and agree to the resolution, House Resolution 163.

The question was taken; and (two-thirds having voted in favor thereof) the rules were suspended and the resolution was agreed to.

A motion to reconsider was laid on the table.

LUPUS RESEARCH AND CARE AMENDMENTS OF 2000

Mr. BILIRAKIS. Mr. Speaker, I move to suspend the rules and pass the bill (H.R. 762) to amend the Public Health Service Act to provide for research and services with respect to lupus, as amended.

The Clerk read as follows:

H.R. 762

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 ''Lupus Research and Care Amendments of 2000''.

SEC. 2. FINDINGS.

The Congress finds that—

(1) lupus is a serious, complex, inflammatory, autoimmune disease of particular concern to women;

(2) lupus affects women 9 times more often than men;

(3) there are 3 main types of lupus: systemic lupus, a serious form of the disease that affects many parts of the body; discoid lupus, a form of the disease that affects mainly the skin; and drug-induced lupus caused by certain medications;

(4) lupus can be fatal if not detected and treated early;

(5) the disease can simultaneously affect various areas of the body, such as the skin, joints, kidneys, and brain, and can be difficult to diagnose because the symptoms of lupus are similar to those of many other diseases;

(6) lupus disproportionately affects African-American women, as the prevalence of the disease among such women is 3 times the prevalence among white women, and an estimated 1 in 250 African-American women between the ages of 15 and 65 develops the disease;

(7) it has been estimated that between 1,400,000 and 2,000,000 Americans have been diagnosed with the disease, and that many more have undiagnosed cases;

(8) current treatments for the disease can be effective, but may lead to damaging side effects;

(9) many victims of the disease suffer debilitating pain and fatigue, making it difficult to maintain employment and lead normal lives; and

(10) in fiscal year 1996, the amount allocated by the National Institutes of Health for research on lupus was $33,000,000, which is less than ½ of 1 percent of the budget for such Institutes.

TITLE I—RESEARCH ON LUPUS

SEC. 101. EXPANSION AND INTENSIFICATION OF ACTIVITIES.

Subpart 4 of part C of title IV of the Public Health Service Act (42 U.S.C. 285d et seq.) is amended by inserting after section 441 the following section:

''LUPUS

''SEC. 441A. (a) IN GENERAL.—The Director of the Institute shall expand and intensify research and related activities of the Institute with respect to lupus.

''(b) COORDINATION WITH OTHER INSTITUTES.—The Director of the Institute shall coordinate the activities of the Director under subsection (a) with similar activities conducted by the other national research institutes and agencies of the National Institutes of Health to the extent that such Institutes and agencies have responsibilities that are related to lupus.

''(c) PROGRAMS FOR LUPUS.—In carrying out subsection (a), the Director of the Institute shall conduct or support research to expand the understanding of the causes of, and to find a cure for, lupus. Activities under such subsection shall include conducting and supporting the following:

''(1) Research to determine the reasons underlying the elevated prevalence of lupus in women, including African-American women.

''(2) Basic research concerning the etiology and causes of the disease.

''(3) Epidemiological studies to address the frequency and natural history of the disease and the differences among the sexes and among racial and ethnic groups with respect to the disease.

''(4) The development of improved diagnostic techniques.

''(5) Clinical research for the development and evaluation of new treatments, including new biological agents.

''(6) Information and education programs for health care professionals and the public.

''(d) AUTHORIZATION OF APPROPRIATIONS.—For the purpose of carrying out this section, there are authorized to be appropriated such sums as may be necessary for each of the fiscal years 2001 through 2003.''.

TITLE II—DELIVERY OF SERVICES REGARDING LUPUS

SEC. 201. ESTABLISHMENT OF PROGRAM OF GRANTS.

(a) IN GENERAL.—The Secretary of Health and Human Services shall in accordance with this title make grants to provide for projects for the establishment, operation, and coordination of effective and cost-efficient systems for the delivery of essential services to individuals with lupus and their families.

(b) RECIPIENTS OF GRANTS.—A grant under subsection (a) may be made to an entity only if the entity is a public or nonprofit private entity, which may include a State or local government; a public or nonprofit private hospital, community-based organization, hospice, ambulatory care facility, community health center, migrant health center, or homeless health center; or other appropriate public or nonprofit private entity.

(c) CERTAIN ACTIVITIES.—To the extent practicable and appropriate, the Secretary shall ensure that projects under subsection (a) provide services for the diagnosis and disease management of lupus. Activities that the Secretary may authorize for such projects may also include the following:

(1) Delivering or enhancing outpatient, ambulatory, and home-based health and support services, including case management and comprehensive treatment services, for individuals with lupus; and delivering or enhancing support services for their families.

(2) Delivering or enhancing inpatient care management services that prevent unnecessary hospitalization or that expedite discharge, as medically appropriate, from inpatient facilities of individuals with lupus.

(3) Improving the quality, availability, and organization of health care and support services (including transportation services, attendant care, homemaker services, day or respite care, and providing counseling on financial assistance and insurance) for individuals with lupus and support services for their families.

(d) INTEGRATION WITH OTHER PROGRAMS.—To the extent practicable and appropriate, the Secretary shall integrate the program under this title with other grant programs carried out by the Secretary, including the program under section 330 of the Public Health Service Act.

SEC. 202. CERTAIN REQUIREMENTS.

A grant may be made under section 201 only if the applicant involved makes the following agreements:

(1) Not more than 5 percent of the grant will be used for administration, accounting, reporting, and program oversight functions.

(2) The grant will be used to supplement and not supplant funds from other sources related to the treatment of lupus.

(3) The applicant will abide by any limitations deemed appropriate by the Secretary on any charges to individuals receiving services pursuant to the grant. As deemed appropriate by the Secretary, such limitations on charges may vary based on the financial circumstances of the individual receiving services.

(4) The grant will not be expended to make payment for services authorized under section 201(a) to the extent that payment has been made, or can reasonably be expected to be made, with respect to such services—

(A) under any State compensation program, under an insurance policy, or under any Federal or State health benefits program; or

(B) by an entity that provides health services on a prepaid basis.

(5) The applicant will, at each site at which the applicant provides services under section 201(a), post a conspicuous notice informing individuals who receive the services of any Federal policies that apply to the applicant with respect to the imposition of charges on such individuals.

SEC. 203. TECHNICAL ASSISTANCE.

The Secretary may provide technical assistance to assist entities in complying with the requirements of this title in order to make such entities eligible to receive grants under section 201.

SEC. 204. DEFINITIONS.

For purposes of this title:

(1) The term ''official poverty line'' means the poverty line established by the Director of the Office of Management and Budget and revised by the Secretary in accordance with section 673(2) of the Omnibus Budget Reconciliation Act of 1981.

(2) The term ''Secretary'' means the Secretary of Health and Human Services.

SEC. 205. AUTHORIZATION OF APPROPRIATIONS.

For the purpose of carrying out this title, there are authorized to be appropriated such sums as may be necessary for each of the fiscal years 2001 through 2003.

The SPEAKER pro tempore. Pursuant to the rule, the gentleman from Florida (Mr. BILIRAKIS) and the gentleman from Ohio (Mr. BROWN) each will control 20 minutes.

The Chair recognizes the gentleman from Florida (Mr. BILIRAKIS).

GENERAL LEAVE

Mr. BILIRAKIS. Mr. Speaker, I ask unanimous consent that all Members may have 5 legislative days within which to revise and extend their remarks and include extraneous material on H.R. 762, the bill now under consideration.

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

There was no objection.

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

Mr. Speaker, it is with great pleasure that I rise today in support of H.R. 762, the Lupus Research and Care Amendments. This important measure addresses the devastating, devastating, I underline devastating, disease of lupus. It was introduced by my colleague, the gentlewoman from Florida (Mrs. MEEK), who lost her sister to complications from the illness.

Lupus is a disease which causes the body's immune system to attack its own cells, resulting in progressive damage to all organs. It affects more than 1.5 million Americans. The vast majority of patients who suffer from lupus are women, and a disproportionate number are minorities. Most women are afflicted in their childbearing years, making it difficult for them to work and care for their families.

H.R. 762 expands lupus-related activities of the National Institutes of Health in the areas of basic research, epidemiology, treatment, diagnosis, and public and health care provider education. It also authorizes project grants for the delivery of essential services to individuals with lupus to be administered through local governments, community hospitals, and other nonprofit health care facilities.

By enhancing research on lupus, the bill before us will speed the day when a cure is found for this terrible disease. H.R. 762 will provide early diagnosis and disease management services for lupus patients. It will also increase outreach and expand patient care among low- income populations. Further, the initiatives authorized under this measure will provide a road map for other private and public programs to help victims of lupus.

H.R. 762, Mr. Speaker, has the support of 245 cosponsors in the House; and it was unanimously approved by the Committee on Commerce last month. I urge my colleagues to join me in supporting passage of this very important legislation.

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

Mr. BROWN of Ohio. Mr. Speaker, I yield myself such time as I may consume.

Mr. Speaker, I want to commend the gentlewoman from Florida (Mrs. MEEK) for her dedication on the issue of lupus and her successful effort to put together widespread support for this bill in Congress. This bill has special meaning for my colleague, and I am proud to be one of the bill's 243 cosponsors.

H.R. 762 provides a blueprint for combating lupus, a complex and lethal autoimmune disorder for which there currently is no cure. Lupus affects nine times more women than men, disproportionately more blacks, Hispanics, more Asians, and is most commonly diagnosed in individuals between the ages of 15 and 45.

The ability of lupus, as well as other autoimmune diseases, to strike someone as young as 15 years old speaks to the need for expanded research. Lupus is not universally fatal. Young people with lupus are capable of living active lives, but diagnosis is difficult. There is not a test for lupus, and young people will continue to suffer and die from lupus without our help.

I am pleased that autoimmune disease research was included in the children's health bill now awaiting the President's signature. Autoimmune diseases are unique. Research on one, like lupus, can benefit many others in a synergistic sort of way.

The bill sponsored by the gentlewoman from Florida is a responsible investment in our Nation's health, and I urge its passage.

Mr. Speaker, I yield 5 minutes to the gentlewoman from Florida (Mrs. MEEK), the author of this bill, who has fought on this issue for months and months and years and years.

(Mrs. MEEK of Florida asked and was given permission to revise and extend her remarks.)

Mrs. MEEK of Florida. Mr. Speaker, I thank the gentleman for yielding me this time. It is a very proud moment for me. It also is a moment of personal feeling at this time. I lost my dear sister to lupus and many of my very close friends.

I want to thank the chairman, the gentleman from Florida (Mr. BILIRAKIS), for having gone with me for quite a few years. I first applied for this bill in 1995, and it has been back and forth. But now we are at the point where he has pushed, as chairman of the Subcommittee on Health and Environment, and now the gentleman from Ohio (Mr. BROWN), as his ranking member. We have 243 people in this Congress who feel this is important.

I am pleased to rise in support of it because it is going to expand and intensify the research part of lupus. NIH each year has done something toward the application of research to lupus, but now we are asking that this be a mandate of NIH to be sure that they expand research efforts, so it will make it much easier to diagnose this. This is a crippler, Mr. Speaker. It is a crippler and it is a killer. It catches women in their childbearing years, and it is time we put research into it to find out about it. There is very little known about this disease, too little known about it with its crippling effects.

Since my arrival at the House in 1993, I have urged the Congress to direct NIH to mount an all-out campaign against lupus. If any of my colleagues have ever seen or talked to someone who suffers from this disease, they will surely understand why. My colleague, the gentlewoman from Florida (Ms. ROS-LEHTINEN), and I have also fought for this in our Dade County. We have found a great number of Hispanic and black people who are certainly besieged by this terrible disease.

I want to assure my dear colleagues that if we pass this bill and the Senate takes it up and passes it on to the President, and if he signs it, we will have alleviated in the future, I am sure, a great deal of pain and suffering.

I want to thank the Speaker, and I want to thank the minority leader, the gentleman from Missouri (Mr. GEPHARDT), the gentleman from Virginia (Mr. BLILEY), the ranking member, the gentleman from Michigan (Mr. DINGELL), and chairman of the subcommittee, the gentleman from Florida (Mr. BILIRAKIS), to be sure, as well as the ranking member, the gentleman from Ohio (Mr. BROWN), of the subcommittee. If it were not for the top of the tickets here pushing this bill, I do not think it would have come to this floor.

A word of thanks to the chairman of the Committee on Appropriations, the gentleman from Florida (Mr. YOUNG), the ranking member, the gentleman from Wisconsin (Mr. OBEY), and chairman of the Subcommittee on Labor, Health and Human Services, and Education, the gentleman from Illinois (Mr. PORTER). And here I want to take a special moment to thank the gentleman from Illinois, Mr. Speaker. Every year, every time the appropriations bill came before him, we did not have any kind of legislation that would authorize it, but he still added money to the NIH budget because he saw the very, very deleterious effects of this disease.

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So I certainly want to thank all those people and last, but not least, my 244 colleagues who have cosponsored this bill for bringing their help in bringing this bipartisan measure to the floor.

I want to especially thank Duane Peters and Lee Peckarsky of the Lupus Foundation of America and all of the dedicated lupus volunteers from all around America who work so tirelessly to support this bill.

Mr. Speaker, we have heard a lot today about lupus. It is an autoimmune disease that afflicts women nine times more than it does men. It has its most significant impact on women during the child-bearing years. About 1.4 million Americans have some form of lupus, one out of every 185 Americans. Many of them do not even recognize that they have it. Many think they have arthritis or some kind of rheumatoid disease because the diagnosis is so very hard.

Lupus disproportionately affects African-American women. The prevalence of lupus among African-American women is three times that of white women. We do not yet know why this is so. This is one of the many mysteries about lupus that still needs to be resolved.

Thousands of women with lupus die each year. Thousands of women die from complications caused by lupus. Many other victims suffer debilitating pain and fatigue, making it difficult to maintain employment and lead normal lives. Many women who have young babies and have lupus cannot even hold their children. Lupus is devastating not only to the patient but to family members, as well.

My bill authorizes appropriations of such funds as are necessary for fiscal year 2000 through fiscal year 2003 for lupus research so badly needed, Mr. Speaker. The education that goes along with this bill is so badly needed and the treatment, as well.

So this also empowers the Secretary of the Department of Health and Human Services to protect the poor and the uninsured from financial devastation by limiting charges to individuals receiving lupus services pursuant to the grant program, the way that we do under the Ryan White CARE Act.

It is very important, Mr. Speaker, that we realize that this is a bipartisan bill that has been carried through this process by both Republicans and Democrats for the benefit of the people of America.

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

Mr. BROWN of Ohio. Mr. Speaker, I 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. Mr. Speaker, I would like to thank the gentleman from Florida (Mr. BILIRAKIS) and thank the gentleman from Ohio (Mr. BROWN) for their leadership in this legislation and the chairman and the ranking member. I am also proud to be a co-sponsor of this important legislation.

But I would really like to shower applause down on my good colleague and friend the gentlewoman from Florida (Mrs. MEEK) for the leadership that she has offered and the persistence that she has offered not only on the floor of the House and tracking this bill through Commerce, but working every year diligently with the appropriators to provide funds for research regarding this devastating disease.

Lupus kills. I lost a very dear friend, a young mother, who did not get a chance to see her children grow up. And then I have a dear friend named Pat who lives valiantly with lupus but yet suffers every day. Her enthusiasm for being alive was seen through her hard work in organizing a Lupus Day walk to raise funds in Houston.

I want to encourage those around the Nation who want to educate people about lupus to continue to go out and walk and to have walks that will raise private money and along with federal funds we may find a cure for this disease that strike down young women.

Lupus does kill. It disproportionately affects African-American women, as the prevalence of the disease among such women is three times the prevalence among white women and an estimated one in 250 African-American women between the ages of 15 and 65 develop the disease. But it affects all women. And more than 1.4 million to 2 million Americans have been diagnosed with the disease and there are many more undiagnosed cases because sometimes people do not know what they have, they just feel they have a few aches and pains. But yet, if they are not diagnosed, they can ultimately die from the disease.

I want to thank the gentlewoman from Florida (Mrs. MEEK) for the $33 million that was allocated in 1996 for the National Institutes for Health to do more research. This is an important legislative initiative. Every time we can come to the floor of the House in a bipartisan way to save lives of Americans, I think, Mr. Speaker, that we are doing what the American people would want us to do.

I hope this legislation will be taken up in the Senate. And I believe that, with the passage of this legislation, we will be able to save many more lives and be on the pathway for doing more to improve the health of all Americans.

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

Mr. BROWN of Ohio. Mr. Speaker, I yield 2 minutes to the gentleman from New Jersey (Mr. PASCRELL).

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

Mr. PASCRELL. Mr. Speaker, I thank the gentleman from Ohio (Mr. BROWN) for yielding me the time.

Mr. Speaker, I would like to begin by acknowledging my colleague, the gentlewoman from Florida (Mrs. MEEK), for her hard work, determination, and advocacy on behalf of those with lupus. This is an issue that the congresswoman has been working on for a very long time. And I am pleased to see that the leadership is working in a bipartisan way to bring this legislation to the floor.

Mr. Speaker, this should be the way we should handle all matters in these final, final days. We need to do here for those least able to help themselves. I think that should be the barometer. It will help us through these tough days.

This is a serious, complex, inflammatory, autoimmune disease that affects women nine times more often than men. Oftentimes those suffering from lupus are not diagnosed in a timely manner. I have seen that happen to close friends. They remain in pain and the sickness progresses.

It has been estimated that between 1.4 and 2 million Americans have been diagnosed with this disease and that many more have undiagnosed cases.

The victims of the disease suffer debilitating pain and fatigue, making it difficult to maintain employment and to lead normal lives.

This critical legislation will correct the oversight that was made in the past by providing increased funding for NIH scientific and clinical research and for improved patient access and care measures. It will ensure that every person who suffers from this disease will receive the highest quality of care possible.

The funding will also improve the quality, availability, and the organization of health care and support services for individuals with lupus and support services for their families.

I wholeheartedly support the passage of this legislation and encourage all my colleagues to do the same.

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

Mr. BROWN of Ohio. Mr. Speaker, I yield 1 minute to the gentleman from New York (Mr. TOWNS).

Mr. TOWNS. Mr. Speaker, let me begin by first congratulating my colleague, the gentlewoman from Florida (Mrs. MEEK), of course and the ranking member of the subcommittee, as well.

Let me just say that this is a very important piece of legislation. As we walk and we talk to people who are suffering from this disease, we think about the fact that maybe we need to do more. I think that this is a giant step in the right direction because we need to do more in terms of research and need to make certain that treatment is available to those that suffer from this illness.

I think that access to treatment is very, very important. I think that when we look at many people in some of the rural areas of this country that are having great difficulty getting treatment, I think that this is the right step.

I would like to again congratulate my colleague from Ohio and, of course, my colleague from Florida, both colleagues from Florida, for their outstanding work in this effort and to say to them that they probably do not realize how many lives they are saving and how many people that are encountering all kinds of difficulties that they are going to make life better for all of them. And I want to salute them for that.

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

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

Mr. Speaker, just very quickly. This is a very, very important piece of legislation, and we are all very pleased to have been a part of it. An awful lot of hard work went into it.

The personal staff of the gentlewoman from Florida (Mrs. MEEK) and my personal staff, Anne Esposito particularly, and the Committee on Commerce both majority and minority staffs are really to be congratulated. They are responsible for this more so than the rest of us.

Mr. Speaker, I ask for support of this legislation.

Mr. DAVIS of Virginia. Mr. Speaker, I rise today in strong support of H.R. 762, the Lupus Research and Care Amendments of 1999. I am proud to be a cosponsor of this legislation to expand and intensify the research efforts of the National Institute of Health to diagnose, treat, and eventually cure lupus.

Lupus is a very serious illness that causes the body's immune system to attack its own cells. More people suffer from this little-known illness than from cerebral palsy, multiple sclerosis, sickle cell anemia, cystic fibrosis, and AIDS combined. Although lupus may occur at any age and in either sex, 90 percent of those affected are women. During the childbearing years, lupus strikes women 10 to 15 times more often than men. More than 1.5 million Americans have been diagnosed with this terrible disease. Many more cases go undiagnosed, since the symptoms of this disease tend to wax and wane with passing time.

H.R. 762 would require the Director of the National Institute of Arthritis and Musculoskeletal and Skin Diseases to expand its research activities on the disease lupus, especially with regard to its increasing prevalence among women. The bill expands lupus-related activities at the Institute into the areas of basic research, epidemiology, treatment, diagnosis, and public and health care provider education. H.R. 762 also authorizes project grants to improve health delivery services through local governments and to community hospitals.

Mr. Speaker, H.R. 762 would provide the needed support to NIH in their works towards making medical breakthroughs in the fight against lupus. I urge all of my colleagues to join me in voting in support of the lupus research and care amendments.

Mr. DINGELL. Mr. Speaker, I strongly support H.R. 762, the Lupus Research and Care Amendments. I want to commend my good friend and colleague, Representative CARRIE MEEK for her steadfast advocacy for this excellent legislation. Lupus is a debilitating and sometimes fatal auto-immune disease that disproportionately afflicts women, particularly women of color. Today's vote brings help and hope to approximately 1.5 million Americans with lupus, and their families.

H.R. 762 accomplishes two goals. Title I recognizes the National Institute of Health's (NIH) present research activities on the many facets of this disease through the National Institute of Arthritis and Musculoskeletal and Skin Diseases and the Autoimmune Diseases Coordinating Committee. It authorizes appropriations to expand and intensify these activities with emphasis on earlier diagnosis, better treatment, and an eventual cure. Epidemiologic studies and education about lupus for the public and health professionals will also be undertaken with funds made available by this bill.

Title II addresses on-going primary care and treatment needs of poor and uninsured individuals with this expensive-to-treat and debilitating disease. It authorizes the Secretary to award care grants to local governments, community hospitals, health centers, and other nonprofit health facilities for the provision of out-patient care and a breadth of support services to affect individuals and the family members who are involved in their care. The holistic treatment and support services provided by H.R. 762 will diminish the sense of isolation that is concomitant to chronic illness by weaving a safety-net of services.

This an excellent bill and I urge my colleagues to join me in supporting its passage today.

Mrs. MORELLA. Mr. Speaker, I am delighted to join my good friend and colleague, Congresswoman CARRIE MEEK, as we move forward and pass H.R. 762, the Lupus Research and Care Amendments.

This bill would amend the Public Health Service Act and require the Director of the National Institute of Arthritis and Musculoskeletal and Skin Diseases to expand and intensify its research activities on the disease lupus, especially with regard to its increasing prevalence among African-American and other women.

This bill will expand lupus-related activities at the Institute into areas of basic research, treatment, diagnosis, and public and health care provider education.

Mr. Speaker, lupus is an autoimmune disease, passage of this H.R. 762, will leverage H.R. 4365, ‘‘The Children Health Act of 2000’’ which was recently passed by this House.

Title XIX of this bill, ‘‘NIH Initiative on Autoimmune Diseases’’, requires the Director of NIH to expand, intensify, and coordinate the activities of NIH with respect to autoimmune diseases. This includes forming an Autoimmune Diseases Coordinating Committee and Advisory Council that will develop a plan for NIH activities related to autoimmune diseases and to require different institutes within NIH to provide a detailed report to Congress specifying how funds were spent on autoimmune diseases.

Recently, the American Journal of Public Health published a study demonstrating that autoimmune disorders are among the top 10 leading causes of death among women under 65, indeed today, three-quarters of the 13.5 million Americans afflicted with an autoimmune disease are women.

I urge my colleagues to support H.R. 762, to support the health of our nation's citizens.

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

The SPEAKER pro tempore (Mr. GIBBONS). The question is on the motion offered by the gentleman from Florida (Mr. BILIRAKIS) that the House suspend the rules and pass the bill, H.R. 762, as amended.

The question was taken.

Mr. BILIRAKIS. 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.

DRUG DEALER LIABILITY ACT OF 1999

Mr. BILIRAKIS. Mr. Speaker, I move to suspend the rules and pass the bill (H.R. 1042) to amend the Controlled Substances Act to provide civil liability for illegal manufacturers and distributors of controlled substances for the harm caused by the use of those controlled substances.

The Clerk read as follows:

H.R. 1042

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 ‘‘Drug Dealer Liability Act of 1999’’.

SEC. 2. FEDERAL CAUSE OF ACTION FOR DRUG DEALER LIABILITY.

(a) IN GENERAL.—Part E of the Controlled Substances Act is amended by adding at the end the following:

‘‘SEC. 521. FEDERAL CAUSE OF ACTION FOR DRUG DEALER LIABILITY.

‘‘(a) IN GENERAL.—Except as provided in subsection (b), any person who manufactures or distributes a controlled substance in a felony violation of this title or title III shall be liable in a civil action to any party harmed, directly or indirectly, by the use of that controlled substance.

‘‘(b) EXCEPTION.—An individual user of a controlled substance may not bring or maintain an action under this section unless the individual personally discloses to narcotics enforcement authorities all of the information known to the individual regarding all that individual's sources of illegal controlled substances.’’.

(b) CLERICAL AMENDMENT.—The table of sections for the Comprehensive Drug Abuse Prevention and Control Act of 1970 is amended by inserting after the time relating to section 520 the following new item:

‘‘Sec. 521. Federal cause of action for drug dealer liability.’’.

The SPEAKER pro tempore. Pursuant to the rule, the gentleman from Florida (Mr. BILIRAKIS) and the gentleman from Ohio (Mr. BROWN) each will control 20 minutes.

The Chair recognizes the gentleman from Florida (Mr. BILIRAKIS).

GENERAL LEAVE

Mr. BILIRAKIS. Mr. Speaker, I ask unanimous consent that all Members may have 5 legislative days within which to revise and extend their remarks and to include extraneous material on H.R. 1042.

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

There was no objection.

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

Mr. Speaker, I rise today in support of H.R. 1042, the Drug Dealer Liability Act.

I am pleased to act on this legislation because it will give law enforcement authorities and the American public another tool in our efforts to reduce the use of illegal drugs.

We have all known for some time, Mr. Speaker, that the costs of drug abuse in the United States are certainly quite high. In addition to the terrible impact drugs have on users, experts estimate that our country loses close to $100 billion a year to drug-related illnesses, lost productivity and crime. In many cases, these costs are being absorbed by American families and those who are victimized by the drug trade. The bill of the gentleman from Iowa (Mr. LATHAM) would help change that.

Under H.R. 1042, drug dealers would begin paying from their own pocketbooks for the damage that they level on our society. This legislation would allow victims of the drug trade to recover civil money damages from individuals who have sold or manufactured illegal drugs.

Parents, drug-addicted babies, and employers will now have an expanded ability to punish drug dealers and put these criminals out of business.

This type of law is already on the book in 12 States and would be extended to the other 38 under this bill.

So, Mr. Speaker, I commend the distinguished gentleman from Iowa (Mr. LATHAM) for authoring this legislation. By passing this bill, we are sending a message to America's drug dealers: Dealing drugs does not pay. If they are an aspiring drug dealer and believe that they can make a lot of money off of selling drugs, think again. Under this proposal, they will be at great risk of going bankrupt.

I urge support of this legislation.

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

Mr. BROWN of Ohio. Mr. Speaker, I yield myself 2 minutes.

Mr. Speaker, I am pleased to support the Drug Dealer Liability Act; and I commend its author, my colleague, the gentleman from Iowa (Mr. LATHAM).

H.R. 1042 would subject individuals who participate in illegal drug activity