On page 108, between lines 3 and 4, insert the following:

''(H) STATE OPTION TO RELY ON STATE INCOME TAX DATA OR RETURN.—At the option of the State, a finding from an Express Lane agency may include gross income or adjusted gross income shown by State income tax records or returns.''.

SA 63. Mr. BINGAMAN submitted an amendment intended to be proposed by him to the bill H.R. 2, to amend title XXI of the Social Security Act to extend and improve the Children's Health Insurance Program, and for other purposes; which was ordered to lie on the table; as follows:

On page 99, beginning on line 8 strike ''through'' and all that follows through ''application,'' on line 10, and insert ''in writing, by telephone, orally, through electronic signature, or through any other means specified by the Secretary and''.

On page 108, between lines 3 and 4, insert the following:

''(H) STATE OPTION TO RELY ON STATE INCOME TAX DATA OR RETURN.—At the option of the State, a finding from an Express Lane agency may include gross income or adjusted gross income shown by State income tax records or returns.''.

SA 64. Mr. BINGAMAN submitted an amendment intended to be proposed by him to the bill H.R. 2, to amend title XXI of the Social Security Act to extend and improve the Children's Health Insurance Program, and for other purposes; which was ordered to lie on the table; as follows:

On page 99, beginning on line 8 strike ''through'' and all that follows through ''application,'' on line 10, and insert ''in writing, by telephone, orally, through electronic signature, or through any other means specified by the Secretary and''.

SA 65. Mr. MARTINEZ (for himself, Mr. VITTER, Mr. WICKER, Mr. BUNNING, Mr. ENZI, Mr. COBURN, Mr. JOHANNS, Mr. BROWNBACK, Mr. INHOFE, Mr. CHAMBLISS, and Mr. DEMINT) submitted an amendment intended to be proposed by him to the bill H.R. 2, to amend title XXI of the Social Security Act to extend and improve the Children's Health Insurance Program, and for other purposes; which was ordered to lie on the table; as follows:

At the appropriate place, insert the following:

SEC. ___. RESTORATION OF PROHIBITION ON FUNDING OF NONGOVERNMENTAL ORGANIZATIONS THAT PROMOTE ABORTION AS A METHOD OF BIRTH CONTROL (''MEXICO CITY POLICY'').

Notwithstanding any other provision of law, regulation, or policy, including the memorandum issued by the President on January 23, 2009, to the Administrator of the United States Agency for International Development, titled ''Mexico City Policy and Assistance for Voluntary Family Planning,'' no funds authorized under part I of the Foreign Assistance Act of 1961 (22 U.S.C. 2151 et seq.) for population planning activities or other population or family planning assistance may be made available for any private, nongovernmental, or multilateral organization that performs or actively promotes abortion as a method of birth control.

SA 66. Mr. CORNYN submitted an amendment intended to be proposed by him to the bill H.R. 2, to amend title XXI of the Social Security Act to extend and improve the Children's Health Insurance Program, and for other purposes; which was ordered to lie on the table; as follows:

Strike section 114 and insert the following:

SEC. 114. DENIAL OF PAYMENTS FOR COVERAGE OF CHILDREN WITH EFFECTIVE FAMILY INCOME THAT EXCEEDS 200 PERCENT OF THE POVERTY LINE.

(a) IN GENERAL.—Section 2105(c) (42 U.S.C. 1397ee(c)) is amended by adding at the end the following new paragraph:

''(8) DENIAL OF PAYMENTS FOR EXPENDITURES FOR CHILD HEALTH ASSISTANCE FOR CHILDREN WHOSE EFFECTIVE FAMILY INCOME EXCEEDS 200 PERCENT OF THE POVERTY LINE.—For child health assistance furnished after the date of the enactment of this paragraph, no payment shall be made under this section for any expenditures for providing child health assistance or health benefits coverage for a targeted low-income child whose family income (as determined without regard to the application of any general exclusion or disregard of a block of income that is not determined by type of expense or type of income (regardless of whether such an exclusion or disregard is permitted under section 1902(r))) would exceed 200 percent of the poverty line but for the application of a general exclusion of a block of income that is not determined by type of expense or type of income.''.

(b) GRANTS TO STATES.—

(1) IN GENERAL.—From amounts appropriated under paragraph (2), the Secretary shall make grants to States as follows:

(A) 75 percent of such amounts shall be directed toward increasing coverage for low-income children under CHIP.

(B) 25 percent of such amounts shall be directed toward activities assisting States, especially States with a high percentage of eligible, but not enrolled children, in outreach and enrollment activities under CHIP, such as—

(i) improving and simplifying enrollment systems, including—

(I) increasing staffing and computer systems to meet Federal and State standards;

(II) decreasing turn-around time while maintaining program integrity; and

(ii) improving outreach and application assistance, including—

(I) connecting children with a medical home and keeping them healthy;

(II) developing systems to identify, inform, and fix enrollment system problems;

(III) supporting awareness of, and access to, other critical health programs;

(IV) pursuing new performance goals to cut ''procedural denials'' to the lowest possible level; and

(V) coordinating community- and school-based outreach programs.

(2) FUNDING.—There is appropriated to provide grants under paragraph (1) an amount equal to the amount of Federal funds that the Director of the Congressional Budget Office certifies would have been expended for the period beginning April 1, 2009, and ending September 30, 2013, if section 114 (relating to limitation on matching rate for States that propose to cover children with effective family income that exceeds 300 percent of the poverty line) of S. 275 (111th Congress) as reported by the Committee on Finance of the Senate and placed on the Senate calendar on January 16, 2009, had been enacted.

SA 67. Mr. CORNYN submitted an amendment intended to be proposed by him to the bill H.R. 2, to amend title XXI of the Social Security Act to extend and improve the Children's Health Insurance Program, and for other purposes; which was ordered to lie on the table; as follows:

On page 45, between lines 17 and 18, insert the following:

''(3) LIMITATION.—

''(A) IN GENERAL.—A State shall not be a shortfall State described in paragraph (2) if the State provides coverage under this title to children whose family income (as determined without regard to the application of any general exclusion or disregard of a block of income that is not determined by type of expense or type of income (regardless of whether such an exclusion or disregard is permitted under section 1902(r))) exceeds 200 percent of the poverty line.

''(B) GRANTS TO STATES WITH UNSPENT FUNDS.—Of any funds that are not redistributed under this subsection because of the application of subparagraph (A), the Secretary shall make grants to States as follows:

''(i) 75 percent of such funds shall be directed toward increasing coverage under this title for low-income children.

''(ii) 25 percent of such funds shall be directed toward activities assisting States, especially States with a high percentage of eligible, but not enrolled children, in outreach and enrollment activities under this title, such as—

''(I) improving and simplifying enrollment systems, including—

''(aa) increasing staffing and computer systems to meet Federal and State standards;

''(bb) decreasing turn-around time while maintaining program integrity; and

''(II) improving outreach and application assistance, including—

''(aa) connecting children with a medical home and keeping them healthy;

''(bb) developing systems to identify, inform, and fix enrollment system problems;

''(cc) supporting awareness of, and access to, other critical health programs;

''(dd) pursuing new performance goals to cut 'procedural denials' to the lowest possible level; and

''(ee) coordinating community- and school-based outreach programs.''.

SA 68. Mr. GRASSLEY submitted an amendment intended to be proposed by him to the bill H.R. 2, to amend title XXI of the Social Security Act to extend and improve the Children's Health Insurance Program, and for other purposes; which was ordered to lie on the table; as follows:

On page 75, beginning on line 13, strike ''whose'' and all that follows through line 17, and insert the following: ''whose family income would exceed 300 percent of the poverty line (determined without regard to any block or other income disregard and without excluding any type of expense (regardless, in the case of child health assistance or health benefits coverage provided in the form of coverage under a Medicaid program under paragraph (2) of section 2101(a) (or a combination of the coverage options under paragraphs (1) and (2) of such section) of whether such a disregard or exclusion is permitted under section 1902(r)).''.

SA 69. Mr. GRASSLEY submitted an amendment intended to be proposed by him to the bill H.R. 2, to amend title XXI of the Social Security Act to extend and improve the Children's Health Insurance Program, and for other purposes; which was ordered to lie on the table; as follows:

Beginning on page 75, strike line 18 and all that follows through page 76, line 2.

SA 70. Mr. GRASSLEY submitted an amendment intended to be proposed by him to the bill H.R. 2, to amend title XXI of the Social Security Act to extend and improve the Children's Health Insurance Program, and for other purposes; which was ordered to lie on the table; as follows:

Strike section 114 and insert the following:

SEC. 114. DENIAL OF PAYMENTS FOR COVERAGE OF CHILDREN WITH EFFECTIVE FAMILY INCOME THAT EXCEEDS 300 PERCENT OF THE POVERTY LINE.

Section 2105(c) (42 U.S.C. 1397ee(c)) is amended by adding at the end the following new paragraph:

''(8) DENIAL OF PAYMENTS FOR EXPENDITURES FOR CHILD HEALTH ASSISTANCE FOR CHILDREN WHOSE EFFECTIVE FAMILY INCOME EXCEEDS 300 PERCENT OF THE POVERTY LINE.—For child health assistance furnished after the date of the enactment of this paragraph, no payment shall be made under this section for any expenditures for providing child health assistance or health benefits coverage for a targeted low-income child whose effective family income would exceed 300 percent of the poverty line but for the application of a general exclusion of a block of income that is not determined by type of expense or type of income.''.

SA 71. Mr. GRASSLEY submitted an amendment intended to be proposed by him to the bill H.R. 2, to amend title XXI of the Social Security Act to extend and improve the Children's Health Insurance Program, and for other purposes; which was ordered to lie on the table; as follows:

Strike all after the enacting clause and insert the following:

SECTION 1. SHORT TITLE.

This Act may be cited as the ''SCHIP Funding Extension Act of 2009''.

SEC. 2. FUNDING THROUGH FISCAL YEAR 2010.

(a) THROUGH FISCAL YEAR 2010.—

(1) IN GENERAL.—Section 2104 of the Social Security Act (42 U.S.C. 1397dd(a)), as amended by section 201(a)(1) of the Medicare, Medicaid, and SCHIP Extension Act of 2007 (Public Law 110–173) is amended—

(A) in subsection (a)(11), by striking ''and 2009'' and inserting ''through 2010''; and

(B) in subsection (c)(4)(B), by striking ''2009'' and inserting ''2010''.

(2) AVAILABILITY OF EXTENDED FUNDING.—Funds made available from any allotment made from funds appropriated under subsection (a)(11) or (c)(4)(B) of section 2104 of the Social Security Act (42 U.S.C. 1397dd) for fiscal year 2009 or 2010 shall not be available for child health assistance for items and services furnished after September 30, 2010.

(b) ADDITIONAL ALLOTMENTS TO MAINTAIN SCHIP PROGRAMS THROUGH FISCAL YEAR 2010.—Section 2104 of the Social Security Act (42 U.S.C. 1397dd) is amended by striking subsection (l) and inserting the following new subsections:

''(l) ADDITIONAL ALLOTMENTS TO MAINTAIN SCHIP PROGRAMS FOR FISCAL YEAR 2009.—

''(1) APPROPRIATION; ALLOTMENT AUTHORITY.—For the purpose of providing additional allotments described in subparagraphs (A) and (B) of paragraph (3), there is appropriated, out of any money in the Treasury not otherwise appropriated, such sums as may be necessary, not to exceed $3,000,000,000 for fiscal year 2009.

''(2) SHORTFALL STATES DESCRIBED.—For purposes of paragraph (3), a shortfall State described in this paragraph is a State with a State child health plan approved under this title for which the Secretary estimates, on the basis of the most recent data available to the Secretary, that the Federal share amount of the projected expenditures under such plan for such State for fiscal year 2009 will exceed the sum of—

''(A) the amount of the State's allotments for each of fiscal years 2007 and 2008 that will not be expended by the end of fiscal year 2008;

''(B) the amount, if any, that is to be redistributed to the State during fiscal year 2009 in accordance with subsection (f); and

''(C) the amount of the State's allotment for fiscal year 2009.

''(3) ALLOTMENTS.—In addition to the allotments provided under subsections (b) and (c), subject to paragraph (4), of the amount available for the additional allotments under paragraph (1) for fiscal year 2009, the Secretary shall allot—

''(A) to each shortfall State described in paragraph (2) not described in subparagraph (B), such amount as the Secretary determines will eliminate the estimated shortfall described in such paragraph for the State; and

''(B) to each commonwealth or territory described in subsection (c)(3), an amount equal to the percentage specified in subsection (c)(2) for the commonwealth or territory multiplied by 1.05 percent of the sum of the amounts determined for each shortfall State under subparagraph (A).

''(4) PRORATION RULE.—If the amounts available for additional allotments under paragraph (1) are less than the total of the amounts determined under subparagraphs (A) and (B) of paragraph (3), the amounts computed under such subparagraphs shall be reduced proportionally.

''(5) RETROSPECTIVE ADJUSTMENT.—The Secretary may adjust the estimates and determinations made to carry out this subsection as necessary on the basis of the amounts reported by States not later than November 30, 2008, on CMS Form 64 or CMS Form 21, as the case may be, and as approved by the Secretary.

''(6) ONE-YEAR AVAILABILITY; NO REDISTRIBUTION OF UNEXPENDED ADDITIONAL ALLOTMENTS.—Notwithstanding subsections (e) and (f), amounts allotted to a State pursuant to this subsection for fiscal year 2009, subject to paragraph (5), shall only remain available for expenditure by the State through September 30, 2009. Any amounts of such allotments that remain unexpended as of such date shall not be subject to redistribution under subsection (f).

''(m) ADDITIONAL ALLOTMENTS TO MAINTAIN SCHIP PROGRAMS FOR FISCAL YEAR 2010.—

''(1) APPROPRIATION; ALLOTMENT AUTHORITY.—For the purpose of providing additional allotments described in subparagraphs (A) and (B) of paragraph (3), there is appropriated, out of any money in the Treasury not otherwise appropriated, such sums as may be necessary, not to exceed $4,000,000,000 for fiscal year 2010.

''(2) SHORTFALL STATES DESCRIBED.—For purposes of paragraph (3), a shortfall State described in this paragraph is a State with a State child health plan approved under this title for which the Secretary estimates, on the basis of the most recent data available to the Secretary, that the Federal share amount of the projected expenditures under such plan for such State for fiscal year 2010 will exceed the sum of—

''(A) the amount of the State's allotments for each of fiscal years 2008 and 2009 that will not be expended by the end of fiscal year 2009;

''(B) the amount, if any, that is to be redistributed to the State during fiscal year 2010 in accordance with subsection (f); and

''(C) the amount of the State's allotment for fiscal year 2010.

''(3) ALLOTMENTS.—In addition to the allotments provided under subsections (b) and (c), subject to paragraph (4), of the amount available for the additional allotments under paragraph (1) for fiscal year 2010, the Secretary shall allot—

''(A) to each shortfall State described in paragraph (2) not described in subparagraph (B) such amount as the Secretary determines will eliminate the estimated shortfall described in such paragraph for the State; and

''(B) to each commonwealth or territory described in subsection (c)(3), an amount equal to the percentage specified in subsection (c)(2) for the commonwealth or territory multiplied by 1.05 percent of the sum of the amounts determined for each shortfall State under subparagraph (A).

''(4) PRORATION RULE.—If the amounts available for additional allotments under paragraph (1) are less than the total of the amounts determined under subparagraphs (A) and (B) of paragraph (3), the amounts

computed under such subparagraphs shall be reduced proportionally.

''(5) RETROSPECTIVE ADJUSTMENT.—The Secretary may adjust the estimates and determinations made to carry out this subsection as necessary on the basis of the amounts reported by States not later than November 30, 2010, on CMS Form 64 or CMS Form 21, as the case may be, and as approved by the Secretary.

''(6) AVAILABILITY; NO REDISTRIBUTION OF UNEXPENDED ADDITIONAL ALLOTMENTS.—Notwithstanding subsections (e) and (f), amounts allotted to a State pursuant to this subsection for fiscal year 2010, subject to paragraph (5), shall only remain available for expenditure by the State through September 30, 2010. Any amounts of such allotments that remain unexpended as of such date shall not be subject to redistribution under subsection (f).''.

(c) EXTENSION OF TREATMENT OF QUALIFYING STATES.—

(1) IN GENERAL.—Section 2105(g)(1)(A) of the Social Security Act (42 U.S.C. 1397ee(g)(1)(A)) is amended by striking ''or 2009'' and inserting ''2009, or 2010''.

(2) APPLICABILITY.—The amendment made by paragraph (1) shall be in effect through September 30, 2010.

(3) REPEAL OF LIMITATION ON AVAILABILITY OF FISCAL YEAR 2009 ALLOTMENTS.—Paragraph (2) of section 201(b) of the Medicare, Medicaid, and SCHIP Extension Act of 2007 (Public Law 110-173) is repealed.

SA 72. Mr. GRASSLEY submitted an amendment intended to be proposed by him to the bill H.R. 2, to amend title XXI of the Social Security Act to extend and improve the Children's Health Insurance Program, and for other purposes; which was ordered to lie on the table; as follows:

On page 153, between lines 12 and 13, insert the following:

(d) REQUIREMENT FOR STATES COVERING CHILDREN WHOSE INCOME EXCEEDS 200 PERCENT OF THE POVERTY LINE TO OFFER PREMIUM ASSISTANCE FOR ALL FAMILIES OF TARGETED LOW-INCOME CHILDREN.—

(1) IN GENERAL.—Section 2102(a) (42 U.S.C. 1397b(a)) is amended—

(A) in paragraph (6), by striking ''and'' at the end;

(B) in paragraph (7), by striking the period at the end and inserting ''; and''; and

(C) by adding at the end the following new paragraph:

''(8) effective for plan years beginning on or after October 1, 2009, in the case of a State that provides child health assistance for any targeted low-income child with a family gross income (determined without regard to any block or other income disregard and without excluding any type of expense (regardless, in the case of child health assistance or health benefits coverage provided in the form of coverage under a Medicaid program under paragraph (2) of section 2101(a) (or a combination of the coverage options under paragraphs (1) and (2) of such section) of whether such a disregard or exclusion is permitted under section 1902(r))) that exceeds 200 percent of the poverty line, how the plan shall offer child health assistance in the form of premium assistance to all targeted low-income children who have access to private health insurance coverage or coverage under a group health plan.''.

SA 73. Mr. GRASSLEY submitted an amendment intended to be proposed by him to the bill H.R. 2, to amend title XXI of the Social Security Act to extend and improve the Children's Health Insurance Program, and for other purposes; which was ordered to lie on the table; as follows:

Beginning on page 58, strike line 14 and all that follows through page 62, line 17, and insert the following:

''(a) TERMINATION OF COVERAGE FOR NONPREGNANT CHILDLESS ADULTS.—

''(1) NO NEW CHIP WAIVERS; AUTOMATIC EXTENSIONS AT STATE OPTION THROUGH 2009.—Notwithstanding section 1115 or any other provision of this title, except as provided in this subsection—

''(A) the Secretary shall not on or after the date of the enactment of the Children's Health Insurance Program Reauthorization Act of 2009, approve or renew a waiver, experimental, pilot, or demonstration project that would allow funds made available under this title to be used to provide child health assistance or other health benefits coverage to a nonpregnant childless adult; and

''(B) notwithstanding the terms and conditions of an applicable existing waiver, the provisions of paragraph (2) shall apply for purposes of any period beginning on the first day of the first month that begins after the 6-month termination period, in determining the period to which the waiver applies, the individuals eligible to be covered by the waiver, and the amount of the Federal payment under this title.

''(2) TERMINATION OF CHIP COVERAGE UNDER APPLICABLE EXISTING WAIVERS 6 MONTHS AFTER THE DATE OF THE ENACTMENT OF THIS ACT.—

''(A) IN GENERAL.—No funds shall be available under this title for child health assistance or other health benefits coverage that is provided to a nonpregnant childless adult under an applicable existing waiver after the last day of the 6-month termination period.

''(B) EXTENSION UPON STATE REQUEST.—If an applicable existing waiver described in subparagraph (A) would otherwise expire before the date described in paragraph (1)(A), notwithstanding the requirements of subsections (e) and (f) of section 1115, a State may submit, not later than 30 days after the date of enactment of this Act, a request to the Secretary for an extension of the waiver. The Secretary shall approve a request for an extension of an applicable existing waiver submitted pursuant to this subparagraph, but only through the last day of the 6-month termination period.

''(C) APPLICATION OF ENHANCED FMAP.—The enhanced FMAP determined under section 2105(b) shall apply to expenditures under an applicable existing waiver for the provision of child health assistance or other health benefits coverage to a nonpregnant childless adult during the 6-month termination period.

''(3) STATE OPTION TO APPLY FOR MEDICAID WAIVER TO CONTINUE COVERAGE FOR NONPREGNANT CHILDLESS ADULTS.—

(A) IN GENERAL.—Each State for which coverage under an applicable existing waiver is terminated under paragraph (2)(A) may submit, not later than 90 days after the date of enactment of this Act, an application to the Secretary for a waiver under section 1115 of the State plan under title XIX to provide medical assistance to a nonpregnant childless adult whose coverage is so terminated (in this subsection referred to as a ''Medicaid nonpregnant childless adults waiver'').

''(B) DEADLINE FOR APPROVAL.—The Secretary shall make a decision to approve or deny an application for a Medicaid nonpregnant childless adults waiver submitted under subparagraph (A) within 90 days of the date of the submission of the application. If no decision has been made by the Secretary as of the last day of the 6-month termination period, on the application of a State for a Medicaid nonpregnant childless adults waiver that was submitted to the Secretary by the date described in subparagraph (A), the application shall be deemed approved.

''(C) STANDARD FOR BUDGET NEUTRALITY.—The budget neutrality requirement applicable with respect to expenditures for medical assistance under a Medicaid nonpregnant childless adults waiver shall—

''(i) in the case of any period of fiscal year 2009 in which such waiver is in effect, allow expenditures for medical assistance under title XIX for all such adults to not exceed the total amount of payments made to the State under paragraph (2)(B) for any previous corresponding period in fiscal year 2009, increased by the percentage increase (if any) in the projected nominal per capita amount of National Health Expenditures for 2009 over 2008, as most recently published by the Secretary;

''(ii) in the case of fiscal year 2010, allow expenditures for medical assistance under title XIX for all such adults to not exceed the sum of the total amount of payments made to the State under paragraph (2)(B) for fiscal year 2009 and under title XIX for any period of fiscal year 2009 in which such waiver is in effect, increased by the percentage increase (if any) in the projected nominal per capita amount of National Health Expenditures for 2010 over 2009, as most recently published by the Secretary; and

''(iii) in the case of any succeeding fiscal year, allow such expenditures to not exceed the amount in effect under this subparagraph for the preceding fiscal year, increased by the percentage increase (if any) in the projected nominal per capita amount of National Health Expenditures for the calendar year that begins during the year involved over the preceding calendar year, as most recently published by the Secretary.

''(4) 6-MONTH TERMINATION PERIOD.—In this subsection, the term ''6-month termination period'' means the period that begins with the first day of the first month that begins on or after the date of enactment of this Act and ends on the last day of the 5th succeeding month.

AUTHORITY FOR COMMITTEES TO MEET

COMMITTEE ON ARMED SERVICES

Mr. CASEY. Mr. President, I ask unanimous consent that the Committee on Armed Services be authorized to meet during the session of the Senate on Tuesday, January 27, 2009, at 9:30 a.m.

The PRESIDING OFFICER. Without objection, it is so ordered.

COMMITTEE ON BANKING, HOUSING, AND URBAN AFFAIRS

Mr. CASEY. Mr. President, I ask unanimous consent that the Committee on Banking, Housing, and Urban Affairs be authorized to meet during the session of the Senate on January 27, 2009 at 10 a.m.

The PRESIDING OFFICER. Without objection, it is so ordered.

COMMITTEE ON FINANCE

Mr. CASEY. Mr. President, I ask unanimous consent that the Committee on Finance be authorized to meet during the session of the Senate on Tuesday, January 27, 2009, at 10:30 a.m., in room 215 of the Dirksen Senate Office Building.

The PRESIDING OFFICER. Without objection, it is so ordered.

COMMITTEE ON HEALTH, EDUCATION, LABOR, AND PENSIONS

Mr. CASEY. Mr. President, I ask unanimous consent that the Committee on Health, Education, Labor, and Pensions be authorized to meet, during the session of the Senate, conduct a hearing entitled ''Access to Prevention and Public Health for High Risk Populations'' on Tuesday, January 27, 2009. The hearing will commence at 10 a.m. in room 385 of the Russell Senate Office Building.

The PRESIDING OFFICER. Without objection, it is so ordered.

COMMITTEE ON THE JUDICIARY

Mr. CASEY. Mr. President, I ask unanimous consent that the Senate Committee on the Judiciary be authorized to meet during the session of the Senate, to conduct a hearing entitled ''Health IT: Protecting Americans' Privacy in the Digital Age'' on Tuesday, January 27, 2009, at 9:30 a.m., in room SD–226 of the Dirksen Senate Office Building.

The PRESIDING OFFICER. Without objection, it is so ordered.

PRIVILEGES OF THE FLOOR

Mr. HATCH. I ask unanimous consent that Dr. Janet Phoenix, my health policy fellow, be granted the privilege of the floor during Senate consideration of H.R. 2, the Children's Health Insurance Program Reauthorization Act of 2009.

The ACTING PRESIDENT pro tempore. Without objection, it is so ordered.

Mr. COBURN. Mr. President, I ask unanimous consent that Stephanie Carlton and Evan Feinberg of my staff be granted the privilege of the floor during debate on H.R. 2.

The PRESIDING OFFICER. Without objection, it is so ordered.

CATHOLIC SCHOOLS WEEK

Mr. DURBIN. I ask unanimous consent the Senate now proceed to consideration of S. Res. 22, which was submitted earlier today.

The PRESIDING OFFICER. The clerk will report the resolution by title.

The legislative clerk read as follows:

A resolution (S. Res. 22) recognizing the goals of Catholic Schools Week and honoring the valuable contributions of Catholic schools in the United States.

There being no objection, the Senate proceeded to consider the resolution.

Mr. DURBIN. I ask unanimous consent the resolution be agreed to, the preamble be agreed to, and the motions to reconsider be laid on the table.

The PRESIDING OFFICER. Without objection, it is so ordered.

The resolution (S. Res. 22) was agreed to.

The preamble was agreed to.

The resolution, with its preamble, reads as follows:

S. RES. 22

Whereas Catholic schools in the United States have received international acclaim for academic excellence while providing students with lessons that extend far beyond the classroom;

Whereas Catholic schools present a broad curriculum that emphasizes the lifelong development of moral, intellectual, physical, and social values in the young people of the United States;

Whereas Catholic schools in the United States today educate 2,270,913 students and maintain a student-to-teacher ratio of 14 to 1;

Whereas the faculty members of Catholic schools teach a highly diverse body of students;

Whereas the graduation rate for all Catholic school students is 95 percent;

Whereas 83 percent of Catholic high school graduates go on to college;

Whereas Catholic schools produce students strongly dedicated to their faith, values, families, and communities by providing an intellectually stimulating environment rich in spiritual character and moral development; and

Whereas in the 1972 pastoral message concerning Catholic education, the National Conference of Catholic Bishops stated, ''Education is one of the most important ways by which the Church fulfills its commitment to the dignity of the person and building of community. Community is central to education ministry, both as a necessary condition and an ardently desired goal. The educational efforts of the Church, therefore, must be directed to forming persons-in-community; for the education of the individual Christian is important not only to his solitary destiny, but also the destinies of the many communities in which he lives.'': Now, therefore, be it

Resolved, That the Senate—

(1) recognizes the goals of Catholic Schools Week, an event cosponsored by the National Catholic Educational Association and the United States Conference of Catholic Bishops that recognizes the vital contributions of thousands of Catholic elementary and secondary schools in the United States; and

(2) commends Catholic schools, students, parents, and teachers across the United States for their ongoing contributions to education, and for the vital role they play in promoting and ensuring a brighter, stronger future for the United States.

HONORING THE LIFE OF ANDREW WYETH

Mr. DURBIN. Mr. President, I ask unanimous consent the Senate proceed to the immediate consideration of S. Res. 23, submitted earlier today by Senator CASEY.

The PRESIDING OFFICER. The clerk will report the resolution by title.

The legislative clerk read as follows:

A resolution (S. Res. 23) honoring the life of Andrew Wyeth.

There being no objection, the Senate proceeded to consider the resolution.

Ms. SNOWE. Mr. President, I rise as a cosponsor of Senator SPECTER's resolution honoring Andrew Wyeth and to pay tribute to the landmark life and legacy of this towering giant of American Art. My State of Maine joins Pennsylvania, the Nation, and the world in mourning the inexpressible loss of Andrew Wyeth, a painter of enormous genius, brave vision, and unmatched realism who long ago secured a rightful and prominent place in the pantheon of artists.

One of the most 'American' of painters, Andrew Wyeth possessed a courage and sensitivity to capture the stark beauty of the landscapes and individuals he depicted. And those of us from Maine will forever hold a special place in our hearts for the undeniable love he had for our State, as portrayed in his moving landscapes of Maine's coasts and especially in his exceptional ''Christina's World.'' Like millions around the world, we will miss Andrew Wyeth's historic and enduring contributions to the American story as told on canvas as well as his powerful capacity for capturing the human condition unvarnished.

On a personal note, it was such a privilege to know Andy and his wonderful wife, Betsy, over the years. I will always treasure the fond memories of visiting Andy and Betsy and their family at their home on Allen Island. Indisputably, Andy lived his life the way he painted—with integrity, grace, and an abiding sense of humanity. And I always remember the pride and honor I felt attending the presentation of a National Medal of the Arts in 2007 to Andy at the White House in an unforgettable ceremony rightly recognizing his iconic body of work over an extraordinary lifetime.

I would like to include for the RECORD a recent outstanding article entitled Wyeth's White Wonder by John Wilmerding, published in The Wall Street Journal, Saturday, January 24, 2009. Formerly a professor at Dartmouth College, Mr. Wilmerding curated the exhibition Andrew Wyeth: The Helga Pictures at the National Gallery of Art in 1987 and recently retired as Sarofim Professor of American Art at Princeton University. Describing Andrew Wyeth's Snow Hill as one of his most memorable works, Mr. Wilmerding captures the essence of the painting and the painter, calling Snow Hill ''one of the most haunting, beautiful and resonant of Wyeth's seven-decade career.''

Poet Robert Frost once wrote of a star that ''it asks a little of us here/It asks of us a certain height,'' and certainly the same can be said of Andrew Wyeth who inspired and entreated us to experience his courageous rendering of the world as he saw it, and like generations to come, we are eternally indebted to him. Andrew Wyeth's artistic achievements resonate not only in our time—but for all time. He will be profoundly missed, and we extend our deepest condolences to Betsy and to our great friends—their son, Jamie and his wife, Phyllis—their son, Nicholas; and the entire Wyeth family for their tremendous loss.

I ask unanimous consent the article be printed in the RECORD.

There being no objection, the material was ordered to be printed in the RECORD, as follows:

[From the Wall Street Journal, Jan. 24–25, 2009]

WYETH'S WHITE WONDER

(By John Wilmerding)

Andrew Wyeth died last week on a winter's day familiar to us from many of his paintings: snowy, cold and moody. Perhaps the best form of appreciation we can express for his artistic achievement is to undertake a close look at one of his iconic works in this case ''Snow Hill,'' a painting from the height of his powers that is relatively little known, seen or reproduced. While it has been on loan to the Brandywine Museum (www.brandywine-museum.org) for several years, its fragility of surface has kept it from going out on loan to a wider audience, and its singularity of subject matter has not readily found it a place in recent Wyeth monographs or exhibition catalogs. Only posterity is likely to sort out which of his paintings will stand up as his most memorable works, but ''Snow Hill'' is likely to hold its own as one of the most haunting, beautiful and resonant of Wyeth's seven-decade career.

Indeed, the picture is about marking seven decades. Wyeth, who lived to the age of 91, painted this large tempera to mark his 70th birthday (in 1987). He finished the painstaking effort two years later. There are few others that are larger and as ambitious. The artist was conscious of mortality for much of his career, from the deaths of his father and nephew in a train accident in 1945, to his own miscellaneous ailments, operations and illnesses throughout his later years.

We know that many of his images were in varying degrees autobiographical, and this painting was a conscious summary of his artistic life that was both somber memoir and playful recalibraion. Like many of Wyeth's winter landscapes in watercolor, dry-brush, or egg tempera, this makes the most of a near-monochromatic palette, where darks and lights play against each other, and nature's full range of grays and tans takes on a heightened texture. One of his great talents was an intense technical virtuosity in all of his chosen media. Yet even as his admirers and critics are drawn to the magic realism of objects and surfaces, it is the charged emotion, suggestive meaning, and complex moods beneath facades and faces that distinguish his finest visions.

The setting was intimately familiar to Wyeth almost his entire life, a view looking down over the Kuerner farm and the nearby hills of the Brandywine Valley in Pennsylvania. The artist knew almost every inch of the roads, buildings and fields we see in the distance below. Historians and others may argue for some time whether his future reputation will rest on the landscapes or portraits (respectively descended from two of his artistic idols, Winslow Homer and Thomas Eakins). ''Snow Hill'' is unusual in the merging of the two—one open, silent and vast; the other intimate, animate and active. The foreground hilltop, receding valley, and broad sky constitute a painted tour de force of whites, off-whites and cream colors. Its poetic emptiness recalls the stark eloquence seen in but a few of Wyeth's other strongest compositions—such as ''Christina's World'' (1949), ''River Cove'' (1958) and ''Airborne'' (1996).

Atop the hillside we view the improbable scene of a Maypole dance at Christmas time. The seven ribbons descending from beneath the tree above mark the artist's seven decades. In a surreal vision, Wyeth assembles prominent figures from his life and art who appeared in major paintings over the years. Holding hands from left to right across the foreground are Karl and Anna Kuerner, followed by William Loper and Helga Testorf. In the back right is the family friend and neighbor Allan Lynch, wearing his telltale hat with earflaps flying, and finally, partially obscured, a figure with billowing brown coat who recalls the artist's wife, Betsy, posing years earlier in the snowy courtyard of their Chadd's Ford farmhouse. In this enumeration we realize the group only comes to six, suggesting a missing seventh figure. Possibly Christina Olson, the most enduring of Wyeth's Maine subjects, made famous by his first masterpiece, ''Christina's World,'' is not present, since her paralysis would keep her from dancing. Or perhaps the implied seventh individual might be the artist himself, participant in their lives and unseen orchestrator of this imaginary get-together. In any case, this is a witty and exuberant conjuring of artistic imagination.

Not surprisingly for Wyeth, however, there are notes of darkness beneath the celebratory gathering: Wyeth had lived through Karl Kuerner succumbing to cancer, Allan Lynch to suicide, and William Loper to madness. Even so, what we ultimately experience here is the enjoyment of art, life and creativity, an idea subtly but vividly conveyed by the air-touched ribbons. They contain the most intense colors and free-flowing brushstrokes in this picture. Wyeth once described how he approached their execution. In part remembering his childhood games with friends, dressing up as soldiers or medieval knights with play swords or sabers, he envisioned here addressing the painting like a fencer with an epee. With arm and brush extended, he swiftly moved to the surface and slashed each stroke of color from the apex down to the figures.

There is one more level of meaning embodied in this half-real, half-dream image, which resides in its title. ''Snow Hill'' is at once a literal description and a literary allusion. Yes, our vantage point is on the crown of this snowy hill, gently curving across the foreground. But its contour also brings to mind the great rounded back of a white whale, which Wyeth connected to ''Moby-Dick.'' His painting's title comes from a line toward the end of Melville's book. In chapter 133, ''The Chase—First Day,'' a sailor aloft cries, ''there she blows!—there she blows! A hump like a snow-hill! It is Moby Dick!'' This of course reinforces Wyeth's own juxtapositions of black and white, darkness and light, death and life. His ''Snow Hill'' is a more personal drama than Melville's, but no less a celebration of whiteness, in symbolism and pigment.

Mr. DURBIN. I ask unanimous consent the resolution be agreed to, the preamble be agreed to, the motions to reconsider be laid upon the table, with no intervening action or debate, and any statements be printed in the RECORD.

The PRESIDING OFFICER. Without objection, it is so ordered.

The resolution (S. Res 23) was agreed to.

The preamble was agreed to.

The resolution, with its preamble, reads as follows:

S. RES. 23

Whereas Andrew Wyeth was one of the most popular American artists of the twentieth century, whose paintings presented to the world his impressions of rural American landscapes and lives;

Whereas Andrew Wyeth was born in Chadds Ford, Pennsylvania on July 12, 1917, where he spent much of his life and where today stands the Brandywine River Museum, a museum dedicated to the works of the Wyeth family;

Whereas Andrew Wyeth died the morning of January 16, 2009, at the age of 91, in his home in Chadds Ford, Pennsylvania;

Whereas it is the intent of the Senate to recognize and pay tribute to the life of Andrew Wyeth, his passion for painting, his contribution to the world of art, and his deep understanding of the human condition;

Whereas Andrew Wyeth was born the son of famed illustrator N.C. Wyeth and grew up surrounded by artists in an environment that encouraged imagination and free-thinking;

Whereas Andrew Wyeth became an icon who focused his work on family and friends in Chadds Ford and in coastal Maine, where he spent his summers and where he met Christina Olson, the subject of his famed painting 'Christina's World';

Whereas Andrew Wyeth's paintings were immensely popular among the public but sometimes disparaged by critics for their lack of color and bleak landscapes portraying isolation and alienation;

Whereas Andrew Wyeth's works could be controversial, as they sparked dialogue and disagreement in the art world concerning the natures of realism and modernism;

Whereas Andrew Wyeth was immensely patriotic and an independent thinker who broke with many of his peers on the issues of the day;

Whereas Andrew Wyeth was a beloved figure in Chadds Ford and had his own seat at the corner table of the Chadds Ford Inn, where reproductions of his art line the walls;

Whereas Andrew Wyeth received the Presidential Medal of Freedom in 1963 and the Congressional Gold Medal of Honor in 1988;

Whereas Andrew Wyeth let it be known that he lived to paint and never lost his simplicity and caring for people despite his immense fame and successful career; and

Whereas the passing of Andrew Wyeth is a great loss to the world of art, and his life should be honored with highest praise and appreciation for his paintings which remain with us although he is gone: Now, therefore, be it

Resolved, That the Senate—

(1) recognizes Andrew Wyeth as a treasure of the United States and one of the most popular artists of the twentieth century; and

(2) recognizes the outstanding contributions of Andrew Wyeth to the art world and to the community of Chadds Ford, Pennsylvania.

APPOINTMENT

The PRESIDING OFFICER. The Chair, on behalf of the Vice President, pursuant to 22 U.S.C. 276h–276k, as amended, appoints the following Senator as Chairman to the Mexico-U.S. Interparliamentary Group conference for the 111th Congress: The Honorable CHRISTOPHER J. DODD of Connecticut.

ORDERS FOR WEDNESDAY, JANUARY 28, 2009

Mr. DURBIN. Mr. President, I ask unanimous consent that when the Senate completes its business today, the Senate stand in adjournment until 10 a.m. tomorrow, Wednesday, January 28; that following the prayer and pledge, the Journal of proceedings be approved to date, the morning hour be deemed expired, the time for the two leaders be reserved for their use later in the day, and the Senate resume consideration of H.R. 2, the Children's

Health Insurance Program Reauthorization Act.

The PRESIDING OFFICER. Without objection, it is so ordered.

PROGRAM

Mr. DURBIN. Mr. President, tomorrow the Senate will resume consideration of the children's health insurance bill. We will continue to work through the amendments to the bill.

I want to say, by way of observation, that today's proceedings in the Senate were refreshing and positive. Amendments were brought to the floor, debated, voted on, and we are moving on to more tomorrow. It is almost like the Senate of old.

We will continue to work through amendments to the bill, and I hope in the spirit of bipartisan cooperation we can complete this bill. Senators should be prepared to work on these amendments and vote throughout the day tomorrow.

ADJOURNMENT UNTIL 10 A.M. TOMORROW

Mr. DURBIN. Mr. President, if there is no further business to come before the Senate, I ask unanimous consent that it stand adjourned under the previous order.

There being no objection, the Senate, at 7:22 p.m., adjourned until Wednesday, January 28, 2009, at 10 a.m.

NOMINATIONS

Executive nomination received by the Senate:

INTERNATIONAL BANKS

TIMOTHY F. GEITHNER, OF NEW YORK, TO BE UNITED STATES GOVERNOR OF THE INTERNATIONAL MONETARY FUND FOR A TERM OF FIVE YEARS; UNITED STATES GOVERNOR OF THE INTERNATIONAL BANK FOR RECONSTRUCTION AND DEVELOPMENT FOR A TERM OF FIVE YEARS; UNITED STATES GOVERNOR OF THE INTER-AMERICAN DEVELOPMENT BANK FOR A TERM OF FIVE YEARS; UNITED STATES GOVERNOR OF THE AFRICAN DEVELOPMENT BANK FOR A TERM OF FIVE YEARS; UNITED STATES GOVERNOR OF THE ASIAN DEVELOPMENT BANK; UNITED STATES GOVERNOR OF THE AFRICAN DEVELOPMENT FUND; UNITED STATES GOVERNOR OF THE EUROPEAN BANK FOR RECONSTRUCTION AND DEVELOPMENT, VICE HENRY M. PAULSON JR., RESIGNED.

DISCHARGED NOMINATION

The Senate Committee on Banking, Housing, and Urban Affairs was discharged from further consideration of the following nomination by unanimous consent and the nomination was confirmed:

DANIEL K. TARULLO, OF MASSACHUSETTS, TO BE A MEMBER OF THE BOARD OF GOVERNORS OF THE FEDERAL RESERVE SYSTEM FOR A TERM OF FOURTEEN YEARS FROM FEBRUARY 1, 2008.

CONFIRMATION

Executive nomination confirmed by the Senate Tuesday, January 27, 2009:

FEDERAL RESERVE SYSTEM

DANIEL K. TARULLO, OF MASSACHUSETTS, TO BE A MEMBER OF THE BOARD OF GOVERNORS OF THE FEDERAL RESERVE SYSTEM FOR A TERM OF FOURTEEN YEARS FROM FEBRUARY 1, 2008.

EXTENSIONS OF REMARKS

UNI-CAPITOL WASHINGTON INTERNSHIP PROGRAM

HON. JOE COURTNEY

OF CONNECTICUT

IN THE HOUSE OF REPRESENTATIVES

Tuesday, January 27, 2009

Mr. COURTNEY. Madam Speaker, for decades the United States has worked closely with Australia on issues of great importance to our two nations. Australia has stood out among the international community as a friend of the United States and remains one of our closest cultural, economic and security partners. It is in this spirit that a program was launched 10 years ago to further foster those close ties. Since that time, the Uni-Capitol Washington Internship Program has delivered to the United States approximately 100 of Australia's best and brightest to serve as interns in a variety of Federal agencies and congressional offices.

During my first term in Congress, I was privileged to welcome Anthony "A.J." Bremmer to my office. Anthony was a welcome addition to my congressional staff and he quickly became an integral part of the team. When the opportunity arose again this winter to participate in the Uni-Capitol Washington Internship Program, I immediately agreed to welcome another Australian "ambassador." Jehane Sharah, much like A.J., has quickly become a valued part of our staff. Jehane has demonstrated a maturity and a curiosity beyond her college years. Prior to coming to the United States, Jehane worked for two members of the Australian parliament. This experience has helped her flourish during her short time in Washington. She has attended briefings, assisted constituents, and worked with my staff on a variety of research initiatives. Jehane also has an extensive background in communications, serving as a senior reporter for a newspaper in Canberra. As a result, she has assisted my communications director on a number of important projects. Jehane truly is an exceptional ambassador for the people of Australia.

Many of my colleagues have also been privileged to welcome students like Jehane to their offices. This year, 12 students from all across Australia are serving in offices here in Washington. They were drawn from seven Australian universities in four different states and the Australian Capital Territory. From my experience, it is clear that this program will help foster a new generation of understanding and shared experiences between our two countries. One example of this can be seen in a recent feature piece written by Jehane for the Sunday Canberra Times. The article details her experience at the inauguration of President Obama, an event that united not only the people of our country, but those around the world as well.

We in the United States and Australia owe a debt of gratitude to the program's founder, Eric Federing. Eric is a former senior House and Senate Congressional staffer who has worked tirelessly to bring students from Australia to the halls of Washington through his efforts at the Uni-Capitol Washington Internship Program. Madam Speaker, as Members of Congress we have a responsibility to our constituents back home and an opportunity to reach out to people across the globe. It is with that in mind that I would encourage all of my colleagues to open their doors to students from around the world so that they can share in our great democracy. Similarly, I would encourage American university students to travel abroad to learn about other cultures and governments and share their knowledge of our country. I ask my colleagues to join with me in recognizing the contributions of the Uni-Capitol Internship Program and to once more thank Jehane Sharah for her dedication and hard work.

HONORING DIANE GLASSER AND PAMELA BUSHNELL

HON. ROBERT WEXLER

OF FLORIDA

IN THE HOUSE OF REPRESENTATIVES

Tuesday, January 27, 2009

Mr. WEXLER. Madam Speaker, I rise today to honor Diane Glasser and Pamela Bushnell, both of whom were sworn in on November 10, 2008 as new commissioners of the city of Tamarac, Florida. As outstanding public servants and great friends of mine, I wish to recognize their accomplishments and congratulate them on their election as commissioners.

Diane Glasser, who was elected as commissioner of District 3, has been a leader in our community for many years. A resident of Kings Point in Tamarac, Diane has been a member of many important committees and task forces, including the Senior Citizens Involvement Task Force for the Broward County School Board, the Charter Board of Tamarac, the Tamarac Redistricting Committee, and the Broward County Human Rights Board. She was chairwoman of Tamarac's 25th anniversary celebration and has served as a four-time delegate to the Democratic National Convention, has been chosen a Democratic National Committeewoman since 1992, and has been First Vice Chair of the Florida Democratic Party since 2001. Her commitment to service and to the issues that matter to our constituency makes her a wonderful choice for commissioner, and I look forward to working with her in the years to come.

Pamela Bushnell, recently elected as commissioner of District 1, has also been a member of many local boards and is an active leader in our community. A resident and current president of Mainlands 1 & 2, Pamela has served on the boards of the City of Margate Committee for the Disabled; the Zoning Board of the town of Sutton, New Hampshire; and Schenectady County Community College; among many others. A volunteer at Calvary Chapel in Fort Lauderdale and a participant in the Broward Sheriff's Office Citizens Observer Patrol Program, Pamela will make a fine addition to Tamarac's government and will serve her district with the utmost distinction.

I look forward to working with Diane, Pamela, Mayor Beth Talabisco, and the rest of the Commission of the City of Tamarac, and wish Diane and Pamela only the best as they begin their service on the City Commission.

TRIBUTE TO SERGEANT MICHAEL DUNN

HON. FORTNEY PETE STARK

OF CALIFORNIA

IN THE HOUSE OF REPRESENTATIVES

Tuesday, January 27, 2009

Mr. STARK. Madam Speaker, I rise today to pay tribute to Sergeant Michael Dunn who retired from the Pleasanton Police Department on January 16, 2009 after 25 years of dedicated public service. Michael began his career as a Military Police Officer with the United States Marine Corps, where he served for over eight years. He was a member of the Los Angeles Police Department from 1982 until he was hired by the City of Pleasanton in 1985 and was promoted to the Rank of Sergeant in 1997.

During his career in police service, Michael was recognized on numerous occasions for his tenacity, professionalism and dedication to his work. He was an exemplary police officer and consistently gave more to the community than was asked of him. For example, he was instrumental in introducing a variety of programs to the community, including bicycle rodeos and a minor offense court to provide rehabilitation alternatives for juvenile offenders.

Michael worked a variety of assignments during his career, including Field Training Officer, DARE Officer, SWAT Officer, Traffic Motor Officer, Juvenile Detective, Rangemaster, Patrol Field Supervisor and Traffic Division Supervisor.

During his career, Michael experienced all that law enforcement offers, including capturing kidnapping and homicide suspects within hours of the crime, handling high profile child molestation investigations, assisting in controlling large scale public demonstrations, providing critical assistance during the Oakland Hills Firestorm, and saving the life of a young girl at a local restaurant. Michael always put the community and people first.

He possesses the critical qualities of an exemplary police officer and has been a positive influence to his colleagues in law enforcement. I commend Michael Dunn for his legacy of leadership and attention to detail, while always caring for those with whom he worked as well as the community at large.

PERSONAL EXPLANATION

HON. SAM GRAVES

OF MISSOURI

IN THE HOUSE OF REPRESENTATIVES

Tuesday, January 27, 2009

Mr. GRAVES. Madam Speaker, due to personal reasons, on Monday, January 26, 2009 I missed rollcall votes 30 and 31. Had I been present, I would have voted ''aye'' on those rollcall votes.

Thank you.

HARDROCK MINING AND RECLAMATION ACT OF 2009

HON. NICK J. RAHALL II

OF WEST VIRGINIA

IN THE HOUSE OF REPRESENTATIVES

Tuesday, January 27, 2009

Mr. RAHALL. Madam Speaker, last Friday, January 23, marks the passing of 137 years predecessors in the U.S. House of Representatives began to debate a bill to promote the development of mineral resources in the United States. One described the legislation as ''an experiment.''

On that day in January 1872, Representative Sargent from the State of California noted prior fierce debate in the House over a core element of the proposed mining law—that the Federal Government would be selling off the mineral rights of the United States rather than holding onto Federal ownership and imposing a royalty on future production. Representative Maynard from the State of Tennessee questioned whether the law might encourage speculation.

During an April 1872 debate in the U.S. Senate, Senator Cole from the State of California cautioned that the proposed mining law would allow a person to acquire large tracts of land ''which might be worth thousands of dollars per acre, perhaps millions . . .'' Senator Alcorn from the State of Mississippi acknowledged that he had never seen a gold mine in his life, while Senator Casserly, also from the State of California, warned of men who could not imagine the mineral deposits that ''lie to a fabulous extent in value between the Mississippi River and the Sierra Nevada.''

Ultimately, however, our predecessors believed the bill would ''meet with universal favor'' and would prevent litigation among mining claimants. They liked the idea that the bill might, as Representative Sargent hoped, ''bring large amounts of money into the Treasury of the United States, causing the miners to settle themselves permanently, and improve and establish homes, to go deeper in the earth, to dig further into the Hills . . . and build up their communities and States.''

And so, on May 10, 1872, Congress passed a law that encouraged people to go West, locate hardrock minerals and stake mining claims on Federal lands, and remove treasure troves of gold, silver, copper, and platinum from the public domain—for free.

The General Mining Law of 1872, or the ''experiment,'' as some of our predecessors named it, has endured for more than one and a third centuries—a total of 137 years.

Today, we can resoundingly assert that the experiment has lasted long enough.

Consider some of the impacts of the 1872 Mining Law:

According to the Congressional Budget Office, it allows the hardrock mining industry to remove $1 billion in precious metals every year from America's public lands, with no royalty payment or production fee to the Federal Government. By comparison, the coal, gas, and oil industries pay royalties of 8 percent to 18.75 percent.

According to the Department of the Interior, it has allowed mining claimants to buy American public's lands for $2.50–$5 an acre—lands that could easily be worth thousands or tens of thousands of dollars an acre today. Between 1994 and 2006, the U.S. government was forced to sell off more than 27,000 acres of public land holding valuable minerals for a pittance: $112,000.

Finally, as detailed in several Government Accountability Office reports, there have been instances where American taxpayers have paid a fortune to buy back the very lands we once gave away. From Central Idaho's Thunder Mountain, to Telluride, CO, to land outside Yellowstone National Park, millions of public and private dollars have been spent to reacquire thousands of acres of mining claims to protect public access for hunting, fishing, and other recreational opportunities.

Given our current economic crisis and the empty state of our national Treasury, it is ludicrous to be allowing this outmoded law to continue to exempt these lucrative mining activities from paying a fair return to the American people.

Beyond that, the 1872 Mining Law has allowed unscrupulous owners of hardrock mines to abandon hundreds of thousands of mines—and to require American taxpayers to foot the bill because there is no ''polluter-pays'' funding source, that is, a dedicated source of cleanup funding.

In 2007, the U.S. Forest Service estimated that, with its current annual abandoned mine cleanup budget of $15 million, it would take 370 years to complete its $5.5 billion in abandoned mine cleanup and safety mitigation work. In 2008, the inspector general of the Department of the Interior concluded that the public's health and safety is jeopardized by the unaddressed hazards posed by abandoned mines on Federal lands, including lands in the national parks. These old mines are not just eyesores, they are killers.

Today, I, along with Representatives MILLER, WAXMAN, MARKEY, BERMAN, GRIJALVA, HOLT, COSTA, CHRISTENSEN, STARK, KILDEE, HINCHEY, ESHOO, BLUMENAUER, KENNEDY, KIND, CAPPS, SCHIFF, HONDA, SALAZAR, TSONGAS, and CONNOLLY, introduce the Hardrock Mining and Reclamation Act of 2009. This legislation would end the financial and environmental abuses permitted by the 1872 Mining Law—archaic provisions that fly in the face of logic, and are not what taxpayers, sportsmen, conservationists, and western communities want or need.

This is the same bill that the House of Representatives passed by a bipartisan vote of 244–166 in 2007. It contains the same critical requirements, including:

An 8 percent royalty on production from future hardrock mines on public lands, and a 4 percent royalty from current mines.

A permanent end to the sell-off of public lands holding mineral resources.

The establishment of a clean-up fund for abandoned hardrock mine sites, prioritizing the riskiest ones.

Stronger review requirements, specifically for mines proposed near national parks, to help protect nationally significant areas such as Grand Canyon National Park, where miners had filed more than 1,100 claims within five miles of the park as of October 2008.

A threshold environmental standard for mining. This standard would not preclude mining, but it would make it possible to protect public lands if a mining proposal would irrevocably destroy other equally valuable resources.

Every year, the mining industry's fear of losing the sweet deal they currently enjoy on U.S. public lands leads, predictably, to baseless arguments that reform will cause a large scale departure of mining from American soil.

But we know there are many reasons companies will still want to mine for hardrock minerals in the United States. In an annual survey of metal mining and exploration companies published by the independent, Canadian-based Fraser Institute in 2008, Nevada ranked second out of 68 jurisdictions worldwide for overall policy attractiveness. Utah and Wyoming also made the top 10, and Arizona the top 20. The survey highlighted why the U.S. has appeal. Relative to many other countries the U.S. offers good enforcement, good infrastructure, a stable political system, minimal risk of terrorism or guerrilla groups ruining a mining investment—and a predictable regulatory system. Imposition of a Federal royalty—or fee—on production—will not change those powerful advantages.

We also know that the mining industry is clinging to an outdated boondoggle. Nearly every country in the world imposes a royalty—except the United States.

Industry might also trot out the argument that this bill undermines our Nation's secure access to the minerals we use in everyday products. Yet, import reliance alone is not a problem, as the National Research Council of the National Academies asserted in a recent study of critical minerals. Some minerals we have always imported in significant quantities, simply because the ones we need do not exist in mineable quantities here.

Furthermore, a 2008 Congressional Research Service report concluded that Mining Law reform legislation would not likely have much impact on domestic mining capacity or the import reliance of minerals like copper, uranium, platinum, and molybdenum, in large part because the vast majority of mining on federal lands is for gold—about 88 percent.

Today, our goals for mining policy are no longer what they were in 1872, when Representative Sargent hoped the mining law would encourage miners to ''dig deeper into the earth'' and ''further into the Hills.'' We can aspire to a law that does not merely promote mining, but one that also protects the other values of the hills themselves: clean water, wildlife, recreation, open space, and tourism. We should aim for a law that encourages mining but also encourages responsible corporate citizenship. And, a law that brings a fair return to the taxpayer. That would be a Mining Law worthy of the 21st—rather than the 19th—century.

REWARDING YOUTH MENTORSHIP IN THE NEW YEAR

HON. CHARLES B. RANGEL

OF NEW YORK

IN THE HOUSE OF REPRESENTATIVES

Tuesday, January 27, 2009

Mr. RANGEL. Madam Speaker, I rise today to commend anyone who dedicates his or her time to mentoring this country's impressionable youth—in any capacity, in all capacities. There is no greater gift than the selfless giving of one's time and energies to the emotional, scholastic, and moral development of another. We can all trace back in our histories that one person or group of people who set us on the straight and narrow, from whom we drew inspiration, motivation, and a sense of purpose.

For far too long, wayward youth have had few role models to emulate, few adults to guide them in an otherwise confusing, self-deprecating, and turbulent moment in their lives. For far too long, the corrosive influence of drugs, domestic abuse, academic failure, and delinquency have instilled in our youth a hopelessness that permeates far into their adolescence and even adulthood. These honorable many, who have taken the charge of leading these youngsters to the road of successes, deserve our praise and our respect, and I am thrilled to support naming this month of January ''National Mentoring Month'' in an attempt to do just that.

Three million youngsters are currently benefitting from a mentoring relationship, but that just isn't enough. Five times as many kids are in urgent need of guidance, and it is up to us to demonstrably reward mentors for their vows of time, commitment, and effort. A mentorship is not a task taken up lightly or without the resolve to work diligently, generously, and openly—but it provides its participants such innumerable, intrinsic rewards that it becomes a challenge, and pleasure, certainly worthy of fulfilling.

May mentors across this great Nation feel proud of the work they are doing, and may others take note of their tremendous example and develop a mentoring relationship of their own.

THE ST. PETERSBURG TIMES CELEBRATES 125 YEARS OF PUBLISHING EXCELLENCE

HON. C. W. BILL YOUNG

OF FLORIDA

IN THE HOUSE OF REPRESENTATIVES

Tuesday, January 27, 2009

Mr. YOUNG of Florida. Madam Speaker, The St. Petersburg Times, my hometown newspaper, began its 125th year of publishing this month.

Starting from humble beginings in the back of a Dunedin, Florida drugstore, 3 people—a doctor, dentist and printer—turned out 480 copies of the newpaper's first edition. Today, The Times is Florida's most read newspaper.

Following my remarks, I will include for the benefit of my colleagues, a column by Paul Tash, the Editor, Chairman and Chief Executive Officer of The St. Petersburg Times, commemorating the newspaper's growth and plans to celebrate its history over the next year.

Madam Speaker, The St. Petersburg Times has dutifully recorded the history of our community these past 125 years, and as Paul Tash writes, ''sharing in the success, suffering in the setbacks.'' Please join me in thanking all those past and present employees of The Times who have brought the news to our doorstep, in good times and bad, and even during the most trying of times.

[From the St. Petersburg Times, Jan. 14, 2009]

OUR COMMON HISTORY: TAMPA BAY AND ITS TIMES

(By Paul Tash, Editor, Chairman, CEO)

This year the St. Petersburg Times turns 125 years old. To mark the occasion, we are starting a weekly feature of local history, drawn from the newspaper's own pages. In their origins, neither the newspaper nor its community amounted to much.

The Times started out as a weekly in July of 1884. In the back room of a drugstore in Dunedin, three men—a doctor, a dentist and a printer—teamed up to produce the first edition. The total circulation was 480 copies. As my colleague Rob Hooker once wrote, ''Their paper was like the community—small, humble and faced with an uncertain future.''

Over the years, however, the frontier villages scattered around Tampa Bay grew together into a vibrant, dynamic metropolitan region, and the Times grew with it.

Today it is Florida's favorite newspaper, with the largest circulation in the state. Nelson Poynter, a generous and far-sighted owner, protected its independence, and three decades after he died, the Times remains rooted in this community, not part of a chain or conglomerate.

There have been rough patches along the way. Back in the 1930s—the last time a real estate boom collapsed into depression—St. Petersburg city government defaulted on millions of dollars in bond payments, and the public schools started charging tuition. On the outskirts of town, a sign went up warning visitors, ''Do Not Come Here Seeking Work.''

Those hard times also hit the Times. Advertising dropped by two-thirds. Since they had no cash, merchants paid their bills with vouchers, which the newspaper parceled out to employees as pay. At one point, the news staff dropped to 15 people, and the paper itself dwindled to eight pages.

But over the long term, the trend lines have kept climbing. Compare just two scenes.

During the World Series in 1924, a crowd gathered outside the Times' offices while an editor with a megaphone called out the play-by-play, coming by telegraph into the newsroom. Eighty-four years later and just a few blocks away, 40,000 fans gathered to watch the town's own team playing in the World Series.

For a century and a quarter, the St. Petersburg Times has recorded the unfolding story of our region, sharing in its success, suffering in the setbacks. Now we celebrate our common history by offering these slices of it. And even in this difficult stretch, we are betting that Tampa Bay's best days lie ahead. That is one of history's lessons.

IN HONOR OF GERTRUDE PINTZ

HON. DENNIS J. KUCINICH

OF OHIO

IN THE HOUSE OF REPRESENTATIVES

Tuesday, January 27, 2009

Mr. KUCINICH. Madam Speaker, I rise today in honor of Mrs. Gertrude Pintz, upon the recent celebration of her 100th birthday.

Gertrude Pintz was born on December 29th, 1908 in Austria-Hungary. She has been blessed over her lifetime with strength, joy, her family and friends. She is known for seeing only the good in others and beauty in life. Mrs. Pintz lives every day with a grateful heart, warm smile and positive outlook.

Mrs. Pintz married the love of her life, Sebastian, and together they raised 3 sons—Sebastian, Adam and the late Henry. She remains close with her sons, 7 grandchildren and 10 great-grandchildren. As the matriarch of her family, Mrs. Pintz hosted the family's annual Thanksgiving dinner at her Cleveland home, continuing this tradition until the age of 88. In her early seventies, following the passing of her beloved husband, Mrs. Pintz embarked on pursing her artistic talents. She enrolled in a four year art school, where she studied oil painting. To this day, her artwork adorns the homes of numerous family members and friends.

Madam Speaker and colleagues, please join me in honor of Mrs. Gertrude Pintz upon the joyous occasion of her 100th birthday. Her love of family, love of life and youthful soul all serve as an inspirational example for all of us to follow. I wish Mrs. Pintz an abundance of peace, health and happiness today, and throughout the years to come.

JIM RICE'S ELECTION TO THE BASEBALL HALL OF FAME

HON. NIKI TSONGAS

OF MASSACHUSETTS

IN THE HOUSE OF REPRESENTATIVES

Tuesday, January 27, 2009

Ms. TSONGAS. Madam Speaker, I rise today to honor Jim Rice of Andover, MA for his election into the Baseball Hall of Fame.

Regarded as one of the most dominant hitters to have played the game, Rice was a 1978 American League Most Valuable Player and an eight-time All Star. With a .298 career batting average, Rice hit 382 homeruns and 1,451 RBIs during his 16 years in Major League Baseball. Having spent his entire career in Boston, Rice becomes the fourth Hall of Fame player to have spent his entire career with the Red Sox.

Rice has also been an active member of his community, contributing his time and effort to several charitable organizations in Massachusetts. In 1979 he was named an honorary chairman of the Jimmy Fund, which supports cancer research and care at the Dana-Farber Institute in Boston. He was also recognized by the Jimmy Fund in 1992 with the Jimmy Award, which honors individuals who have shown ''exceptional devotion'' to cancer research. Some of his other charitable activities include working with the Neurofibromatosis Foundation of New England and raising money for toy drives for local homeless children.

Since retiring in 1989, Rice has continued his commitment to the Red Sox, working as a hitting coach and instructor. Rice also serves as a popular studio analyst on the Red Sox pre- and post-game shows for NESN.

Rice and his wife, Corine, have lived in Andover since 1975 with their two children, Carissa and Chancey.

I congratulate him for his election to the Baseball Hall of Fame and for his notable achievements throughout his career.

PERSONAL EXPLANATION

HON. JEFF MILLER

OF FLORIDA

IN THE HOUSE OF REPRESENTATIVES

Tuesday, January 27, 2009

Mr. MILLER of Florida. Madam Speaker, rollcall vote No. 30 was a suspension vote on agreeing to the resolution H. Res. 31—A resolution expressing support for designation of January 28, 2009, as "National Data Privacy Day." If present, I would have voted rollcall vote No. 30—"yea."

Rollcall vote no. 31 was a suspension vote on agreeing to the resolution H. Res. 84—A resolution honoring the heroic actions of the pilot, crew, and rescuers of US Airways Flight 1549. If present, I would have voted rollcall vote No. 31—"yea."

THE CONGRESSIONAL ANTI-SLAVERY CHAMPION OF 2008

HON. CAROLYN B. MALONEY

OF NEW YORK

IN THE HOUSE OF REPRESENTATIVES

Tuesday, January 27, 2009

Mrs. MALONEY. Madam Speaker, I rise today to read into the CONGRESSIONAL RECORD remarks made by Dorchen Leidholdt, Director of Center for Battered Women's Legal Services at Sanctuary for Families, regarding my selection as the Congressional Anti-Slavery Champion of 2008:

On behalf of the Coalition Against Trafficking in Women, an international NGO fighting human trafficking since 1988, and Sanctuary for Families, a New York City-based provider of services to victims of domestic violence, I am delighted to join other leaders of the New York State Anti-Trafficking Coalition in saluting Congresswoman Carolyn Maloney, the Congressional Anti-Slavery Champion of 2008. Congresswoman Maloney's enduring and dedicated advocacy on behalf of victims of human trafficking is unparalleled in the halls of Congress. Over and over she has demonstrated her profound understanding of the harm of human trafficking, gleaned primarily from her compassionate, respectful attention to the testimony of survivors, and her acute awareness of what it takes to stop this horrific crime and severe human rights violation.

Thanks to Congresswoman Maloney's visionary leadership, it is widely recognized that stopping trafficking requires both strong measures to curtail the demand for prostitution and well-crafted criminal provisions that enable prosecutors to put traffickers out of business—permanently.

Ken Franzblau has focused on the critically important role Congresswoman Maloney has played in the drafting and passage of the William Wilberforce Trafficking Victims Protection Reauthorization Act of 2008, which enhances protections to victims while strengthening the ability of prosecutors to hold traffickers accountable. Thanks to Congresswoman Maloney's inspiring leadership, the 2008 Reauthorization continues the important advances made by the previous two Reauthorizations.

While we celebrate the achievements of the 2008 Reauthorization, our task of strengthening our federal anti-trafficking law is not over; critically important work remains to be done in two important areas. Through her exemplary work in the House of Representatives, in the draft that she shepherded there to close to unanimous approval, Congresswoman Maloney, has pointed the way to two critically important goals that lie ahead. First, the obstacles of proving force, fraud, or coercion, while eased under specific circumstances by the 2008 Reauthorization, continue to stymie the effective prosecution of many sex traffickers. Going forward we must ensure that sex traffickers are never provided a loophole, because their trafficking was not provably 'severe.'

Second, sex tour operators fuel the demand for sex trafficking worldwide by sending planeloads of affluent American men to the poorest countries in the world to buy the bodies of women and girls in prostitution. While Congresswoman Maloney succeeded in including such a provision in New York State's landmark anti-trafficking law (the strongest state anti-trafficking law in the nation), and saw to it that the House draft reauthorization contained it, the compromise that resulted in the 2008 Reauthorization does not include a provision criminalizing sex tour operators.

We must ensure that the next TVPA Reauthorization criminalizes sex trafficking per se and makes it a federal crime to operate a sex tour business. With Congresswoman Maloney leading the campaign, I am confident that we will accomplish these two remaining goals.

Congresswoman Maloney, on behalf of the Coalition Against Trafficking in Women and Sanctuary for Families, our congratulations on receiving this well-deserved recognition and our heartfelt thanks for your invaluable leadership in the battle to end human trafficking.

IN MEMORY OF ROGER BONE

HON. BOB ETHERIDGE

OF NORTH CAROLINA

IN THE HOUSE OF REPRESENTATIVES

Tuesday, January 27, 2009

Mr. ETHERIDGE. Madam Speaker, I rise today in recognition of the life and achievements of Roger Bone, a former North Carolina legislator and a good friend to me and to all of Nash County. He died on January 25, 2009, after battling cancer for many months. He will be sorely missed.

Roger and I shared parallel lives in many ways. He grew up on a tobacco farm, like I did, and like me was first elected to the state legislature in 1978. It was a pleasure to have him as a friend and partner in my early legislative career.

He quickly rose through the General Assembly to become chairman of the House Banks and Thrift Institutions Committee, where he served with distinction until 1981. In 1987, he started his own lobbying business, Bone and Associates, which has been among the most influential firms in North Carolina. Last year, the N.C. Center for Public Policy recognized him as the number one lobbyist in the state, and he was also one of the most well-liked. People knew they could trust Roger, and his influence was a credit to his honesty, hard work, and easy humor.

Last June, Roger received the Order of the Long Lead Pine, the highest honor our state gives to our native sons and daughters. I can think of no one who is more deserving of North Carolina's respect and admiration.

Roger's family shared his love of Nash County and commitment to public service with his family. His lovely wife Reba was an elementary and middle school principal, and his son, Fred, was his partner in Bone and Associates. In addition to his wife and son, he is survived by two grandsons, Jacob and Caleb; his father, Winslow; and two brothers and a sister.

It was my honor to be asked to offer the following eulogy at the funeral of this great man.

It is an honor to take part in this memorial service for my good friend Roger. I wish I could be there today with you to honor and remember Roger. However, today in the House of Representatives we are taking a critical vote to help our economy recover from its current downturn, and I will he thinking of Roger as I take today's votes. I will be thinking of his love of politics and legislation, and his many years in the arena, and I know he would understand, and Reba and his family understand, but I still wish I could be with you.

There is not a person here who doesn't know how Roger Bone loved Nash County and loved serving his community in the legislature. He was not only a student of politics, but he was a practitioner all his life. I remember that when he gave Reba her engagement ring, they didn't celebrate with dinner, they went to watch the General Assembly, so you know that politics was really in his bones.

As most of you know, he was ranked the top lobbyist in North Carolina last year, and he was so successful because he truly cared about people. In his work, he made friends, not enemies; knowing that those who were not with him today could be his partner tomorrow. Roger was a good friend to me, as he was to many of you. He could be calm in the midst of a storm. No matter what—the commotion of business, the furor of political debate—he was always steady, always smiling, always a reliable partner and friend.

I count it a distinct blessing that we were freshman members of the General Assembly together and I will never forget that year. In 1979, we were part of a group of "Liston's Boys": Roger, myself, Martin Lancaster, Paul Pulley, and others. As roommates at the Brownstone Hotel, Roger and I spent many late hours talking about our new roles and the politics of the House. My fondest memories were the early mornings. Even though we both grew up on a farm, Roger never appreciated my getting up early in the morning to go running. As I was heading out, my stirring would wake up Roger while he was still trying to finish his sleep. Then, I would wake him up again when I got back.

However, the work ethic he gained from farm life served him well in the General Assembly and in the rest of his life. His positive attitude contributed to his success in everything he did. Everyone who knew him liked him, and everyone who worked with him liked him as well. It says a lot about him that he could always laugh at himself, and in the toughest of times if you can laugh you'll be alright.

While this is a sad day for all of us, it would be wise of us to remember the words of the great artist, Leonardo da Vinci, who said on the death of a friend, "As a well-spent day brings happy sleep, so a life well used brings a happy death." Roger used his life well, and Nash County, and the State of North Carolina are better due to his efforts. I am better because I knew him, as are we all. Thank you for allowing me to be part of this remembrance.

DANTE ''GLUEFINGERS'' LAVELLI

HON. STEVEN C. LaTOURETTE

OF OHIO

IN THE HOUSE OF REPRESENTATIVES

Tuesday, January 27, 2009

Mr. LATOURETTE. Madam Speaker, when you were a Cleveland Browns fan, there is no halfway. To be a Browns fan requires a lifelong devotion, an unflinching loyalty, a reverence for all those who came before. As a Browns fan, you come to accept that your loyalty will be tested often, and in ways you cannot fathom—the Drive, the Fumble, the stealth, dark-of-night move to Baltimore. Yet, the loyalty never wavers—mostly because the rewards and the memories forged on Sunday afternoons between fathers, sons, friends and neighbors are so powerful—even when they are few and far between.

One of pillars of the Browns recently passed: Dante ''Glue Fingers'' Lavelli. He played with Otto Graham, Marion Motley and Lou ''The Toe'' Groza and was coached by the legendary Paul Brown. He led the team to seven championships in the 1940s and 1950s. He was a gridiron star in his hometown of Hudson, OH, which is part of my district. He led his high school team to three straight undefeated seasons.

Dante Lavelli was a World War II Army veteran who missed most of college to defend our Nation, trading the Horseshoe at Ohio State for the beaches of Normandy. The famed receiver—nicknamed ''Gluefingers'' because he never dropped the ball—was enshrined in the Pro Football Hall of Fame in Canton more than 30 years ago, where his 386 catches for 6,488 yards and 62 touchdowns are part of football lore. He loved one woman for more than 60 years, his beloved wife, Joy. He is survived by his wife, two daughters, a son, and four grandchildren, including Aaron Bill, who worked for me in Washington and now attends law school.

I want to submit into the RECORD a column written by renowned Cleveland Plain Dealer sportswriter Terry Pluto, who so eloquently captured the magic of a man who meant so much to his family, his community, the Browns and the NFL. The article was published on January 25, 2009, the day after Lavelli's funeral in Hudson, OH.

He was a man who put salt on almost everything, especially a salad. He drank a huge can of ice tea each night and would drive his grandchildren around, forcing them to listen to polka music in the car.

Dante Lavelli was so much more than a Hall of Fame receiver for the Cleveland Browns, as family and friends made clear during his funeral at St. Mary's Church in Hudson on Saturday.

Aaron Bill walked up to the pulpit with a comb as he prepared to talk about his grandfather, who died Tuesday at the age of 85.

''He was always trying to comb my hair,'' said Bill. ''He'd tell me that my sideburns were too long, that I needed a haircut. He wanted me to pull up my pants even when they were as high as they could go.''

Yes, he's Dante Lavelli, ''Gluefingers.'' He was Dante Lavelli, Mr. ''Clutch.'' He was Dante Lavelli, the receiver's receiver, a player whose football personality was opposite to so many of the self-absorbed types who play the position today.

He's the man ''who never dropped a pass that he touched, not in practices or games.'' So said great Browns coach Paul Brown at Lavelli's Hall of Fame induction in 1975. He also never did a celebration dance in the end zone, because he had been there before—a total of 62 times in his 11-year Browns career.

Lavelli caught all but 20 of his 386 receptions from Hall of Famer Otto Graham. He also played games in 1956, his final season, with a notebook and pencil tucked inside his pads so he could sign up opponents after the game to join the new Players Association that he helped assemble.

''When my father walked, the floor shook,'' said his son, Edward Lavelli.

Or so it seemed.

He led Hudson High to three undefeated seasons in the late 1930s.

He played only three games at Ohio State before joining the Army, where he was in the 28th Infantry.

The flag on his casket was a reminder that Lavelli was part of the group of men who landed at Omaha Beach. He was in Bastogne during the Battle of the Bulge in the winter of 1944–45, where the Allies lost an estimated 81,000 men.

In an interview with Scout.com, Lavelli said at one point in the fighting, ''I spent three days in a foxhole.'' He also said he prayed the ''Our Father'' constantly for three days.

After his football career, Lavelli had ownership interest in a furniture store, in two bowling alleys and other business ventures. He had been the oldest living member of the Pro Football Hall of Fame. He pushed for recognition of the 1948 Browns for their undefeated season, which had been dismissed by the NFL because it happened in the old All-American Football Conference.

As Father John Betters said in his homily, ''Dante Lavelli truly was one of America's Greatest Generation.''

Lavelli was married for nearly 60 years to Joy, and spent much of his later life in Westlake. His family members mentioned how he loved to win at anything, from gin rummy to golf to negotiating to buy a car.

Oldest daughter Lucinda said her father often offered this advice: ''Save your money and get some rest.''

Or as grandson Aaron Bill said, looking up and speaking to his deceased grandfather, ''I love you very much, and I'll miss talking to you every day. And don't worry, my shoes aren't untied. I wore loafers.''

IN RECOGNITION OF ARMY STAFF SERGEANT CARLO M. ROBINSON

HON. MIKE ROSS

OF ARKANSAS

IN THE HOUSE OF REPRESENTATIVES

Tuesday, January 27, 2009

Mr. ROSS. Madam Speaker, I rise today to recognize a true American hero. On January 17, 2009, our Nation and our state lost a brave soldier when Army Staff Sergeant Carlo Montel Robinson died in Bagram, Afghanistan, in support of Operation Enduring Freedom. He died of wounds sustained in Kabul, Afghanistan, when a vehicle-borne improvised explosive device detonated near his vehicle.

Staff Sergeant Robinson grew up in Hope, Arkansas—a tight-knit community where I had the privilege of growing up as well. Although I never had the honor to meet Staff Sergeant Robinson, on behalf of the community of Hope, I extend my utmost condolences to his family, friends and all who knew him for this devasting loss.

Staff Sergeant Robinson was assigned to the 1st Maneuver Enhancement Brigade at Fort Polk, La., and carried out his duties with pride in his country and without reservation. Staff Sergeant Robinson spent the last thirteen years in the U.S. Army where he served with distinction and dedication, epitomizing a true patriot.

My deepest thoughts and prayers are with his daughters, Carneshia and Destiny, son, Da'karia, mother, Jennifer, grandmother, Martha, and the rest of his family, friends and loved ones during this difficult time.

Today, I ask all members of Congress to join me as we honor the life of Staff Sergeant Carlo Robinson and his legacy, and all those men and women in our Armed Forces who gave the ultimate sacrifice in service to their country.

INTRODUCTION OF THE CITIZENS INVOLVEMENT IN CAMPAIGNS (CIVIC) ACT

HON. THOMAS E. PETRI

OF WISCONSIN

IN THE HOUSE OF REPRESENTATIVES

Tuesday, January 27, 2009

Mr. PETRI. Madam Speaker, today, Representative PAUL KANJORSKI and I are introducing bipartisan legislation to establish a program of limited tax credits and tax deductions to get average Americans more involved in the political process. This bill, the Citizens Involvement in Campaigns (CIVIC) Act, will broaden the base of political contributors and limit the influence of big money donors in federal elections.

We need to take a fresh look at innovative approaches to campaign finance reform, with special attention paid to ideas that encourage, and not restrict, greater participation in our campaigns. Toward this end, I have been advocating tax credits and deductions for small political contributions for many years. An updated tax credit system would be a simple and effective means of balancing the influence of big money donors and bringing individual contributors back to our campaigns. The impact of this counterweight will reduce the burden of raising money, as well as the appearance of impropriety that accompanies the money chase.

Most would agree that the ideal way to finance political campaigns is through a broad base of donors. But, as we are all painfully aware, the economic realities of modern-day campaigning lead many candidates to focus most of their efforts on collecting funds from a few large donors. This reality alienates many Americans from the political process.

The concept of empowering small donors is not a new idea. For example, from 1972 to 1986, the federal government offered a tax credit for small political contributions. This provided an incentive for average Americans to contribute to campaigns in small amounts while simultaneously encouraging politicians to solicit donations from a larger pool of contributors. Currently, six geographically and politically diverse states (Oregon, Minnesota, Ohio, Virginia, Arkansas, and Arizona) offer their own tax credits for political contributions. These state-level credits vary in many respects, but all share the same goal of encouraging average Americans to become more involved.

The CIVIC Act can begin the process of building this counterweight for federal elections. This bill is designed to encourage Americans who ordinarily do not get involved in politics beyond casting a vote every two or four years (that is, if they bother to vote at all) to become more active participants in our political process.

The CIVIC Act will reestablish and update the discontinued federal tax credit. Taxpayers can choose between a 100 percent tax credit for political contributions to federal candidates or national political parties (limited to $200 per taxable year), or a 100 percent tax deduction (limited to $600 per taxable year). Both limits, of course, are doubled for joint returns. As long as political parties and candidates promote the existence of these credits, the program can have a real impact and aid in making elections more grassroots affairs than they are today.

A limited tax credit for political contributions can be a bipartisan, cost-efficient method for helping balance the influence of large money donors in the American electoral process. Instead of driving away most Americans from participation in political life, we can offer an invitation for citizens to play a larger role in political campaigns. It seems to me that this will be a fruitful way to clean up our system, while at the same time convincing Americans that they actually have a meaningful stake in elections.

A TRIBUTE TO SAN BERNARDINO COUNTY SHERIFF GARY PENROD

HON. JERRY LEWIS

OF CALIFORNIA

IN THE HOUSE OF REPRESENTATIVES

Tuesday, January 27, 2009

Mr. LEWIS of California. Madam Speaker, I rise today to pay tribute to one of the most respected public servants in my district, San Bernardino County Sheriff Gary Penrod, who is stepping down this month after nearly 40 years protecting our citizens.

A Southern California native, Gary Stephen Penrod graduated from Redlands Schools, worked as a U.S. Forest Service firefighter and is a U.S. Army veteran. But his life has been in law enforcement, and he has served in the sheriff's department since being deputized in 1971.

Sheriff Penrod spent time on patrol in most of the vast desert and mountain reaches of San Bernardino County, and received regular promotions over the years. When the city of Hesperia incorporated in 1988, the sheriff's department contracted to provide police services, and Gary Penrod became the first Hesperia Police Chief.

By the time our former sheriff retired in 1994, Gary Penrod had been promoted to Deputy Chief. He easily defeated six other candidates and was sworn in as sheriff on Jan. 3, 1995. He has been reelected to three more four-year terms.

When he first took office in 1994, San Bernardino County had a population of 774,000 people. Today, more than 2 million people live in the sheriff's jurisdiction. Deputies responded to 617,000 calls in 1994, last year they had more than 1.2 million.

Mr. Speaker, San Bernardino County was known in the past for having some colorful characters as our top law enforcer. Sheriff Penrod has had a reputation for quiet leadership, for helping the department achieve high recognition for professionalism, and for encouraging his deputies to stay on the cutting edge as law enforcement has modernized.

During his tenure, Sheriff Penrod implemented community based policing and many innovative programs and staffing enhancements including: Crime Free Multi-Housing, Operation CleanSWEEP, Public Safety Internship Academy, Marijuana Eradication Team, Methamphetamine Lab Task Force, Narcotics Special Enforcement Teams and Gang Enforcement Units. Sheriff Penrod oversaw the merger with the San Bernardino Marshall's office and in 2005 he became Sheriff-Coroner of San Bernardino County.

A highly respected leader, Sheriff Penrod is a member of San Bernardino County Children's Network, San Bernardino County Chiefs of Police and Sheriff's Association, California Police Officers' Association, International Association of Chiefs of Police, National Sheriffs' Association, Western State Sheriffs' Association, California State Coroners' Association, and the Governor's Corrections Standard Authority. He is a past president of the California State Sheriffs' Association.

Although he is respected for his professionalism and progressive thinking, among his deputies Sheriff Penrod is most known as someone who always cares for the members of his department. Wounded deputies have often told of finding the sheriff by their bedside, personally promising to help them and their families.

Madam Speaker, after 38 years as a law enforcement officer, Sheriff Penrod has decided to retire to spend more time with his wife Nancy and at his hobbies—horseback riding, raising cattle, fishing, camping and snow skiing. Please join me in thanking him for his years of service, and wishing him and Nancy success in all of their future endeavors.

RECOGNITION OF STEELTON-HIGHSPIRE HIGH SCHOOL FOOTBALL TEAM FOR THEIR SECOND CONSECUTIVE PIAA SINGLE A CHAMPIONSHIP

HON. TIM HOLDEN

OF PENNSYLVANIA

IN THE HOUSE OF REPRESENTATIVES

Tuesday, January 27, 2009

Mr. HOLDEN. Mr. Speaker, I rise today to recognize the 2008–2009 Steelton-Highspire Steamrollers, from Steelton, PA in my congressional district. They completed an undefeated season with a victory over Clairton High School to become PIAA Single A State football champions.

The Steamrollers certainly had a season to remember setting school records in wins, points, and games played. They established the longest winning streak in school history with 25 wins dating back to last year. The Rollers capped off the season by winning their fourth straight District 3 title and their second consecutive PIAA State Single A Championship.

The Rollers were led by a group of seniors who will go down in Steelton-Highspire history as the most successful class in the great history of Steamroller football. In 4 years this group compiled a record of 51 wins and 9 losses winning the district title all 4 years and two state championships. The offense was led by senior tailback Jeremiah Young, who ran for 2,812 yards and 30 touchdowns on 283 carries. Mr. Young broke the State's all-time career rushing record and stands seventh all time in the Nation with 9,027 yards.

I congratulate Steelton-Highspire High School and Coach Rob Deibler on a season to remember.

HONORING THOMAS G. LANDAAL

HON. DALE E. KILDEE

OF MICHIGAN

IN THE HOUSE OF REPRESENTATIVES

Tuesday, January 27, 2009

Mr. KILDEE. Madam Speaker, I rise today to pay tribute to the life of Thomas G. Landaal. Sadly, Mr. Landaal passed away on December 5, 2007, at the age of 53, and the International Corrugated Packaging Foundation will posthumously induct Tom Landaal into their Circle of Distinguished Leaders on March 31st in Washington, DC at the joint meetings of the Fibre Box Association and the Association of Corrugated Converters. Mr. Landaal will be the ninth person to be inducted into this circle.

Born in Hinsdale, IL, Tom, as he was known to his friends, relocated to Flint, MI as a child. After graduating from Powers Catholic High School he obtained two degrees from Ferris State University, an AS degree in Building Construction and a BS degree in Business Administration. In 1979 he assumed a managerial role in the family business, Landaal Packaging Systems. As president of Landaal Packaging Systems he went on to become a leader in the packaging industry. He was affiliated with the International Corrugated Case Association in Paris, the Federation Europeenne des Fabricants de Carton Ondule based in Paris, the Sales and Marketing Executives and Technical Association Pulp and Paper Industry, as well as the International Corrugated Packaging Foundation. Tom served on the Board of Directors of the Fibre Box Association and the Independent Corrugated Converters Association. He was chair of the Fibre Box Association's Independent Sheet Plant Committee and served as the Fibre Box Association's representative on the Board of the Independent Corrugated Converters Association for many years.

In addition to his work in packaging industry, Tom Landaal was very active in his community and is sorely missed. He held leadership roles with the Food Bank of Eastern Michigan, Hurley Medical Center, Hurley Foundation, Flint Classroom Support Fund, Hero of Flint, Burton Business Association, Burton Economic Development Corporation, Friends of Sloan Museum, Flint College and Cultural Center, Incorporated, Goodwill Industries of Mid-Michigan, Heartland Manor, Information Services of Michigan, Michigan State University, University Affiliated Hospitals of Flint, the Industrial Mutual Association, the Genesee Regional Chamber of Commerce, Michigan Manufacturers Association, and Powers Alumni Association. He belonged to several golf and ski groups including the National Ski Patrol.

Madam Speaker, the International Corrugated Packaging Foundation's Circle of Distinguished Leaders was instituted to honor

those persons that have brought vision, creativity, and energy to the promotion and advancement of the packaging industry. Tom Landaal was an advocate for improved technology and safe working conditions. This recognition by his peers is a fitting tribute to his enthusiasm for designing the best system to deliver the best product to his customers and to ensure the packaging industry remained on the cutting edge for fulfilling customer needs. I congratulate the International Corrugated Packaging Foundation for their selection of Thomas Landaal for this honor and hope his example will inspire the next generation to continue his work. I ask the House of Representatives to rise with me today and applaud the life and work of my good friend, Thomas Landaal.

YEAR OF THE OX

HON. ADAM B. SCHIFF

OF CALIFORNIA

IN THE HOUSE OF REPRESENTATIVES

Tuesday, January 27, 2009

Mr. SCHIFF. Madam Speaker, I rise today to extend my best wishes to the millions of Asian Americans who are celebrating the Lunar New Year, which ushers in the Year of the Ox. Representing one of the largest Asian American populations in Southern California, I have had the distinct privilege in joining many of my Asian American constituents to commemorate this historic tradition.

The communities of Alhambra, San Gabriel, and Monterey Park have organized events and festivities for families to gather and celebrate the Year of the Ox. I am also delighted that this will be the 110th year that the Annual Golden Dragon Lunar New Year Parade, hosted by the Chinese Chamber of Commerce of Los Angeles, will be bringing floats, marching bands, and various forms of entertainment to over 100,000 people. From parades to festivals, all will be able to enjoy the colorful, rich traditions that have been observed by many Asian cultures for centuries.

I wish you all the best in the Year of the Ox.

INTRODUCTION OF THE SOCIAL SECURITY AND MEDICARE IMPROVED BURN INJURY TREATMENT ACCESS ACT OF 2009

HON. RICHARD E. NEAL

OF MASSACHUSETTS

IN THE HOUSE OF REPRESENTATIVES

Tuesday, January 27, 2009

Mr. NEAL of Massachusetts. Madam Speaker, I rise today to introduce the Social Security and Medicare Improved Burn Injury Treatment Access Act of 2009. This legislation provides a waiver of the 24-month waiting period now required before an uninsured individual becomes eligible for Medicare coverage for disabling burn injuries, as well as the five-month waiting period for Social Security disability benefits.

Each year an estimated 500,000 people are treated for burn injuries. Of these 500,000 injuries, about 40,000 require hospitalization. Fire and burn deaths average about 4,000 per year.

Burn care is highly specialized. While there are thousands of trauma centers in the United States, there are only 125 burn centers with a total burn-bed capacity of just over 1,800. These specialized burn centers treat about 25,000 patients annually, or on average, 200 admissions per year for each center. U.S. hospitals without burn centers treat the remaining patients and average less than three burn admissions per year.

Medical care for serious burn injuries is very expensive, which places a great financial strain on burn centers, about 40 percent of whose patients are uninsured. Because of these financial challenges, burn centers in Pennsylvania, Mississippi, Iowa and South Carolina have closed in just the past two years.

This is occurring at a time when the Federal Government is asking burn centers to expand their capacity to deal with mass casualty scenarios. The Departments of Health and Human Services and Homeland Security have included burn centers in the Critical Benchmark Surge Capacity Criteria in the funding continuation requirements for State plans administered through the Health Resources and Services Administration (HRSA). HSS, in conjunction with the American Burn Association, has created a real-time, web-based burn bed capacity system in the national emergency preparedness center and funded Advanced Burn Life Support (ABLS) and clinical, on-site burn nurse training for 200 public health service nurses as a reserve capacity for potential mass burn casualty incidents, as well as supporting more than 20 ABLS courses with over 600 first-responders in 10 key areas of the country.

The 9/11 terrorist attacks on New York City and Washington, DC, and major accidents like the Rhode Island nightclub fire and North Carolina chemical plant explosions demonstrate the substantial number of burn injuries that can result from such events. Over one-third of those hospitalized in New York on 9/11 had severe burn injuries. The Department of Homeland Security has recognized that there would be mass burn casualties in terrorist acts, and there is a need for appropriate preparedness activities. For example, if the United States should suffer further terrorist attacks using explosions, incendiary devices or chemical weapons, most victims would suffer severe burn injuries.

Even a relatively modest number of burn injuries can consume large segments of the Nation's burn bed capacity. For example, the victims of the Rhode Island nightclub fire absorbed the burn bed capacity of most of the northern East Coast of the United States. Mass burn casualties that reach into the hundreds or thousands would strain the system to the breaking point.

It is clear that burn centers are a national resource and a critical link to public health emergency preparedness. Medicare coverage for serious, disabling burn injuries would enable these burn centers to remain financially viable and preserve an essential component of our public health emergency infrastructure.

This legislation follows an approach already taken with respect to End Stage Renal Disease (ESRD) and amyotrophic lateral sclerosis (ALS or Lou Gehrig's disease), both of which result in waivers of the 24-month waiting period for Medicare eligibility. While these 2 diseases tend to be progressive in nature, the very initial phase of a serious burn injury is when things are most acute.

This legislation is similar to H.R. 685, which I introduced in the 110th Congress, except for the inclusion of some important cost containment provisions. No one with either public or private insurance at the time of their burn injury will be eligible for the 24-month waiver. Nor will State public insurance programs be permitted to restrict coverage for burn patients so as to place the burden solely on Medicare. The legislation also requires that the individual's disability status be reevaluated at least once every 3 years to ensure that those patients who have fully recovered from their burn injuries will not be able to stay on Medicare indefinitely.

Providing immediate Medicare coverage for uninsured patients suffering serious, disabling burn injuries is fully justified and a necessary step. Although not all hospitalized burn injuries would qualify as "disabling" and thus result in immediate Medicare coverage, this legislation is about providing coverage for the many uninsured patients suffering from serious burn injuries and ensuring the survival of a vital national resource that already is in jeopardy, a situation we cannot accept as we seek to prepare the nation to deal with potential mass casualty terrorist events.

PERSONAL EXPLANATION

HON. RANDY NEUGEBAUER

OF TEXAS

IN THE HOUSE OF REPRESENTATIVES

Tuesday, January 27, 2009

Mr. NEUGEBAUER. Madam Speaker, due to a death in the family I was absent for the following rollcall votes held January 21 and January 22, 2009. Had I been present, I would have voted as indicated for each roll call listed: rollcall vote 23: "yea"; rollcall vote 24: "nay"; rollcall vote 25: "yea"; rollcall vote 26: "nay"; rollcall vote 27: "yea"; rollcall vote 28: "yea"; rollcall vote 29: "yea."

IN MEMORY OF AUSTIN CUNNINGHAM

HON. JOE WILSON

OF SOUTH CAROLINA

IN THE HOUSE OF REPRESENTATIVES

Tuesday, January 27, 2009

Mr. WILSON of South Carolina. Madam Speaker, on January 26th, a long-time friend and favorite son of South Carolina, Austin Cunningham, passed away. In his lifetime—that spanned almost an entire century—Mr. Cunningham was a successful businessman, a tireless leader in the community, a prolific philosopher, and a mentor. He was a valued advisor to the late Congressman Floyd Spence and Governor Carrol Campbell leading the efforts to reduce capital gains taxes. His steadfast belief in the importance and virtue of service was an inspiration to many, and he left a positive and indelible mark on South Carolina and the Nation.

Staff writer Lee Tant of the Times and Democrat of Orangeburg, South Carolina has thoughtfully developed the following fitting tribute to Mr. Cunningham.

[From the Times and Democrat, Jan. 27, 2009]

AUSTIN CUNNINGHAM DIES AT 94

(By Lee Tant)

It is hard, if not impossible, to describe the life of Orangeburg icon Austin Cunningham.

Cunningham, who died Monday at the age of 94, was a community leader, businessman, writer, lawyer, soldier and citizen of the year.

He was the definition of a Renaissance man.

His lifetime spanned 18 presidents, 11 recessions, two world wars and the civil rights movement.

Cunningham was the leader of five companies and in 1998 was named Outstanding Elder Citizen of the Year for South Carolina.

A decade later, he was named the Kiwanis Club of Orangeburg's Citizen of the Year. He also was honored with the Order of the Palmetto.

Cunningham was involved with nearly everything in the Orangeburg community. He was constantly willing to be out front in volunteering and promoting community involvement.

During the 1970s, Cunningham made business trips to Denmark and Manning while an executive at the Sunbeam Outdoor Co. It was then he first became interested in Orangeburg. When the company relocated its executive headquarters to Santee in 1974, Cunningham and his family moved with it.

He said his new home was like an ''island'' because its residents had to drive at least 50 miles to reach Columbia or Charleston.

The man who once called cities such as Chicago and New York home quickly became involved in the community. He joined what was then the Greater Orangeburg Chamber of Commerce, attended First Presbyterian Church, and was active in the local Republican Party.

He retired from Sunbeam to open a Burger King restaurant on John C. Calhoun Drive in 1975.

Cunningham accepted the chairmanship of the Orangeburg Regional Hospital's major gifts division four years later. His work was instrumental in procuring the funding to build the Regional Medical Center.

Cunningham also became a tireless advocate of the Targeted Jobs Tax Credit program during the summer of 1983. The program provided a tax credit for employers who hired underprivileged teenagers.

During that time, Cunningham served as chairman of the local Economic Recovery Committee.

To market the program in Orangeburg, Cunningham illustrated how it not only made good financial sense but also helped the community.

''Your reward is two-fold. You'll get a good worker for jobs you want them to do. And when you go to pay your federal businesses taxes next year, you'll get back 85 percent of what you paid out,'' he said to encourage local employers.

In the spring of 1984, President Ronald Reagan invited Cunningham to the White House to honor his efforts in promoting the program.

Reagan lauded Cunningham and credited him with fostering partnerships with 77 local businesses that gave 264 jobs to teenagers in poverty.

''For most of these 16- and 17-year-olds, it was their first real job. Now that's partnership in action, and everybody is better off because of it,'' Reagan said.

A July 1983 T&D editorial described Cunningham as ''a one-man crusade'' that informed the community about the program's merits. It also noted he was dubbed ''Mr. TJTC'' by the head of the State Employment Security Commission back then.

However, Cunningham didn't want all the attention and refused to take credit for it.

He insisted the real heroes were the businesses that hired the young workers.

He said the success of the program in Orangeburg boded well for industry and race relations here.

''It's made Orangeburg a better community than it was 10 weeks ago,'' Cunningham said after the program concluded its first summer.

He served on the People's Assault on Drugs Committee in the 1990s.

Cunningham was also behind getting 132 streetlights installed in New Brookland as part of efforts by the People's Assault on Drugs. He said then that drug dealers were relegated to hanging back in the shadows.

''They can't stand out in the streets anymore. They are not aggressively stopping people and vying with each other,'' he said.

Additionally, Cunningham was a patron of the arts.

After hearing the South Carolina State University Choir, he realized how good it was and, he spearheaded the choir's partnership with the South Carolina Philharmonic Orchestra. This led to an annual concert series in Orangeburg.

S.C. State awarded him its Distinguished Service Award at the 1995 Founder's Day festivities.

When he was named the ''Outstanding Older South Carolinian'' of the year by the state Department of Health and Human Services' Office on Aging in 1998, Cunningham used the honor to make a push for funding county councils on aging. The annual Elder Hop event on New Year's Day in Orangeburg was his brainchild as a fundraiser for the Meals on Wheels program.

Born in Washington, he lost his journalist father at age 12. Cunningham went to work in the U.S. Supreme Court as a page at age 14 and subsequently worked under J. Edgar Hoover at the FBI. He served in the U.S. Army Air Corps during World War II. He lost two brothers in the war.

After earning a law degree from the University of Virginia, he did advanced studies at the University of Chicago and Oxford University.

He married his late wife Jacqueline in 1946. An infant son, Paul, died in 1954.

He is survived by two daughters, Manhattan psychotherapist Kathryn Janus (wife of Jeffrey Janus), magazine journalist Amy Cunningham of Brooklyn (wife of Steven Waldman), son Austin Cunningham III, a business owner residing in Swansea, and two school-aged grandsons Joseph and Gordon Waldman of Brooklyn. His younger sister, Mrs. Clotilde Luce, at age 88, still works at New York City's renowned Neighborhood Playhouse School of the Theatre.

As a longtime author of articles for The Times and Democrat and other publications, Cunningham wrote from his vast repertoire of life experiences. He offered insight on historical figures from George Washington and Abe Lincoln to Bill Clinton. He spent a weekend in a state prison, at his own request, gathering material to provide insight on life behind bars.

Most recently, Cunningham was the subject of a story about his experience as an usher on the podium at Franklin Roosevelt's presidential inauguration in 1933.

Also, he was honored this past week by the Orangeburg County Community of Character initiative. The board of directors voted to create the Austin Cunningham Orangeburg County Community of Character award. It will be given once a year to worthy citizens who exemplify the character traits that make their communities better places to live, work and play.

A memorial service for Cunningham will be held at noon Friday at First Presbyterian Church in Orangeburg. The family will receive visitors from 7 to 9 p.m. Wednesday at Dukes-Harley Funeral Home.

PERSONAL EXPLANATION

HON. GENE GREEN

OF TEXAS

IN THE HOUSE OF REPRESENTATIVES

Tuesday, January 27, 2009

Mr. GENE GREEN of Texas. Madam Speaker, I would have voted ''Aye'' on both H. Res. 31 expressing support for the designation of a National Data Privacy Awareness Day, and H. Res. 84, honoring the heroic action of the individuals involved with the rescue effort of U.S. Airways Flight 1549.

Our office holds a twice yearly event, the Paying for College Workshop, to provide high school seniors and their parents options for financing a college education. We invite the Sallie Mae Foundation to join us and they have given out dozens of scholarships over the years. Last night we had over 200 people attend the Workshop at Milby High School in our district, and Sallie Mae provided a $500 scholarship. We had to schedule the event before the 2009 voting schedule was finalized and for that reason I was not able to be in Washington for the two votes last night.

I would have supported both resolutions that were voted on last night, and was a cosponsor of H. Res. 31. People are increasingly using electronic communications in all walks of life—from social networking to e-commerce, more and more personal information is being compiled by online sites. While we have realized incredible efficiencies and other benefits from new electronic technologies, those technologies have also raised significant challenges for protecting the privacy of personal and proprietary information. H. Res. 31 would designate January 28 as National Data Privacy Day to raise awareness and educate people on safe practices when submitting personal information online.

TRIBUTE TO MIKE SHAIN

HON. JO ANN EMERSON

OF MISSOURI

IN THE HOUSE OF REPRESENTATIVES

Tuesday, January 27, 2009

Mrs. EMERSON. Madam Speaker, there are all kinds of public servants in our communities, but we seldom think first of journalists in that category. In the Eighth Congressional District of Southern Missouri, a journalist springs to mind as a public servant: Mike Shain of KFVS in Cape Girardeau. Mr. Shain is retiring after 53 years in the news businesses (the last 37 at KFVS), and I want to commend him to the U.S. House of Representatives for his long labors in the service of our region, our State and our Nation.

Though the craft of news reporting has changed greatly in the time Mr. Shain has spent in the business, his fair reporting, his work ethic, and his professionalism have remained constant. Everyone who has looked at Mr. Shain over a microphone or across a table on the set of his weekly news magazine knows they have better done their homework. Mr. Shain takes preparedness to another

level—he knows his subject matter and his audience inside-out.

Whole generations in Southeast Missouri have grown up with the informed voice of Mr. Shain in their ears. He has not only conveyed to us the news of the day, but he has also placed that news in context for his viewership. He has told us what is important as well as why. He has always had something important to say, which is a tough thing to do when most of your sentences end in a question mark. Still, Mr. Shain has been so successful and is so respected because his intellect is only surpassed by his understanding of the news media and its responsibilities to the public.

In service to the public, Mr. Shain has shaped minds and informed opinions among an electorate in Southern Missouri which is serious about its civic duty, patriotic obligations and the wellbeing of its neighbors. His name is synonymous with the news—with what is current and worth understanding. As much as the station that broadcasts him, Mike Shain is an institution.

Even though regular viewers of our evening news will no longer see Mr. Shain every day, his presence will continue to be seen and heard in the generations of newsmen and newswomen who have learned their craft from him. Mr. Shain's voice will be missed across the Heartland, but his legacy will endure. I'm proud to have known and worked with Mr. Shain, and I am glad to thank him on behalf of the entire Eighth Congressional District of the State of Missouri.

TRIBUTE TO ROSE FOWLER

HON. JOE COURTNEY

OF CONNECTICUT

IN THE HOUSE OF REPRESENTATIVES

Tuesday, January 27, 2009

Mr. COURTNEY. Madam Speaker, I rise today to honor Rose Fowler of the McSweeney Regional Senior Center who will be retiring after a decade of service to the seniors of eastern Connecticut.

Rose is a dedicated public servant who works tirelessly in the town of Coventry, Connecticut. She has been a familiar face in local politics, serving as chair of the town council and as the moderator on Election Day. Rose actively volunteers her time with a host of community organizations, including the town's historical society. She and her husband Joseph also own and operate the Country Store that is located on Main Street.

Rose is best known to the people of eastern Connecticut for her work at the McSweeney Regional Senior Center. For nearly thirty years, the center has provided services to the residents of ten area communities. They offer extensive preventive care programs, including a number of health screenings and support groups. There are also a variety of social programs which have helped to foster a family atmosphere among the participants. From exercise classes to arts and crafts and a variety of trips, the seniors at McSweeney Regional Senior Center have truly found a second home. These activities have fostered a true sense of companionship and enjoyment for all who participate and are indicative of the warmth and friendship that Rose brings to work each and every day.

Even though I want to congratulate Rose on her well deserved retirement, I admit that I am saddened by this event. While the McSweeney Senior Center will continue its tradition of quality service and support for the region's seniors, it will be difficult to match the legacy that Rose has left behind. I know that I will miss our discussions and interactions when I visit with the seniors and that I will not be alone in this regard. I wish Rose the best as she begins the next journey in her life and remain confident that whatever she does, she will continue her legacy of service to the seniors and people of eastern Connecticut.

IN RECOGNITION OF THE VIETNAMESE NEW YEAR: TET, YEAR OF THE BUFFALO

HON. DENNIS J. KUCINICH

OF OHIO

IN THE HOUSE OF REPRESENTATIVES

Tuesday, January 27, 2009

Mr. KUCINICH. Madam Speaker, I rise today in recognition of the Vietnamese New Year: Tet, 2009, Year of the Buffalo. As the Vietnamese community in Greater Cleveland gathers at St. Helena Catholic Church to celebrate, I join them in celebration of their rich history and culture.

Tet is the time of the year to pay homage to ancestors, reconnect with friends and family and celebrate every hope and possibility rising with the new year. This year's gathering will once again honor community volunteers and leaders, showcasing many Vietnamese cultural treasures including Vietnamese culinary cuisine, music and dance.

2009 also marks thirty-four years of service to the community by the Vietnamese Community in Greater Cleveland, Inc. This organization has been an invaluable resource for hundreds of Clevelanders of Vietnamese descent, linking them to needed resources and preserving the rich heritage of the Vietnamese people.

I would also like to take this opportunity to recognize Le Nguyen, President of the Vietnamese Community in Greater Cleveland, Inc., and every member, past and present, for their dedication to Vietnamese-Americans of Northeast Ohio.

Madam Speaker and colleagues, please join me in celebration of the Vietnamese New Year, Tet 2009: Year of the Buffalo. May every American of Vietnamese heritage hold memories of their past forever in their hearts, and find peace and happiness within every new day of the rising new year.

THE 36TH ANNIVERSARY OF ROE V. WADE

HON. CHRISTOPHER S. MURPHY

OF CONNECTICUT

IN THE HOUSE OF REPRESENTATIVES

Tuesday, January 27, 2009

Mr. MURPHY of Connecticut. Madam Speaker, I rise in honor of the recent 36th anniversary of the Supreme Court decision, Roe v. Wade.

Citing the constitutional right to privacy, the decision recognized women's equal standing with men to make decisions about their own bodies, and constituted a landmark step forward in the ongoing fight for gender equality.

Roe has advanced both the health care and human rights of women throughout America. It stands for the simple premise that government should not, and cannot, tell a person what to do with his or her own body.

As a proud cosponsor of the Prevention First Act, I certainly recognize that the term "pro-choice" is not synonymous with "pro-abortion."

Instead, to me, the right to choose is the right of a woman to make her own decisions about her health and future, free of coercion, based on medically-accurate information, and with access to all reproductive health options.

Roe has provided us a legal foundation upon which to build a framework of reproductive health options for women. Our responsibility, as we celebrate the decision's anniversary, is to make sure we honor the tradition of that decision by assuring that women and families throughout this great country have access to family planning and reproductive health options so that never again do women have to retreat to alleyways and dark corners to receive proper medical care.

Madam Speaker, January 22, 1973 marks a landmark day in our nation's constitutional history—for women, for health, and for individual liberty.

DISAPPROVAL OF OBLIGATIONS UNDER THE EMERGENCY ECONOMIC STABILIZATION ACT OF 2008

SPEECH OF

HON. EARL POMEROY

OF NORTH DAKOTA

IN THE HOUSE OF REPRESENTATIVES

Thursday, January 22, 2009

Mr. POMEROY. Mr. Speaker, Our nation's economy continues to be challenged by tight credit markets and the long-term unwinding of the housing bubble. In light of the serious economic situation, I am voting against H.J. Res. 3 which involves the second half of the funds for the Troubled Asset Relief Program (TARP) for three reasons:

The first reason is that the economy is in truly terrible shape. During 2008, the economy lost 2.6 million jobs, with more than 1 million jobs lost in the last two months alone. Economists now project that the unemployment rate might rise to over ten percent in the coming year. Congress needs to do what it can to respond to the situation. When Congress initially authorized the TARP funds in late September the crisis in the financial markets had not hit main street business across the country. Today as we consider releasing the second half of the TARP funds, the circumstances that compelled that response last fall are even more dire.

The second reason for my opposition to the resolution of disapproval is based upon a belief that the second half of TARP funds will be used more strategically and effectively. Simply put, appointees of the Bush administration that oversaw the flawed administration of the program are no longer in charge of its operation. We have a new President and economic team that will need all of the presently available tools and more to address our cratering economy. The Obama administration has committed to get credit flowing to families and businesses while launching a sweeping effort

to address the foreclosure crisis and establishing a full and accurate accounting of the uses of TARP funds.

The third reason is safeguards for taxpayer funds that were contained in the detailed conditions the House approved for the TARP funds when it overwhelmingly passed H.R. 384. It is very unfortunate that TARP was mishandled. This bill, TARP Reform and Accountability Act, turns around the discredited ''no strings attached'' way the prior administration invested the funds. In addition to the explicit protections to taxpayers that had been reasonably expected in the program's administration to date, the bill requires Treasury to reach agreement with recipients of future TARP fund on exactly how the funds will be used and places limits on executive compensation and bonuses. The bill's provisions expand the oversight of the program and direct specific dollars to address housing foreclosures. The written pledges of the Obama administration to operate TARP with firm conditions, greater oversight and transparent accountability abide with the conditions passed by the House.

For the above reasons and because we do not know yet where this downturn in the economy will reach bottom, I voted against the resolution to disavow the release of the second part of the TARP funds to be administered by a new Treasury Secretary committed to protecting the interest of American taxpayers while providing needed assistance to the financial markets.

SYSTEMS HEALTHCARE APPROACH

HON. DAN BOREN

OF OKLAHOMA

IN THE HOUSE OF REPRESENTATIVES

Tuesday, January 27, 2009

Mr. BOREN. Madam Speaker, I rise today in hope of raising the awareness of the House as to the significant health disparities facing medically underserved areas, particularly rural areas and those with large minority populations. Many parts of the country face shortages in health care providers and services. In the rural areas of my district in Eastern Oklahoma, we have a deep understanding of the significant health disparities facing populations in medically underserved areas.

As Congress moves forward with this initiative to stimulate our nation's prosperity, I urge your consideration of the great need in underserved areas for coherent health care delivery systems, systems that integrate primary care, preventive care, specialty care, and acute care, and that are connected through a health care technology infrastructure. I would like to work with you, Mr. Chairman and Ranking Member, as this legislation proceeds to focus funding toward projects that take a comprehensive systemic approach in underserved communities.

RECOGNITION OF WEST VIRGINIA'S ARMY NATIONAL GUARD PARTICIPATION IN THE PRESIDENTIAL INAUGURATION

HON. NICK J. RAHALL II

OF WEST VIRGINIA

IN THE HOUSE OF REPRESENTATIVES

Tuesday, January 27, 2009

Mr. RAHALL. Madam Speaker, I rise today to recognize West Virginia's Army National Guard for their assistance at the Presidential Inauguration of Barack Obama on Tuesday, the 20th of January 2009.

West Virginia provided nearly 500 men and women with the National Guard to usher in President Barack Obama. From crowd control to communication, West Virginia National Guard troops assisted local law enforcement in providing security and other services. In addition, the West Virginia National Guard sent helicopters, airplanes, mobile satellite-communications trailers, medical gear, and a mobile kitchen. Our brave men and women witnessed history and gave their all to help at this historic occasion.

Our heroic men and women in uniform are never far from my thoughts. They are our Nation's consistent example of valor and courage. In West Virginia, they earned a Special Category ''First Place'' award in the Army Communities of Excellence, ACOE, competition in May 2008 for their strong strategic planning process, communication, and customer-driven focus. Their excellence reflects the hard work and dedication of the men and women not only of the West Virginia Army National Guard, but also of every family member and friend who stands behind them. It is important to remember that our brave soldiers have given so much and have expected so little in return. I am proud to take this moment to recognize the excellence of the West Virginia Army National Guard for all they do to keep us safe from harm.

Our Armed Forces have paid the debt for the freedom we enjoy today, and I will continue, as I have in the past, to do everything I can to honor their sacrifices and service. Our soldiers and their families remain foremost in the thoughts and minds of southern West Virginians, and I will continue to devote my all to those who wear or have worn America's uniform.

HONORING SPECIALIST TIMOTHY R. LONG

HON. ROBERT E. ANDREWS

OF NEW JERSEY

IN THE HOUSE OF REPRESENTATIVES

Tuesday, January 27, 2009

Mr. ANDREWS. Madam Speaker, I rise today to honor Specialist Timothy R. Long for his service in Iraq. In 1996, when Tim was eleven years old, I sat with him in his middle school classroom and prepared Valentine's Day cards for U.S. troops serving in Bosnia. Thirteen years later, as this Valentine's Day approaches, Tim is stationed in Iraq serving in the National Guard. On behalf of New Jersey's First Congressional District and the entire Nation, I would like to thank Tim for his service and dedication.

HONORING REAR ADMIRAL DOUGLAS TEESON

HON. JOE COURTNEY

OF CONNECTICUT

IN THE HOUSE OF REPRESENTATIVES

Tuesday, January 27, 2009

Mr. COURTNEY. Madam Speaker, I rise today to honor Rear Admiral Douglas Teeson who is retiring from his position as the president and chief executive officer of the Mystic Seaport. Admiral Teeson has dedicated his life to public service and I am honored to stand here today to offer these remarks.

Admiral Teeson is certainly no stranger to the people of southeastern Connecticut, where he has lived with his wife Phyllis for many years. He graduated with honors from the Coast Guard Academy in New London, Connecticut in 1965 and began his long and distinguished career as a Coast Guard officer. While in the Coast Guard he served in a variety of commands, including a term as head of the major training center located in Yorktown, Virginia. His career came full circle when he returned to the Coast Guard Academy to serve as the 36th superintendent, where he remained until his retirement in 2001.

In 2001, Admiral Teeson assumed his role as President and CEO of the Mystic Seaport, America's premier maritime history museum. Under Teeson's leadership, the Seaport flourished, adding new collections and undertaking historic renovations. During his tenure at the Mystic Seaport, Admiral Teeson oversaw the opening of the Carlton Marine Science Center and the completion of the new 500 ton ship lift facility among other important improvements that revitalized this unique American treasure.

Admiral Teeson has also been an integral part of the fabric of southeastern Connecticut. Admiral Teeson has served on the Board of Directors for The New London Day newspaper and as a commissioner for the Connecticut Commission on Culture and Tourism. Admiral Teeson is also a recipient of the Eastern Connecticut Chamber of Commerce's William Crawford Distinguished Service Award, given annually to an individual who has exemplified the spirit of community service and contributed to improving the quality of life for all of southeastern Connecticut. Never has there been a more deserving recipient of this prestigious honor.

Admiral Teeson's retirement marks the end of an era at the Mystic Seaport. I ask my colleagues to join me in congratulating Admiral Teeson on his exceptional career and to wish him well in his retirement.

PERSONAL EXPLANATION

HON. BLAINE LUETKEMEYER

OF MISSOURI

IN THE HOUSE OF REPRESENTATIVES

Tuesday, January 27, 2009

Mr. Luetkemeyer. Madam Speaker, I would like to state for the record my position on the following votes that I missed on Monday, January 26, 2009, as a result of an ice storm delaying my flight from Missouri to Washington, DC.

On Monday, January 26, 2009, I missed rollcall votes 30 and 31. Had I been present, I would have voted ''aye'' on both rollcall votes 30 and rollcall vote 31.

RECOGNIZE THE PARTICIPATION OF THE MINNESOTA NATIONAL GUARD IN THE INAUGUARATION OF PRESIDENT BARACK OBAMA

HON. MICHELE BACHMANN

OF MINNESOTA

IN THE HOUSE OF REPRESENTATIVES

Tuesday, January 27, 2009

Mrs. BACHMANN. Madam Speaker, one week ago today Barack Obama was sworn in as the 44th President of the United States.

Millions flooded into Washington, DC to witness this historic occasion, presenting law enforcement authorities with an enormous logistical and security challenge.

To meet this challenge, the selfless men and women of Minnesota's National Guard came to Washington to assist with the Presidential Inauguration and to ensure the safety of the President as well as everyone present for inaugural festivities.

The superlative conduct and ability of Minnesota's guardsmen helped to make certain the ceremony and surrounding events occurred as safely as possible for all attendees, despite the many obstacles present in such a complex undertaking.

And so it is my honor to recognize and pay tribute to all the brave citizen-soldiers of the Minnesota National Guard. Their exceptional service during our President's inauguaration is a true source of pride for all Minnesotans, as is the Guard's continuing and unbroken tradition of noble service to our State and country.

TRIBUTE TO MIKE SHAIN

HON. JO ANN EMERSON

OF MISSOURI

IN THE HOUSE OF REPRESENTATIVES

Tuesday, January 27, 2009

Mrs. EMERSON. Madam Speaker, there are all kinds of public servants in our communities, but we seldom think first of journalists in that category. In the Eighth Congressional District of Southern Missouri, a journalist springs to mind as a public servant: Mike Shain of KFVS in Cape Girardeau. Mr. Shain is retiring after 53 years in the news businesses (the last 37 at KFVS), and I want to commend him to the U.S. House of Representatives for his long labors in the service of our region, our state and our nation.

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Even though regular viewers of our evening news will no longer see Mr. Shain every day, his presence will continue to be seen and heard in the generations of newsmen and newswomen who have learned their craft from him. Mr. Shain's voice will be missed across the Heartland, but his legacy will endure. I'm proud to have known and worked with Mr. Shain, and I am glad to thank him on behalf of the entire Eighth Congressional District of the State of Missouri.

Daily Digest

HIGHLIGHTS

Senator-designate Kirsten E. Gillibrand, of New York, was administered the oath of office by the Vice President.

The House passed S. 181, Lilly Ledbetter Fair Pay Act of 2009.

Senate

Chamber Action

Routine Proceedings, pages S851–S948

Measures Introduced: Seven bills and two resolutions were introduced, as follows: S. 330–336, and S. Res. 22–23. **Page S894**

Measures Reported:

S. 336, making supplemental appropriations for job preservation and creation, infrastructure investment, energy efficiency and science, assistance to the unemployed, and State and local fiscal stabilization, for the fiscal year ending September 30, 2009. (S. Rept. No. 111–3) **Page S893**

Measures Passed:

Catholic Schools Week: Senate agreed to S. Res. 22, recognizing the goals of Catholic Schools Week and honoring the valuable contributions of Catholic schools in the United States. **Page S946**

Honoring Andrew Wyeth: Senate agreed to S. Res. 23, honoring the life of Andrew Wyeth. **Pages S946–47**

Measures Considered:

Children's Health Insurance Program Reauthorization Act: Senate continued consideration of H.R. 2, to amend title XXI of the Social Security Act to extend and improve the Children's Health Insurance Program, taking action on the following amendments proposed thereto: **Pages S852–66, S867–81, S881–85**

Adopted:

Reid (for Baucus) Amendment No. 39, in the nature of a substitute. **Pages S852–66, S867–81, S881–85**

Rejected:

DeMint Amendment No. 43 (to Amendment No. 39), to require States to impose cost-sharing for any individual enrolled in a State child health plan whose income exceeds 200 percent of the poverty line. (By 60 yeas to 37 nays (Vote No. 16), Senate tabled the amendment.) **Pages S859–66, S867–80**

Hatch/Grassley Amendment No. 45 (to Amendment No. 39), to prohibit any Federal matching payment for Medicaid or CHIP coverage of noncitizen children or pregnant women until a State demonstrates that it has enrolled 95 percent of the children eligible for Medicaid or CHIP who reside in the State and whose family income does not exceed 200 percent of the poverty line. **Pages S857–59, S880–81**

Pending:

McConnell Amendment No. 40 (to Amendment No. 39), in the nature of a substitute. **Pages S852–54**

Grassley Amendment No. 41 (to Amendment No. 39), to strike the option to provide coverage to legal immigrants and increase the enrollment of uninsured low income American children. **Pages S854–57**

A unanimous-consent-time agreement was reached providing for further consideration of the bill at 10 a.m., on Wednesday, January 28, 2009, and that the time until 11 a.m. be for debate relative to McConnell Amendment No. 40 (to H.R. 2, as amended) (listed above), with the time equally divided and controlled between the Majority and Republican Leaders, or their designees; that no amendments be in order to the amendment prior to a vote on or in relation to the amendment, and that at 11 a.m., Senate vote on or in relation to the amendment; provided further that if McConnell Amendment No. 40 (to H.R. 2, as amended) is agreed to, the bill, as thus amended, be considered as original text for the purpose of further amendments. **Page S885**

Announcements:

Democratic Committee Assignments: The Majority Leader announced, in accordance with S. Res. 18, that the following Democratic members have been assigned to the following committees:

Committee on Agriculture, Nutrition, and Forestry: Senators Bennet and Gillibrand.

Committee on Banking, Housing, and Urban Affairs: Senator Bennet.

Committee on Environment and Public Works: Senator Gillibrand.

Committee on Foreign Relations: Senator Gillibrand.

Committee on Homeland Security and Governmental Affairs: Senator Bennet.

Special Committee on Aging: Senators Bennet and Gillibrand. **Pages S878–79**

Appointments:

Mexico-U.S. Interparliamentary Group: The Chair, on behalf of the Vice President, pursuant to 22 U.S.C. 276h–276k, as amended, appointed the following Senator as Chairman to the Mexico-U.S. Interparliamentary Group conference for the 111th Congress:

Senator Dodd. **Page S947**

Nomination Confirmed: Senate confirmed the following nomination:

By 96 yeas 1 nay (Vote No. EX. 17), Daniel K. Tarullo, of Massachusetts, to be a Member of the Board of Governors of the Federal Reserve System for a term of fourteen years from February 1, 2008. **Page S881**

Nomination Received: Senate received the following nomination:

Timothy F. Geithner, of New York, to be United States Governor of the International Monetary Fund for a term of five years; United States Governor of the International Bank for Reconstruction and Development for a term of five years; United States Governor of the Inter-American Development Bank for a term of five years; United States Governor of the African Development Bank for a term of five years; United States Governor of the Asian Development Bank; United States Governor of the African Development Fund; United States Governor of the European Bank for Reconstruction and Development. **Page S948**

Messages From the House: **Page S892**

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Amendments Submitted: **Pages S900–45**

Authorities for Committees To Meet: **Pages S945–46**

Privileges of the Floor: **Page S946**

Record Votes: Two record votes were taken today. (Total—17) **Pages S890, S891**

Adjournment: Senate convened at 10 a.m. and adjourned at 7:22 p.m., until 10 a.m. on Wednesday, January 28, 2009. (For Senate's program, see the remarks of the Acting Majority Leader in today's Record on page S948.)

Committee Meetings

(Committees not listed did not meet)

BUSINESS MEETING

Committee on Appropriations: Committee ordered favorably reported S. 336, making supplemental appropriations for job preservation and creation, infrastructure investment, energy efficiency and science, assistance to the unemployed, and State and local fiscal stabilization, for the fiscal year ending September 30, 2009.

Also, committee adopted its rules of procedure for the 111th Congress.

BUSINESS MEETING

Committee on Armed Services: Committee ordered favorably reported 654 nominations in the Army, Navy, Air Force, and Marine Corps.

DEPARTMENT OF DEFENSE

Committee on Armed Services: Committee concluded a hearing to examine challenges facing the Department of Defense, after receiving testimony from Robert M. Gates, Secretary of Defense.

INVESTMENT SECURITIES FRAUD

Committee on Banking, Housing, and Urban Affairs: Committee concluded a hearing to examine investment securities fraud, focusing on regulatory and oversight concerns, after receiving testimony from Lori A. Richards, Director, Office of Compliance Inspections and Examinations, and Linda Chatman Thomsen, Director, Division of Enforcement, both of the Securities and Exchange Commission; John C. Coffee, Jr., Columbia University Law School, New York, New York; Stephen I. Luparello, Financial Industry Regulatory Authority, and Stephen P. Harbeck, Securities Investor Protection Corporation, both of Washington, D.C.; and Henry A. Backe, Jr., Fairfield, Connecticut.

PUBLIC HEALTH

Committee on Health, Education, Labor, and Pensions: Committee concluded a hearing to examine access to prevention and public health for high risk populations, after receiving testimony from Risa Lavizzo-

Mourey, Robert Wood Johnson Foundation, Princeton, New Jersey; David Stevens, National Association of Community Health Centers, Bethesda, Maryland; Michael Meit, University of Chicago National Option Research Center, Chicago, Illinois; Lisa I. Iezzoni, Harvard Medical School, Cambridge, Massachusetts; Robert N. Butler, International Longevity Center, New York, New York; and Joseph F. Hagan, Jr., University of Vermont College of Medicine, Burlington, on behalf of the American Academy of Pediatrics.

DIGITAL AGE PRIVACY

Committee on the Judiciary: Committee concluded a hearing to examine health information technology (IT), focusing on protecting Americans' privacy in the digital age, after receiving testimony from James Hester, Vermont State Legislature Health Care Reform Commission, Montpelier; Adrienne Hahn, Consumers Union, Deven McGraw, Center for Democracy and Technology Health Privacy Project, and David Merritt, Center for Health Transformation, all of Washington, D.C.; Michael Stokes, Microsoft Corporation Health Solutions Group, Eagle, Idaho; and John P. Houston, University of Pittsburgh Medical Center, Pittsburgh, Pennsylvania.

House of Representatives

Chamber Action

Public Bills and Resolutions Introduced: 37 public bills, H.R. 699–732; 1 private bill, H.R. 733; and 7 resolutions, H. Con. Res. 26–28; and H. Res. 91, 93–95 were introduced. **Pages H601–02**

Additional Cosponsors: **Pages H602–03**

Reports Filed: Reports were filed today as follows:

H.R. 598, to provide for a portion of the economic recovery package relating to revenue measures, unemployment, and health, with an amendment (H. Rept. 111–8, Pt. 1) and H. Res. 92, providing for further consideration of the bill (H.R. 1) making supplemental appropriations for job preservation and creation, infrastructure investment, energy efficiency and science, assistance to the unemployed, and State and local fiscal stabilization, for the fiscal year ending September 30, 2009 (H. Rept. 111–9). **Pages H600–01**

Speaker: Read a letter from the Speaker wherein she appointed Representative Jackson-Lee (TX) to act as Speaker Pro Tempore for today. **Page H529**

Recess: The House recessed at 10:48 a.m. and reconvened at 12 noon. **Pages H530–31**

Providing for an adjournment of the House: The House agreed to H. Con. Res. 26, providing for an adjournment of the House. **Page H543**

Investigative Subcommittees of the Committee on Standards of Official Conduct: The Chair announced that the Speaker named the following Members of the House of Representatives to be available to serve on investigative subcommittees of the Committee on Standards of Official Conduct for the 111th Congress: Representative Gene Green (TX) and Representative Scott (GA). **Page H546**

Investigative Subcommittees of the Committee on Standards of Official Conduct: Read a letter from Representative Boehner, Minority Leader, in which he designated the following Member of the House of Representatives to be available for service on the investigative subcommittee of the Committee on Standards of Official Conduct during the 111th Congress: Representative Hastings (WA). **Page H546**

Lilly Ledbetter Fair Pay Act of 2009: The House passed S. 181, to amend title VII of the Civil Rights Act of 1964 and the Age Discrimination in Employment Act of 1967, and to modify the operation of the Americans with Disabilities Act of 1990 and the Rehabilitation Act of 1973, to clarify that a discriminatory compensation decision or other practice that is unlawful under such Acts occurs each time compensation is paid pursuant to the discriminatory compensation decision or other practice, by a yea-and-nay vote of 250 yeas to 177 nays, Roll No. 37. **Pages H546–54, H556**

Rejected the McKeon motion to commit the bill to the Committee on Education and Labor, by a yea-and-nay vote of 176 yeas to 250 nays, Roll No. 36. **Pages H554–56**

H. Res. 87, the rule providing for consideration of the bill, was agreed to by a yea-and-nay vote of 252 yeas to 174 nays, Roll No. 33, after agreeing to order the previous question by a yea-and-nay vote of 252 yeas to 175 nays, Roll No. 32. **Pages H532–35, H543–44**

Question of Consideration: The House agreed to consider H.R. 1, making supplemental appropriations for job preservation and creation, infrastructure investment, energy efficiency and science, assistance to the unemployed, and State and local fiscal stabilization, for fiscal year ending September 30, 2009, by a recorded vote of 224 ayes to 199 noes, Roll No. 38. **Pages H556–57**

American Recovery and Reinvestment Act of 2009: The House began consideration of H.R. 1, making supplemental appropriations for job preservation and creation, infrastructure investment, energy efficiency and science, assistance to the unemployed, and State and local fiscal stabilization. Further proceedings were postponed until tomorrow, January 28th. **Pages H557–83**

H. Res. 88, the rule providing for consideration of the bill, was agreed to by a yea-and-nay vote of 235 yeas to 191 nays, Roll No. 35, after agreeing to order the previous question by a yea-and-nay vote of 244 yeas to 183 nays, Roll No. 34. **Pages H535–43, H545–46**

Suspension—Proceedings Postponed: The House debated the following measure under suspension of the rules. Further proceedings were postponed until tomorrow, January 28th:

DTV Delay Act: S. 328, to postpone the DTV transition date. **Pages H584–93**

Senate Message: Message received from the Senate today appears on page H531.

Senate Referrals: S. 328 was held at the desk.

Amendments: Amendments ordered printed appear on page H603.

Quorum Calls—Votes: Six yea-and-nay votes and one recorded vote developed during the proceedings of today and appear on pages H543–44, H544, H545, H545–46, H555, H566, and H566–67. There were no quorum calls.

Adjournment: The House met at 10:30 a.m. and adjourned at 10:13 p.m.

Committee Meetings

DEFENSE DEPARTMENT PRIORITIES

Committee on Armed Services: Held a hearing on the priorities of the Department of Defense in the new Administration. Testimony was heard from Robert M. Gates, Secretary of Defense.

ECONOMIC OUTLOOK AND BUDGET CHALLENGES

Committee on the Budget: Held a hearing on the Economic Outlook and Budget Challenges. Testimony was heard from Douglas Elmendorf, Director, CBO; Alice M. Rivlin, former Director of OMB and CBO; and public witnesses.

COMMITTEE ORGANIZATION

Committee on Financial Services: Met for organizational purposes.

COMMITTEE ORGANIZATION; COMMITTEE OVERSIGHT PLAN

Committee on House Administration: Met for organizational purposes.

The Committee also approved the Committee's Oversight Plan for the 111th Congress.

BANKRUPTCY PREVENTION; COMMITTEE OVERSIGHT

Committee on the Judiciary: Ordered reported, as amended, H.R. 200, Helping Families Save Their Homes in Bankruptcy Act of 2009.

The Committee also approved the Committee's Oversight Plan for the 111th Congress.

DC HOUSE VOTING RIGHTS ACT

Committee on the Judiciary: Subcommittee on Constitution, Civil Rights, and Civil Liberties held a hearing on H.R. 157, District of Columbia House Voting Rights Act of 2009. Testimony was heard from Representatives Hoyer, Chaffetz and Gohmert; former Representative Tom Davis of Virginia; and public witnesses.

AMERICAN RECOVERY AND REINVESTMENT ACT OF 2009

Committee on Rules: Granted, by a vote of 9 to 2, a rule providing for further consideration of H.R. 1, the ''American Recovery and Reinvestment Act of 2009.'' The rule provides an additional one hour of general debate equally divided and controlled by the chairman and ranking minority member of the Committee on Appropriations. The rule provides that the amendment printed in part A of the report of the Committee on Rules shall be considered as adopted in the House and in the Committee of the Whole. The bill, as amended, shall be considered as the original bill for purpose of further amendment and shall be considered as read. The rule waives all points of order against provisions of the bill, as amended. The rule provides that no further amendment shall be in order except those printed in part B of the Rules Committee report. Each further amendment may be offered only in the order printed, may be offered only by a Member designated, shall be considered as read, shall be debatable for the time specified equally divided and controlled by the proponent and an opponent, and shall not be subject to amendment or demand for division of the question. The rule waives all points of order against such

further amendments except those arising under clause 9 of rule XXI. The rule provides one motion to recommit with or without instructions. The rule provides that the chair of the Committee on Appropriations shall insert in the Congressional Record not later than February 4, 2009, such materials as he may deem explanatory of appropriations measures for fiscal year 2009. Finally, the rule provides that the chair of the Committee on Ways and Means may file a supplemental report to accompany H.R. 598. Testimony was heard from Representatives Blumenauer, Pascrell, Inslee, DeFazio, Waters, Nadler, Brown of Florida, Jackson-Lee of Texas, Cummings, Sanchez, Grijalva, Davis of California, Lipinski, Kagen, Sestak, Speier, Edwards of Maryland, Kissel, Peters, Teague, Bordallo, Lewis of California, Kingston, Kirk, Ryan of Wisconsin, Stearns, Rogers of Michigan, Tim Murphy of Pennsylvania, Hoekstra, Manzullo, Rogers of Alabama, Barrett of South Carolina, Garrett of New Jersey, Turner, Neugebauer, Heller of Nevada, Lamborn and Scalise.

ENERGY REDUCTION/ENVIRONMENTAL SUSTAINABILITY

Committee on Transportation and Infrastructure: Subcommittee on Highways and Transit held a hearing on Energy Reduction and Environmental Sustainability in Surface Transportation. Testimony was heard from John D. Porcari, Secretary of Transportation, Department of Transportation, State of Maryland; Robit Aggarwala, Director, Office of Long Term Planning and Sustainability, New York City; and public witnesses.

Joint Meetings

No joint committee meetings were held.

COMMITTEE MEETINGS FOR WEDNESDAY, JANUARY 28, 2009

(Committee meetings are open unless otherwise indicated)

Senate

Committee on the Budget: to hold hearings to examine Federal response to the housing and financial crisis, 10 a.m., SD–608.

Committee on Foreign Relations: to hold hearings to examine global climate change, 10 a.m., SD–419.

Committee on Homeland Security and Governmental Affairs: to hold hearings to examine lessons from the Mumbai, India terrorist attacks, 10 a.m., SD–342.

Subcommittee on Federal Financial Management, Government Information, Federal Services, and International Security, to hold hearings to examine impact of the economic crisis on the U.S. Postal Service, 2:30 p.m., SD–342.

Committee on the Judiciary: business meeting to consider the nomination of Eric H. Holder, Jr., to be Attorney General, 10 a.m., SH–216.

Committee on Veterans' Affairs: to hold hearings to examine veterans organizations' priorities for the 111th Congress, 9:30 a.m., SR–418.

Select Committee on Intelligence: closed business meeting to consider pending calendar business, 2:30 p.m., SH–219.

House

Committee on Agriculture, to meet for organizational purposes, and to consider the Committee's Oversight Plan for the 111th Congress, 11 a.m., 1300 Longworth.

Committee on Armed Services, Subcommittee on Military Personnel, hearing on Sexual Assault in the Military: Victim Support and Advocacy, 10 a.m., 2118 Rayburn.

Committee on Foreign Affairs, to meet for organizational purposes, 10 a.m., 2172 Rayburn.

Committee on Science and Technology, to meet for organizational purposes, and to consider the Committee's Oversight Plan for the 111th Congress, 10 a.m., 2318 Rayburn.

Committee on Small Business, to meet for organizational purposes, 1 p.m., 2360 Rayburn.

Committee on Transportation and Infrastructure, Subcommittee on Railroads, Pipelines, and Hazardous Materials, hearing on Freight and Passenger Rail: Present and Future Roles, Performance, Benefits, and Needs, 10 a.m., 2167 Rayburn.

Next Meeting of the SENATE

10 a.m., Wednesday, January 28

Senate Chamber

Program for Wednesday: Senate will continue consideration of H.R. 2, Children's Health Insurance Program Reauthorization Act, and after a period of debate, vote on or in relation to McConnell Amendment No. 40 (to H.R. 2, as amended) at 11 a.m.

Next Meeting of the HOUSE OF REPRESENTATIVES

10 a.m., Wednesday, January 28

House Chamber

Program for Wednesday: Resume consideration of H.R. 1—American Recovery and Reinvestment Act of 2009.

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