

We must act swiftly to preserve this critical designation and ensure patients with otherwise fatal blood cancers continue to have access to transplants, both during and after the current public health crisis.

I urge my colleagues to support this legislation today so we may further prevent any lapse in funding. I support both bills.

Mrs. RODGERS of Washington. Mr. Speaker, I yield 3 minutes to the gentleman from North Carolina (Mr. MCHENRY), one of the leaders of this legislation and the leader of the Financial Services Committee.

Mr. MCHENRY. Mr. Speaker, I thank Mrs. RODGERS, my classmate and a member of the Energy and Commerce Committee for yielding. It is an amazing thing to be with you here today, and it is an amazing thing to be here today to talk about this important bill.

As the lead Republican cosponsor of the House companion to S. 578, I rise in support of the FASTER Act.

Millions of Americans suffer from life-threatening food allergies. More than 1.5 million Americans are allergic to sesame, in particular, yet there is no current requirement to include the ingredient on product labels. This legislation would declare it the ninth major allergen to be recognized by the U.S. Food and Drug Administration and update laws to require the labeling of sesame.

This bill would also require the Secretary of Health and Human Services to regularly review promising food allergy treatments and research. This is a major bipartisan priority. These efforts will help slow this rapidly growing disease and ultimately find and fund a cure.

Finally, the FASTER Act establishes a scientific process and framework for establishing additional allergens covered by the Federal Food, Drug, and Cosmetic Act.

I am proud to serve as cofounder and co-chair of the newly formed Congressional Food Allergy Research Caucus, along with Congresswoman DORIS MATSUI. We recognize there is more we can do to help those 32 million Americans, including many who are children who suffer from food allergies.

We can and we should do more to increase funding into research, therapies, and treatments for food allergies. Sending this legislation to the President's desk would be a major first step to achieving our goal of improving treatment opportunities.

I urge my colleagues on both sides of the aisle to vote "yes" on this bill.

Mr. PALLONE. Mr. Speaker, I urge my colleagues to support this bill, S. 578, the FASTER Act, and I yield back the balance of my time.

Mrs. RODGERS of Washington. Mr. Speaker, I have no additional speakers, and I yield back the balance of my time.

The SPEAKER pro tempore. The question is on the motion offered by the gentleman from New Jersey (Mr.

PALLONE) that the House suspend the rules and pass the bill, S. 578.

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. BISHOP of North Carolina. Mr. Speaker, on that I demand the yeas and nays.

The SPEAKER pro tempore. Pursuant to section 3(s) of House Resolution 8, the yeas and nays are ordered.

Pursuant to clause 8 of rule XX, further proceedings on this motion are postponed.

JOHN LEWIS NIMHD RESEARCH ENDOWMENT REVITALIZATION ACT OF 2021

Mr. PALLONE. Mr. Speaker, I move to suspend the rules and pass the bill (H.R. 189) to amend the Public Health Service Act to provide that the authority of the Director of the National Institute on Minority Health and Health Disparities to make certain research endowments applies with respect to both current and former centers of excellence, and for other purposes.

The Clerk read the title of the bill.

The text of the bill is as follows:

H.R. 189

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 "John Lewis NIMHD Research Endowment Revitalization Act of 2021".

SEC. 2. RESEARCH ENDOWMENTS AT BOTH CURRENT AND FORMER CENTERS OF EXCELLENCE.

Paragraph (1) (beginning with "(1) IN GENERAL") of section 464z-3(h) of the Public Health Service Act (42 U.S.C. 285t(h)) is amended to read as follows:

"(1) IN GENERAL.—The Director of the Institute may carry out a program to facilitate minority health disparities research and other health disparities research by providing for research endowments—

"(A) at current or former centers of excellence under section 736; and

"(B) at current or former centers of excellence under section 464z-4."

The SPEAKER pro tempore. Pursuant to the rule, the gentleman from New Jersey (Mr. PALLONE) and the gentlewoman from Washington (Mrs. RODGERS) each will control 20 minutes.

The Chair recognizes the gentleman from New Jersey.

GENERAL LEAVE

Mr. PALLONE. Mr. 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. 189.

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

There was no objection.

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

Mr. Speaker, I rise today in support of H.R. 189, the John Lewis National Institute on Minority Health and Health Disparities Research Endow-

ment Revitalization Act of 2021. This legislation would resume grants to minority academic institutions that fell out of eligibility for funding through the NIMHD Research Endowment Program.

By allowing those schools to resume eligibility, we will once again help these institutions conduct critical research into minority health disparities.

COVID-19, Mr. Speaker, has further exacerbated many of the inequities that minority communities experience when interacting with the healthcare system, inequities that we know existed long before the pandemic. In order to address the inequities in our healthcare system and in our society, we must confront them head-on and work together to eliminate them.

By supporting NIMHD and the academic institutions funded through it, we are helping to advance minority health disparity research and strengthen the diversity of the scientific workforce by recruiting and retaining individuals underrepresented in these fields.

This bill is a step toward progress and an equitable public health system. This bill is named after our former colleague, the late and great Congressman John Lewis from Georgia, who introduced this legislation last Congress. He was a dear friend and a longtime champion of eliminating disparities across the board, and he is certainly missed.

I want to thank my colleagues, the two sponsors, Representatives Barragan and Carter, for leading the effort on this legislation this year. This is truly bipartisan.

Mr. Speaker, I urge my colleagues to support this bill, and I reserve the balance of my time.

Mrs. RODGERS of Washington. Mr. Speaker, I yield myself such time as I may consume.

Mr. Speaker, I rise today in support of H.R. 189, the John Lewis NIMHD Research Endowment Revitalization Act, which was introduced by my colleagues, Representatives Barragan, Carter, and Taylor.

This bill will authorize the National Institute on Minority Health and Health Disparities to award research grants to current and former centers of excellence that conduct research on minority health disparities.

Health inequities are disproportionately experienced by minority populations, and these disparities can have adverse impacts on health outcomes, economic opportunities, and overall quality of life. The current COVID-19 pandemic has only underscored these disparities, which is why this bill is so important.

Continued support of these centers of excellence is critical in advancing minority health, addressing health inequities, and expanding educational and training opportunities for those interested in further advancing research in this space.

I would like to thank my colleagues and especially my colleague on the Energy and Commerce Committee on the

Republican side, Representative BUDDY CARTER, for leading this initiative.

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

Mr. PALLONE. Mr. Speaker, I yield such time as she may consume to the gentlewoman from California (Ms. BARRAGÁN), a member of our committee and the lead sponsor of the bill.

Ms. BARRAGÁN. Mr. Speaker, I rise today in support of H.R. 189, the John Lewis National Institute on Minority Health and Health Disparities Research Endowment Revitalization Act. This is a bipartisan bill that I introduced with my colleague from Georgia, Congressman CARTER.

It is fitting that this bill comes before us during National Minority Health Month because this legislation moves us closer to ending the public health disparities facing communities of color. We need to understand why people of color are more likely to get certain illnesses.

It is a tragic reality, but solutions are out there. H.R. 189 will fund the research that will help us find solutions and save lives.

This bill would, once again, allow for current and former NIMHD or Health Resources and Services Administration centers of excellence to receive research endowment funding, money that is critical in the fight to reduce minority health disparities.

The Research Endowment Program at the National Institute on Minority Health and Health Disparities provides funding to the endowments of academic institutions across the country, such as Charles R. Drew University in my district, Morehouse School of Medicine, University of Puerto Rico School of Dental Medicine, University of New Mexico School of Medicine, Howard University College of Pharmacy, and so many others.

The goal of the program includes promoting minority health and health disparities research capacity and infrastructure, increasing the diversity and strength of the scientific workforce, and enhancing the recruitment and retention of individuals from health disparity populations that are underrepresented in the scientific workforce.

This is critical legislation that is going to play a huge role in addressing and researching disparities.

During the COVID-19 health emergency, communities of color were once again disproportionately affected. Research into health disparities is more crucial than ever.

I want to thank my cosponsors, and I want to thank Chairman PALLONE for working to help me get this important bill to the floor. I urge my colleagues to support this bill. Let's get this done and across the finish line.

Mrs. RODGERS of Washington. Mr. Speaker, I yield such time as he may consume to the gentleman from Georgia (Mr. CARTER), an important leader on this legislation as well as on the committee.

Mr. CARTER of Georgia. Mr. Speaker, thank you to Congresswoman

BARRAGÁN for being a champion of this issue, and she truly is a champion of this issue.

The coronavirus has wreaked havoc on our communities, especially minority communities. Now more than ever, we must support minority academic institutions and the critical research they conduct.

Minority academic institutions can play a big role in helping to address the systemic health disparities minority communities are feeling.

We must ensure schools, including Morehouse College in my home State of Georgia, are able to conduct their research without disruption. Without a reauthorization of this program, health research will have to be paused or abandoned altogether. We must not let this happen. The efforts of these researchers will help better prepare all of us to respond to the coronavirus and other health inequities more effectively.

I urge passage of this very important legislation.

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

Mr. PALLONE. Mr. Speaker, I urge support for this legislation, and I yield back the balance of my time.

The SPEAKER pro tempore. The question is on the motion offered by the gentleman from New Jersey (Mr. PALLONE) that the House suspend the rules and pass the bill, H.R. 189.

The question was taken; and (two-thirds being in the affirmative) the rules were suspended and the bill was passed.

A motion to reconsider was laid on the table.

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TIMELY REAUTHORIZATION OF NECESSARY STEM-CELL PROGRAMS LENDS ACCESS TO NEEDED THERAPIES ACT OF 2021

Mr. PALLONE. Mr. Speaker, I move to suspend the rules and pass the bill (H.R. 941) to reauthorize the Stem Cell Therapeutic and Research Act of 2005, and for other purposes.

The Clerk read the title of the bill.

The text of the bill is as follows:

H.R. 941

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 "Timely Reauthorization of Necessary Stem-cell Programs Lends Access to Needed Therapies Act of 2021" or the "TRANSPLANT Act of 2021".

SEC. 2. REAUTHORIZATION OF THE C.W. BILL YOUNG CELL TRANSPLANTATION PROGRAM.

(a) ADVISORY COUNCIL MEETINGS.—Subsection (a) of section 379 of the Public Health Service Act (42 U.S.C. 274k) is amended by adding at the end the following new paragraph:

"(7) The Secretary shall convene the Advisory Council at least two times each calendar year."

(b) INCREASING COLLECTION.—

(1) TECHNICAL CLARIFICATION.—Effective as if included in the enactment of Public Law 114-104 (the Stem Cell Therapeutic and Research Reauthorization Act of 2015), the amendment to section 379(d)(2)(B) of the Public Health Service Act (42 U.S.C. 274k(d)(2)(B)) in section 2(a)(2) of Public Law 114-104 is amended by inserting "goal of increasing collections of high quality" before "cord blood units,".

(2) ELIMINATING DEADWOOD.—Subparagraph (B) of section 379(d)(2) of the Public Health Service Act (42 U.S.C. 274k(d)(2)) is amended by striking the second and third sentences in such subparagraph.

(c) PERIODIC REVIEW OF STATE OF SCIENCE.—Section 379 of the Public Health Service Act (42 U.S.C. 274k) is amended by adding at the end the following new subsection:

"(o) PERIODIC REVIEW OF STATE OF SCIENCE.—

"(1) REVIEW.—Not less frequently than every 2 years, the Secretary, in consultation with the Director of the National Institutes of Health, the Commissioner of Food and Drugs, the Administrator of the Health Resources and Services Administration, the Advisory Council, and other stakeholders, where appropriate given relevant expertise, shall conduct a review of the state of the science of using adult stem cells and birthing tissues to develop new types of therapies for patients, for the purpose of considering the potential inclusion of such new types of therapies in the Program.

"(2) RECOMMENDATIONS.—Not later than June 30, 2025, the Secretary shall—

"(A) complete the second review required by paragraph (1); and

"(B) informed by such review, submit to the Committee on Health, Education, Labor, and Pensions of the Senate and the Committee on Energy and Commerce of the House of Representatives recommendations on the appropriateness of the inclusion of new types of therapies in the Program."

(d) AUTHORIZATION OF APPROPRIATIONS.—Section 379B of the Public Health Service Act (42 U.S.C. 274m) is amended by striking "\$33,000,000 for fiscal year 2015 and \$30,000,000 for each of fiscal years 2016 through 2020" and inserting "\$31,009,000 for each of fiscal years 2022 through 2026".

SEC. 3. CORD BLOOD INVENTORY.

Subsection (g) of section 2 of the Stem Cell Therapeutic and Research Act of 2005 (42 U.S.C. 274k note) is amended to read as follows:

"(g) AUTHORIZATION OF APPROPRIATIONS.—To carry out this section, there is authorized to be appropriated \$23,000,000 for each of fiscal years 2022 through 2026."

SEC. 4. ADVANCING THE FIELD OF REGENERATIVE MEDICINE.

Section 402 of the Public Health Service Act (42 U.S.C. 282) is amended by adding at the end the following:

"(o) REGENERATIVE MEDICINE.—The Director of NIH shall, as appropriate, continue to consult with the directors of relevant institutes and centers of the National Institutes of Health, other relevant experts from such institutes and centers, and relevant experts within the Food and Drug Administration, to further the field of regenerative medicine using adult stem cells, including autologous stem cells, therapeutic tissue engineering products, human cell and tissue products, human gene therapies, and genetically modified cells."

SEC. 5. GAO REPORT ON REGENERATIVE MEDICINE WORKFORCE.

Not later than 2 years after the date of enactment of this Act, the Comptroller General of the United States shall submit to the Committee on Health, Education, Labor, and