

laughter in the Montessori building that is at the very heart of building community.

And, my favorite, you will find Cee on vacation in the middle of the school year because she values balance in her life and she understands the importance of her family.

I was not surprised to learn that Cee was nominated and ultimately selected to be one of the St. Madeleine Sophie Award winners. Cee has been an amazing mentor to me and I can say from the very depth of my being that I have learned more from Cee Salberg about teaching and learning and about what it means to be a Sacred Heart educator than from any other person in my career. Cee is a woman who St. Madeleine Sophie Barat and St. Rose Philippine Duchesne would recognize as one of their own.

I want to end by reading a nice poem that was written by a member of Cee's staff.

There once was a principal named Cee  
As good at her job as she could be.  
She juggles admins, parents, kids and teachers,

But she'd rather be cheering in the bleachers  
For the San Francisco Giants, her favorite team.

Soon, the World Series? Hey, a girl can dream!

Cee and Keir travel to many a port.  
And luckily, Janet can hold down the fort.  
At work and at home, Cee has a great crew.  
She's the captain, she knows what to do!  
For Cee to get this award, we're all very proud,

And not a bit shy to say right out loud:  
She deserves this award and can pass any test.

All of us know that Cee is the best!

Cee, it is a true honor and pleasure to be your friend and your colleague. I look forward to celebrating your retirement with you in about 15-20 years.

Congratulations.

Madam Speaker, I ask the entire House of Representatives to join me in offering our congratulations to Cee Salberg on the very special occasion of being chosen for the St. Madeleine Sophie Award, and for all she does daily to strengthen our community and our country.

## SUPPORTING CAMPUS FIRE SAFETY MONTH

SPEECH OF

**HON. PHIL GINGREY**

OF GEORGIA

IN THE HOUSE OF REPRESENTATIVES

*Tuesday, October 6, 2009*

Mr. GINGREY of Georgia. Madam Speaker, I rise today to express my support for H. Res. 167, a resolution that supports the goals and ideals of recognizing September as Campus Fire Safety Month. This recognition would both heighten awareness and encourage improvements in the overall safety on our college and university campuses.

Since January 2000, 129 people including students, parents, and children, have died in student housing fires, many of which were preventable. Currently a majority of college students live off campus, and eighty percent of these deaths have occurred in off campus housing. One recent example is more personal for me. Over the 2008 Christmas break, there was a suspected arson at the Sigma Nu fraternity house at Texas A&M University. Thankfully, no one was residing in the house at that time, but as a Sigma Nu from my days

at Georgia Tech, my prayers continue to be with the chapter in Texas for the rebuilding of their residence.

Nationally, more needs to be done to improve campus-wide fire safety awareness programs so as to prevent the loss of life and property damage on college and university campuses. Many of these fatal fires have occurred in buildings where the fire safety systems have been compromised, are obsolete, or have been disabled by occupants. College administrations must continue to make students aware of the need for automatic fire alarm systems and the safety they provide to occupants and local fire departments.

Madam Speaker, fire safety education is imperative on college and university campuses across the nation. This resolution encourages administrators and municipalities to evaluate the level of fire safety being provided in both on- and off-campus student housing. It further calls upon them take the necessary steps to ensure fire safe living environments through fire safety education, installation of fire suppression and detection systems, and the development and enforcement of applicable codes relating to fire safety. I urge all of my colleagues to support this resolution so that we can protect future generations of our nation's leaders from the devastating and potentially life threatening effects of campus fires.

## GOVERNORS OF IDAHO, INDIANA, AND LOUISIANA EXPRESS CONCERNS WITH UNFUNDED MANDATES IN HEALTH REFORM

**HON. MIKE ROGERS**

OF MICHIGAN

IN THE HOUSE OF REPRESENTATIVES

*Wednesday, October 7, 2009*

Mr. ROGERS of Michigan. Madam Speaker, I rise today to express concerns regarding health reform proposals which would create unfunded state mandates. Legislation currently before the House would dramatically expand the Medicaid program and place over \$35 billion in new liabilities on state budgets over the next ten years. In addition, these proposals would expand the federal government's role in administering Medicaid, which would severely handcuff states' ability to run their own programs and preempt state authority to manage Medicaid eligibility and benefits.

Over the last several weeks, governors have expressed concerns over these proposals. I would like to submit for the record the following letters from the governors of Idaho, Indiana, Louisiana and Minnesota:

SEPTEMBER 15, 2009.

Hon. MIKE CRAPO,  
U.S. Senate, Dirksen Senate Office Building,  
Washington, DC.

DEAR SENATOR CRAPO: Idaho has a proud history of fiscal responsibility, ensuring that our State government serves its proper role for the people of Idaho while staying within their financial means. As the United States Congress attempts to address the healthcare challenges facing our nation, it is important that we remain diligent in assessing the implications of our decisions, always ensuring that we take seriously our duty to safeguard the financial resources of the American public, and allocating taxpayer money in an efficient and effective manner.

As revised healthcare proposals continue appearing in Congress, the full consequences

of these reforms remain unknown and we are uncertain of the possible negative impacts on local businesses, families and senior citizens. However, it is clear that these sweeping proposals would irresponsibly shift a substantial and unmanageable financial burden to the states. Like Idaho, many states already are functioning under severely limited and strained budgets. It is certain that the burden of these reforms would be placed upon the shoulders of hardworking Americans.

The costs associated with these proposed reforms are astounding. Conservative estimates from the Idaho Division of Medicaid indicate that the bill's Medicaid eligibility proposal would increase our state share of Medicaid and the federal matching rate effective would drop in the middle of fiscal year 2011, leaving Idaho struggling to fill the void. Idaho's tax base could not support this large unfunded mandate without resorting to tax increases, including a possible increase in Idaho's already 6-percent sales tax—an irresponsible action which would do serious harm to Idaho taxpayers. The proposed reforms would impose an undue burden on citizens already struggling in this difficult economy.

It has been estimated that combined federal-state Medicaid costs in Idaho could increase by \$501 million. In addition, raising the Medicaid reimbursement rate to 110 percent of the Medicare reimbursement rate would increase total federal-state costs \$50 million more.

This proposed change in the federal reimbursement rate likely would reduce the number of plans that are offered to persons on Medicare, resulting in increased premiums and reduced services and access to service providers. Seniors in rural Idaho already have trouble finding providers who accept Medicare patients.

Should these changes be approved, that trend could continue statewide—severely limiting access to medical care for some of Idaho's most vulnerable residents. The people of Idaho have entrusted us with a responsibility to use our government resources wisely and efficiently. Imposing costly federal mandates that cannot be sustained in the long run is an irresponsible violation of this public trust. Quite simply, these proposals are financially irresponsible and would not adequately address the needs of senior citizens and other vulnerable groups.

I encourage you to join me in opposing current health care reform proposals. By ending these nonsensical debates and stopping the proposed reforms, we can move forward in a more positive, measured and reasonable direction, using common sense to find a workable healthcare solution that benefits all Americans.

As Always—Idaho "Esto Perpetua",  
C.L. "BUTCH" OTTER,  
Governor, Idaho.

SEPTEMBER 8, 2009.

Hon. RICHARD LUGAR,  
Hart Senate Office Building, Washington, DC.

DEAR SENATOR LUGAR: During your summer recess I am sure that many, if not all of you heard from your constituents regarding health care reform.

I have heard from them as well. In fact, over the past few months, I have watched Americans come forward to passionately express their anxieties about the legislation currently making its way through Congress. Their worries are well-founded.

There is no disputing the fact that aspects of American health care, such as access and affordability, truly do need to be restructured and improved. Yet, I have serious concerns about Congress's proposed solutions to these problems. In fact, I fear the current rush to overhaul the system will ultimately

do more damage than good and create far more problems than it solves.

And unfortunately, Indiana would bear the brunt of many of the reckless policies being proposed. For example, our Healthy Indiana Plan (HIP), an innovative and successful state sponsored health insurance program for uninsured citizens, would suffer greatly as Congress expands Medicaid coverage, forcing many of the Hoosiers already enrolled in HIP out of the plan and into a broken Medicaid program that does not focus on prevention, healthy lifestyles, or personal responsibility.

Additionally, states will likely have to pick up the tab for this extension of Medicaid. We have estimated that the price for Indiana could reach upwards of \$724 million annually. These additional costs will overwhelm our resources and obliterate the reserves we have fought so hard to protect.

While these reforms could do serious damage to our state, I fear they will also have harmful consequences all across the country by reducing the quality and quantity of available medical care, stifling innovation, and further burdening taxpayers.

There is another way. Americans from all walks of life and every political stripe should work together with President Obama and Congress to create a set of measured and sensible reforms that bring down costs, increase access and portability and stress the importance of innovative state-run health insurance programs.

The majority of Americans do believe that health care reform is needed, but do not believe that the legislation currently on offer is the answer. I agree. And I will do everything in my power to raise these concerns and work with you to find a solution.

Sincerely,

MITCH DANIELS,  
*Governor, Indiana.*

SEPTEMBER 30, 2009.

Hon. STEVE SCALISE,  
*Cannon House Office Building, Washington, DC.*

DEAR CONGRESSMAN SCALISE: I join many of my fellow Republican and Democrat governors in expressing concern with any health care legislation being signed into law that would serve as an unfunded mandate to states.

Louisiana is similar to many other states around the country in that we are attempting to address budgetary deficits in large part by working to streamline government to be more efficient and cost-effective. In short, we are trying to emulate many of our working families, small businesses and seniors by watching our spending, doing more with less, and making every dollar count.

However, Louisiana's budgetary situation is uniquely challenged due to an unprecedented FMAP rate drop from 72 to 63.1 percent beginning next fiscal year that will cost Louisiana at least \$700 million annually. This additional cost will place significant pressures on our ability to expand our economy, create new jobs and protect critical services in our state.

Louisiana is proud of its commitment to its citizens' health in the face of long-standing issues of extreme poverty experienced in few other states. Our state is a national model for insuring children with over a 95% rate of child insurance and we were recently recognized for achieving the 2nd highest child immunization rates in the nation after an intensive state-wide private-public effort.

My Department of Health & Hospitals has submitted a Medicaid waiver to the US Department of Health & Human Services that

can help improve the cost and quality delivered in the Medicaid program. This waiver proposes national best practices of coordinated care, medical homes, provider payment reform, electronic medical records, and consumer incentives to manage cost and improve quality. This proposal can help improve the efficiency in Medicaid and utilize those savings, along with the shifting of DSH dollars from expensive hospital based care to community based outpatient care, to expand coverage through private insurance to tens of thousands of adults in our state.

Again, I ask that you consider the budgetary pressures being felt by Louisiana and many other states and avoid passing any health care legislation that would serve as an unfunded mandate to the states.

Best regards,

BOBBY JINDAL,  
*Governor, Louisiana.*

[From the Washington Post, Aug. 3, 2009]  
TO FIX HEALTH CARE, FOLLOW THE STATES  
(By Governor Tim Pawlenty of Minnesota)

If you tie money to results, you'll get better results. Unfortunately, government often dumps money into programs without regard to accountability and outcomes. This past week, Democrats in Congress have been busy tinkering with a Washington takeover of the health-care system, but perhaps they should look instead to the states for models of market-driven, patient-centered and quality-focused reform. Rather than taking power away from states, federal health-care reform should use the lessons we've learned tackling this crisis in our back yards.

In Minnesota, our state employee health-care plan has demonstrated incredible results by linking outcomes to value. State employees in Minnesota can choose any clinic available to them in the health-care network they've selected. However, individuals who use more costly and less-efficient clinics are required to pay more out-of-pocket. Not surprisingly, informed health-care consumers vote wisely with their feet and their wallets. Employees overwhelmingly selected providers who deliver higher quality and lower costs as a result of getting things right the first time. The payoff is straightforward: For two of the past five years, we've had zero percent premium increases in the state employee insurance plan.

Minnesota has also implemented an innovative program called QCARE, for Quality Care and Rewarding Excellence. QCARE identifies quality measures, sets aggressive outcome targets for providers, makes comparable measures transparent to the public and changes the payment system to reward quality rather than quantity. We must stop paying based on the number of procedures and start paying based on results.

Instead of returning power to patients and rewarding positive outcomes, many Democrats in Washington want a government-run plan that would require states to comply with dozens of new mandates and regulations. One study by the Lewin Group recently concluded that an estimated 114 million Americans could be displaced from their current coverage under such a plan, and another study by House Republicans said the plan could result in the loss of up to 5 million jobs over the next 10 years.

In typical fashion, the self-proclaimed experts piecing together this Democratic health-care legislation are focusing on only one leg—access—of a three-legged stool that also includes cost and quality. Expanding access to health care is a worthwhile goal. But equal or greater focus should be placed on

containing costs for the vast majority of Americans who already have insurance. Those costs will not be contained by a massive expansion of federal programs.

Massachusetts's experience should caution Congress against focusing primarily on access. While the Massachusetts plan has reduced the number of uninsured people, costs have been dramatically higher than expected. The result? Increased taxes and fees. The Boston Globe has reported on a current short-term funding gap and the need to obtain a new federal bailout.

Imagine the scope of tax increases, or additional deficit spending, if that approach is utilized for the entire country.

IN HONOR OF THE CALIFORNIA  
UNIVERSITY OF PENNSYLVANIA  
STUDENTS, FACULTY, AND  
STAFF WHO HAVE SERVED OUR  
NATION IN IRAQ

HON. JOHN P. MURTHA

OF PENNSYLVANIA

IN THE HOUSE OF REPRESENTATIVES

Wednesday, October 7, 2009

Mr. MURTHA. Madam Speaker, I rise today to ask this chamber to recognize the students, faculty, and staff at California University of Pennsylvania who have valiantly served their country in Iraq. Cal. U. students have an exemplary record of serving our country in times of need and have done so again during the war in Iraq.

There have been nineteen California University students who have been deployed to Iraq. Furthermore, five members of the staff and faculty were also deployed. Many were part of the Pennsylvania Army National Guard 56th Stryker Brigade Combat Team, north of Baghdad. This was the largest National Guard call-up in support of a single operation in the history of the university. I have joined my colleagues in recognizing the 56th Stryker Brigade by becoming an original cosponsor of H. Res. 754, which honors the citizen-soldiers of the National Guard of the State of Pennsylvania, including the 56th Brigade Combat Team (Stryker) of the Pennsylvania Army National Guard on its return to the United States from deployment in Iraq.

Madam Speaker, these students, just like countless others across Pennsylvania and the rest of the country, are choosing to serve their nation and put their own education on hold.

I have seen the consequences and effects of returning home after combat and I am pleased that Cal. U. has an Office of Veterans Affairs. This office has been instrumental in helping veterans reintegrate into the university community and has helped to facilitate the issuance of G.I. Bill benefits. This is an excellent way to help those who have given so much to our country.

I wish to conclude my remarks by commending the California University of Pennsylvania students, faculty and staff members who have selflessly dedicated themselves to our great nation by serving their country. I would also like to commend students and university staff and faculty across our great nation who have done the same.