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PRESIDENT OBAMA'S 2013 BUDGET REQUEST

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

Mr. BONNER. Mr. Speaker, earlier this week the President sent his fiscal year 2013 budget request to Congress. It's been roundly panned as being "not serious," "inadequate," and "political."

But, Mr. Speaker, I want the American people to understand, in addition to all these assessments, the President's budget request is downright dangerous. House Republicans have begun a serious conversation with the American people about our debt, our out-of-control Federal spending, the unsustainability of mandatory spending, as well as our future.

But it's past time for this President and his party in Congress to join us in honestly acknowledging the real challenges facing our Nation and offering realistic solutions to put America back on the path to prosperity to ensure that our best days are still in front of us.

Sadly, the President's lack of leadership on these critical issues endangers not only the current economic recovery but the very future of our great Republic.

EFFECTS OF HEALTH CARE REFORM

(Ms. TSONGAS asked and was given permission to address the House for 1 minute.)

Ms. TSONGAS. Mr. Speaker, the health care reform effort signed into law by President Obama in 2010 contains important new benefits for our seniors and Medicare recipients that have already started to take effect.

Nearly 3.6 million seniors in the doughnut hole have already saved \$2.1 billion on their prescription drugs. Twenty-four million people with Medicare have already taken advantage of free preventive services.

Additional reforms such as a prohibition of lifetime caps on insurance expenditures will soon be made available to our seniors, thanks to health care reform. Nothing in health reform reduces Medicare benefits for seniors.

Health care reform achieves Medicare savings by cracking down on inefficiency, fraud, and waste in Medicare, targeted at private health insurance companies and providers, not beneficiaries. This is how government should operate: by demanding efficiency, accountability, and protecting taxpayer dollars.

JOB-KILLING REGULATIONS

(Mr. QUAYLE asked and was given permission to address the House for 1

minute and to revise and extend his remarks.)

Mr. QUAYLE. Mr. Speaker, in just this past year approximately 79,000 pages of regulations were printed in the Federal Register. The cost to comply with our regulatory enterprise exceeds \$1 trillion per year.

Now this past August, the Department of Labor issued its final rule governing the non-displacement of qualified workers under service contracts. Under this rule, when a government contract is given to a new firm, the company is required to first offer employment to the previous contractor's workers.

The administration claims this rule will help government efficiency, but it gives a preference to union employees and limits the ability of the firm to negotiate and hire the workers that it actually wants. This rule will impact thousands of employers and billions in government contracting.

By piling on new hoops for employers to jump through, we are simply increasing costs that are passed on to taxpayers. Regulatory compliance costs are a hidden tax borne by us all. The administration must stop this myriad of job-killing regulations.

AMERICAN HEART MONTH

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

Mrs. CAPPS. Mr. Speaker, I rise today in recognition of American Heart Month. February, you know, is not just about Valentine's Day, but it's also a month designated to raise awareness of heart disease, especially its impact and effects on women.

Heart disease is the number one cause of death for women. And most Americans, including over 90 percent of primary care physicians, are not even aware that heart disease kills more women each year than men.

We have lost far too many of our loved ones to heart disease. I dare say each of us knows someone, a dear friend or a family member, affected by it. And that's why I reintroduced H.R. 3526, the Heart for Women Act, to increase awareness of and access to care for those impacted by heart disease.

I encourage my colleagues to cosponsor this legislation and join me in the battle against heart disease.

A GOVERNMENT TAKEOVER

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

Mr. PITTS. Mr. Speaker, why do we say that the President's health care law is a government takeover? Because, under the law, the government can force religious organizations to violate their conscience. Because, under the law, the Independent Payment Advisory Board can cut Medicare

reimbursements without the consent of Congress.

This same board could start running with minimal congressional oversight, given the President's attempt to broaden the definition of a recess.

It is a government takeover because the minimum essential benefits package will effectively dictate the level of coverage for every health care plan in the Nation. It is a government takeover because the United States Preventive Services Task Force will determine what services have to be provided without any copayment.

Finally, when the government can force you to purchase a service that it firmly controls, it's a government takeover. The list could go on and on. Clearly, the Federal Government is now in the driver's seat. The President's health care law is already failing, which is why we need to end it before it's fully implemented.

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MEDICARE

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

Mr. CARNAHAN. Mr. Speaker, on March 1, Medicare physician payments will be slashed by 27 percent, badly impacting seniors' access to health care. We must act now to make sure that doesn't happen.

A few months ago, I had the opportunity to speak to World War II veterans from Missouri who visited Washington to see the memorial to their service. They spoke to me about how, during their crisis, Americans pulled together to meet the great challenges of their time. That's the can-do attitude we need now. We should stop using the lives and health of our seniors as political bargaining chips.

Plain and simple, paying doctors for doing their job, keeping seniors' access to health care should not be a partisan issue. It should be an American value we can all rally around.

I call on my colleagues to work together to keep access to Medicare services strong. That's an American value.

NANNY STATES

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

Mr. DUNCAN of South Carolina. Mr. Speaker, a year or two ago, some local bureaucrat in Oregon shut down a 7-year-old girl's lemonade stand because she had not paid the \$120 required to get a restaurant license. The bureaucrat's supervisor defended the action because some government officials will never admit a mistake. Fortunately, elected officials got the action rescinded and let the little girl operate her lemonade stand.

I thought about this when I heard that Big Brother had struck once again