

ONE HUNDRED ELEVENTH CONGRESS
Congress of the United States
House of Representatives
COMMITTEE ON ENERGY AND COMMERCE
2125 RAYBURN HOUSE OFFICE BUILDING
WASHINGTON, DC 20515-6115

Majority (202) 225-2927
Minority (202) 225-3641

MEMORANDUM

September 11, 2010

To: Members of the Subcommittee on Health

Fr: Democratic Health Subcommittee Staff

Re: Hearing on pending public health legislation

On Tuesday, September 14, 2010 at 3:00 p.m. in room 2322 of the Rayburn House Office Building, the Subcommittee on Health will hold a legislative hearing on the following pending public health bills:

- H.R. 211, Calling for 2-1-1 Act of 2009
- H.R. 758, Pediatric Research Consortia Establishment Act
- H.R. 1032, Heart Disease Education, Analysis Research, and Treatment for Women Act
- H.R. 1210, Arthritis Prevention, Control, and Cure Act of 2009
- H.R. 1230, Bone Marrow Failure Disease Research and Treatment Act of 2009
- H.R. 1362, National MS and Parkinson's Disease Registries Act
- H.R. 1995, Eliminating Disparities in Diabetes Prevention Access and Care Act of 2009
- H.R. 2408, Scleroderma Research and Awareness Act
- H.R. 2818, Methamphetamine Education, Treatment, and Hope Act of 2009
- H.R. 2941, Johanna's Law Reauthorization
- H.R. 2999, Veterinary Public Health Workforce and Education Act
- H.R. 5354, Gestational Diabetes Act of 2009
- H.R. 5462, Birth Defects Prevention, Risk Reduction, and Awareness Act of 2010
- H.R. 5986, Neglected Infections of Impoverished Americans Act of 2010
- H.R. 6012, Diabetes Screening Utilization
- H.R. 6081, Stem Cell Therapeutic and Research Reauthorization Act of 2010

- H.R. ____, Telehealth Improvement and Expansion Act of 2010
- H.R. ____, Health Data Collection Improvement Act

I. H.R. 211, Calling for 2-1-1 Act of 2009

This bill requires the Secretary of Health and Human Services (HHS) to award a grant to each state (based on a formula to-be-developed by the Secretary) to make the 2-1-1 health and human services referral service available throughout the state. The bill specifies that the 2-1-1 service will be operated through a lead entity that either has previously had responsibility to carry out this service or meets certain criteria. It authorizes \$150 million for each of fiscal years 2009 and 2010 and \$100 million for each of fiscal years 2011-2014 to carry out the bill's activities.

II. H.R. 758, Pediatric Research Consortia Establishment Act

This bill requires the National Institutes of Health (NIH) to establish up to 20 pediatric research consortia throughout the nation. Each consortium will be a collaborative effort involving a leading "hub" pediatric medical center and numerous supporting "spoke" institutions. The consortia will focus on both basic and translational research, as well as training for new researchers. Funding will be based on the likelihood of bringing together investigators from multiple disciplines to comprehensively address child health and lifelong genetically-based chronic illness.

III. H.R. 1032, Heart Disease Education, Analysis Research, and Treatment for Women Act

This bill codifies Food and Drug Administration (FDA) regulations that require the inclusion of women in clinical trials submitted to FDA to support an application for a drug, device, or biologics approval. It requires that patient safety data reported to and among the network of patient safety databases be stratified by gender. In addition, the bill requires that the Department of Health and Human Services (HHS) carry out an education campaign about heart disease and women and reauthorizes the WISEWOMAN program at the Centers for Disease Control and Prevention (CDC). The bill authorizes the WISEWOMAN program at: \$70 million for fiscal year 2010, \$73.5 million for fiscal year 2011, \$77 million for fiscal year 2012, \$81 million for fiscal year 2013, and \$85 million for fiscal year 2014.

IV. H.R. 1210, Arthritis Prevention, Control, and Cure Act of 2009

This bill authorizes the Secretary of Health and Human Services (HHS) to develop and implement a National Arthritis Action Program, at a level of \$32 million in fiscal year 2010, rising to \$40 million in fiscal year 2014. The program would support control, prevention, surveillance, research, education, and outreach activities, through grants and direct support to public or private nonprofit entities and states. The bill further authorizes the Secretary to expand and intensify programs of the National Institutes of

Health (NIH) with respect to research and related activities concerning various forms of juvenile arthritis and related conditions. It also provides for the Centers for Disease Control and Prevention (CDC) to award grants or enter into cooperative agreements for the collection, analysis, and reporting of data on juvenile arthritis, and supports the development of a national juvenile arthritis population-based database. It authorizes \$25 million for each of the fiscal years 2010-2014 for these CDC surveillance activities. In addition, the bill requires the Secretary to provide grants to support pediatric rheumatology training at a level of \$3.75 million for each of fiscal years 2010- 2014. It also directs the Secretary to establish and carry out a pediatric rheumatology loan repayment program, as needed. For the purposes of this subsection, the Secretary may reserve funding from amounts already appropriated to the Health Resources and Services Administration for the fiscal year involved.

V. H.R. 1230, Bone Marrow Failure Disease Research and Treatment Act of 2009

This bill requires the Secretary of Health and Human Services (HHS), acting through the Director of the Centers for Disease Control and Prevention (CDC), to develop a system to collect data on acquired bone marrow failure diseases and to establish the National Acquired Bone Marrow Failure Disease Registry and allows the Secretary to award grants to, and enter to contracts and cooperative agreements with public or private nonprofit entities for the management of the Registry. It also requires the Secretary to conduct pilot studies to determine which environmental factors may cause acquired bone marrow failure diseases. It authorizes \$3 million for each of fiscal years 2010-2014 to carry out these activities. The bill further requires the Secretary to establish outreach and information programs targeted to minority populations affected by such diseases and to award grants to, or enter into cooperative agreements with, entities to perform research on such diseases. It authorizes \$2 million for each of fiscal years 2010-2014 to carry out these activities. Finally, the bill requires the Secretary, acting through the Director of the Agency for Healthcare Research and Quality (AHRQ), to award grants to entities to improve diagnostic practices and quality of care with respect to patients with acquired bone marrow failure diseases.

VI. H.R. 1362, National MS and Parkinson's Disease Registries Act

This bill requires the Secretary of Health and Human Services (HHS) to develop surveillance systems, in the form of registries, for both Multiple Sclerosis and Parkinson's disease. It also requires the Secretary to establish an advisory committee on Neurological Disease Registries to review and make recommendations to the Secretary on the surveillance activities authorized in this bill, including the development and maintenance of the systems. The bill authorizes \$5 million for each of fiscal years 2010-2014 to carry out the bill's activities.

VII. H.R. 1995, Eliminating Disparities in Diabetes Prevention Access and Care Act of 2009

This bill requires the National Institutes of Health (NIH) to expand, intensify, and support ongoing research and other activities with respect to pre-diabetes and diabetes in minority populations and carry out health care professional mentorship and education activities specific to diabetes. It also requires the Centers for Disease Control and Prevention (CDC) to conduct and support research and other activities with respect to diabetes in minority populations, conduct and support public education efforts, and carry out culturally-appropriate diabetes health promotion programs. In addition, the bill requires the Health Resources and Services Administration (HRSA) to conduct and support programs to educate health professionals on diabetes in minority populations. It authorizes such sums as may be necessary for fiscal year 2010 and each subsequent fiscal year to carry out the bill's activities.

VIII. H.R. 2408, Scleroderma Research and Awareness Act

This bill directs the Director of the National Institute of Arthritis and Musculoskeletal and Skin Diseases (NIAMSD) of the National Institutes of Health (NIH) to expand, intensify and coordinate activities relating to scleroderma. It requires NIAMSD to research the causes and treatment of scleroderma and to establish a scleroderma patient registry at authorization levels of \$25 million for fiscal year 2010, \$30 million for fiscal year 2011 and \$35 million for fiscal year 2012. It also requires the Director of the Centers for Disease Control and Prevention (CDC) to carry out an education campaign to increase awareness of scleroderma and authorizes \$2.5 million for fiscal years 2010-2012 for this activity.

IX. H.R. 2818, Methamphetamine Education, Treatment, and Hope Act of 2009

This bill expands and strengthens the Substance Abuse and Mental Health Services Administration (SAMHSA) activities to address the prevention and treatment of addiction to methamphetamine and other drugs. It refines an existing family-centered residential drug treatment program for pregnant and postpartum women and authorizes \$20 million for fiscal year 2010, \$21 million for fiscal year 2011, \$22 million for fiscal year 2012, \$23 million for fiscal year 2013, and \$24million for fiscal year 2014. The bill also requires support for a workplace-based drug information clearinghouse, and student involvement in prevention programs for methamphetamine and other drugs.

X. H.R. 2941, Johanna's Law Reauthorization

This bill reauthorizes and expands the Center for Disease Control and Prevention (CDC) programs to educate women and healthcare providers about gynecologic cancers. It authorizes \$16.5 million for the period of fiscal years 2010-2012 and such sums as are necessary for each subsequent fiscal year for these efforts. It further creates demonstration projects to evaluate research and outreach strategies for educating women and healthcare providers about gynecological cancers. For fiscal years 2010-2012, \$15 million is authorized for these activities; such sums as are necessary are authorized for each subsequent fiscal year.

XI. H.R. 2999, Veterinary Public Health Workforce and Education Act

This bill authorizes a competitive grant program for schools of veterinary medicine. Schools can use these grants for faculty recruitment, physical capacity expansion, or the development of curricula to retrain midcareer professionals. It authorizes \$100 million for fiscal year 2010, \$100 million for fiscal year 2011 and \$50 million for each of fiscal years 2012-2014 for these activities. The bill also establishes a loan repayment program whereby the federal government repays loans for veterinarians that make a four-year teaching commitment at a school of veterinary medicine. It authorizes \$20 million for each of fiscal years 2010-2014 for this program. In addition, the bill creates two fellowship programs for public health veterinarians that would be administered by the Department of Health and Human Services (HHS) but would be available to all federal agencies that utilize public health veterinarians. It authorizes \$2.5 million for each of fiscal years 2010-2014 to support these fellowships. Finally, the bill establishes a Division of Veterinary Medicine and Public Health at the Health Resources and Services Administration (HRSA).

XII. H.R. 5354, the Gestational Diabetes Act of 2009

This bill requires the Centers for Disease Control and Prevention (CDC) to conduct a multi-site gestational diabetes research project to expand and enhance surveillance data and public health research on gestational diabetes. It would award competitive grants to eligible entities for demonstration projects to build capacity with key stakeholders, establish new surveillance systems, and implement and evaluate evidence-based interventions to reduce the incidence of gestational diabetes and its recurrence and to prevent type 2 diabetes after pregnancy. It authorizes \$5 million for each of fiscal years 2010- 2014 for these activities. In addition, the bill requires the CDC Director to conduct research on the epidemiology of gestational diabetes, and on screening methods at an authorization level of \$5 million for each of fiscal years 2010-2014. Finally, the bill requires the CDC Director to encourage postpartum screenings after a diagnosis of gestational diabetes within CDC-funded state-based diabetes prevention and control programs.

XIII. H.R. 5462, Birth Defects Prevention, Risk Reduction, and Awareness Act of 2010.

This bill requires the Secretary of Health and Human Services (HHS,) acting through the Director of the Centers for Disease Control and Prevention (CDC,) to establish and implement a birth defects prevention and public awareness program about pregnancy and breastfeeding information services. It requires CDC to award grants for the provision of, or campaigns to increase awareness about, pregnancy and breastfeeding information services. The bill also requires CDC to award grants for research on maternal exposures and maternal health conditions that may influence the risk of adverse pregnancy outcomes. It authorizes \$5 million for fiscal year 2011, \$6 million for fiscal year 2012, \$7 million for fiscal year 2013, \$8 million for fiscal year 2014 and \$9 million for fiscal year 2015 to carry out the bill's activities.

XIV. H.R. 5986, Neglected Infections of Impoverished Americans Act of 2010

This bill requires the Secretary of Health and Human Services (HHS) to develop a report on the epidemiology and impact of, and appropriate funding required to address neglected infectious diseases of poverty in the United States.

XV. H.R. 6012, Diabetes Screening Utilization Act

This bill directs the Secretary of Health and Human Services (HHS) to review the utilization of diabetes screening benefits and identify existing efforts by HHS agencies, and private and non-profit sectors to increase awareness of diabetes screening benefits. An annual report to Congress on these activities is required.

XVI. H.R. 6081, Stem Cell Therapeutic and Research Reauthorization Act of 2010

This bill reauthorizes the C.W. Bill Young Cell Transplantation Program, which includes the National Registry for adult donors of bone marrow, peripheral blood adult stem cells, and umbilical cord blood units; the Office of Patient Advocacy; and the Stem Cell Therapeutic Outcomes Database. It authorizes \$30 million for each of fiscal years 2011- 2014 and \$33 million for fiscal year 2015 for the program. The bill also reauthorizes the National Cord Blood Inventory (NCBI), a program that provides grants to public cord blood banks to assist them in collecting donated cord blood units that are then listed on the National Registry. \$23 million for each of fiscal years 2011- 2014 and \$20 million for fiscal year 2015 is authorized for the NCBI.

XVII. H.R. ____, Telehealth Improvement and Expansion Act of 2010

This bill reauthorizes three telehealth programs currently administered by the Health Resources and Services Administration (HRSA), including (1) the telehealth network program, (2) the telehealth resource center program, and (3) incentive grants to coordinate telemedicine activities among the states. The bill also revises the requirements for funding priorities within both the telehealth network and telehealth resource center programs. It authorizes each of the three programs at \$10 million for each of fiscal years 2012- 2016.

XVIII. H.R. ____, Health Data Collection Improvement Act

This bill provides for the voluntary collection of data on sexual orientation and gender identity, as appropriate and practicable, in programs and surveys supported by the Department of Health and Human Services (HHS). It requires the Secretary to develop standards for the development of questions and the appropriate and confidential collection of such information. It also directs that this information be analyzed to assess disparities in health status and access to healthcare.

XVIII. Witnesses

The following witnesses have been invited to testify:

Lawrence Tabak, D.D.S., Ph.D.

Principal Deputy Director
National Institutes of Health (NIH)

Ileana Arias, Ph.D.

Principal Deputy Director
Centers for Disease Control (CDC)

Marcia Brand Ph.D.

Deputy Administrator
Health Resources and Services Administration (HRSA)

Available for SAMHSA related questions:

H. Westley Clark, M.D., J.D. M.P.H., CAS, FASAM

Director
Center for Substance Abuse Treatment
Substance Abuse and Mental Health Services Administration (SAMHSA)