

As a side benefit, the increased pressure in the pipes will also drastically reduce the power consumption currently needed to pump water throughout the system. It has been a priority of this Congress to implement policies that conserve resources and I believe this bill is consistent with those goals.

I urge a "yes" vote of H.R. 1854.

Mr. OBERSTAR. Mr. Speaker, I rise in support of H.R. 1854, offered by the gentleman from California (Mr. LEWIS), to amend the Water Resources Development Act of 1992 to modify an environmental infrastructure project for Big Bear Lake, California. The Big Bear Lake project was originally authorized in Water Resources Development Act of 2007 for the purpose of wastewater treatment at a funding level of \$15 million. This bill modifies the Big Bear Lake Project, reducing the authorized funding to \$9 million and changing the project purpose to water supply infrastructure.

I urge my colleagues to join me in supporting H.R. 1854.

Mr. BOOZMAN. Mr. Speaker, having no further speakers, I yield back the balance of my time.

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

The SPEAKER pro tempore. The question is on the motion offered by the gentleman from Washington (Mr. LARSEN) that the House suspend the rules and pass the bill, H.R. 1854.

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.

AUTHORIZATION FOR SMITHSONIAN INSTITUTION TO CONSTRUCT A VEHICLE MAINTENANCE BUILDING

Mr. BRADY of Pennsylvania. Mr. Speaker, I move to suspend the rules and pass the bill (H.R. 3224) to authorize the Board of Regents of the Smithsonian Institution to plan, design, and construct a vehicle maintenance building at the vehicle maintenance branch of the Smithsonian Institution located in Suitland, Maryland, and for other purposes.

The Clerk read the title of the bill.

The text of the bill is as follows:

H.R. 3224

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

SECTION 1. VEHICLE MAINTENANCE BUILDING, SUITLAND, MARYLAND.

(a) AUTHORITY TO PLAN, DESIGN, AND CONSTRUCT.—The Board of Regents of the Smithsonian Institution is authorized to plan, design, and construct a vehicle maintenance building at the vehicle maintenance branch of the Smithsonian Institution located in Suitland, Maryland.

(b) PURPOSE OF BUILDING.—The purpose of the building shall be to provide a facility to be used for housing, maintaining, and repairing vehicles and transportation equipment of the Smithsonian Institution.

SEC. 2. AUTHORIZATION OF APPROPRIATIONS.

There is authorized to be appropriated to carry out this Act \$4,000,000 for fiscal year 2010.

The SPEAKER pro tempore (Mr. LARSEN of Washington). Pursuant to the rule, the gentleman from Pennsylvania (Mr. BRADY) and the gentleman from Nebraska (Mr. TERRY) each will control 20 minutes.

The Chair recognizes the gentleman from Pennsylvania.

GENERAL LEAVE

Mr. BRADY of Pennsylvania. Mr. Speaker, I ask unanimous consent that all Members have 5 legislative days to revise and extend their remarks on the consideration of H.R. 3224.

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

There was no objection.

Mr. BRADY of Pennsylvania. Mr. Speaker, H.R. 3224 would authorize \$4 million in fiscal year 2010 for the Smithsonian Institution to plan, design and construct a vehicle maintenance building at its facilities in Suitland, Maryland. Our committee ordered the bill reported unanimously.

The new building would absorb the vehicle maintenance functions for the entire Smithsonian complex in the Washington area. These are currently performed in a constricted and increasingly dysfunctional space at the General Services Building within the National Zoo in northwest Washington, D.C.

The vehicle maintenance functions, which cover the maintenance, repair and fueling of about 780 Smithsonian-owned vehicles and pieces of equipment, are not compatible with the surrounding environment at the zoo and would be better served at the Suitland facility, which has more space and is isolated from public access. The space being vacated at the zoo would be converted to other uses.

□ 1415

The bill authorizes the planning, design and construction of this project, which would give the Committee on House Administration primary jurisdiction. The Committee on Transportation and Infrastructure, which has an additional referral, also reported this bill. The fiscal year 2010 Interior appropriations conference report, which has been enacted into law, contains the necessary funding for this bill, and I urge the approval of the legislation.

I reserve the balance of my time.

Mr. TERRY. I yield myself as much time as I may consume.

Mr. Speaker, I rise in support of this bill, which will provide for the construction of a vehicle maintenance branch at the National Zoo to benefit the zoo and larger Smithsonian Institution operations. The course of action prescribed by this bill is the result of a careful analysis of alternatives, which has demonstrated that the onsite construction of a vehicle maintenance facility would prove to be, roughly, 40 percent cheaper than developing an off-site facility. Additionally, this bill will provide for the better environmental stewardship in the operations of the

National Zoo and of the Smithsonian Institution.

I want to thank Mr. BECERRA for bringing this forward. Accordingly, I request that my colleagues on this side of the aisle support this suspension.

Mr. Speaker, I just want to thank Mr. LUNGREN for his efforts on this measure, and I yield back the balance of my time.

Mr. BRADY of Pennsylvania. I would like to thank Mr. LUNGREN, too, for his cooperation on this and for hurrying over just a second or two late.

Mr. OBERSTAR. Mr. Speaker, I rise in support of H.R. 3224, a bill to authorize the Board of Regents of the Smithsonian Institution to plan, design and construct a vehicle maintenance facility at the vehicle maintenance branch of the Smithsonian Institution located in Suitland, Maryland.

Currently the bulk of the Smithsonian's vehicle maintenance is conducted from the National Zoo's General Services Building. The Vehicle Maintenance Branch is responsible for maintenance, repair, and fueling of more than 780 Smithsonian vehicles and pieces of equipment valued at over \$17 million. However, the vehicle maintenance operations over the years have become incompatible with the other needs of the General Services Building. After researching the potential of leasing a facility, the Smithsonian Institution determined the most economical method of housing its fleet management and maintenance operations was to request authority to build a facility on government-owned property located in Suitland, Maryland.

Transferring the vehicle maintenance operations to a new site will increase the ability of the Smithsonian to use alternative fuels in its vehicles. The proposed site at Suitland currently has both a compressed natural gas fueling station and a gasoline fueling station. Furthermore, the Smithsonian plans to install E-85 and bio-diesel above-ground fuel tanks at the facility. The Zoo's General Services Building does not have the space available to accommodate these alternative fuel tanks.

I urge my colleagues to join me in supporting H.R. 3224.

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

The SPEAKER pro tempore. The question is on the motion offered by the gentleman from Pennsylvania (Mr. BRADY) that the House suspend the rules and pass the bill, H.R. 3224.

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.

FUNDING FOR CONTINUED TYPE 1 DIABETES RESEARCH

Mrs. CAPPS. Mr. Speaker, I move to suspend the rules and agree to the resolution (H. Res. 35) expressing the sense of the House of Representatives that Congress should provide increased Federal funding for continued type 1 diabetes research.

The Clerk read the title of the resolution.

The text of the resolution is as follows:

H. RES. 35

Whereas as many as 3,000,000 Americans suffer from type 1 diabetes, a chronic, genetically determined, debilitating disease affecting every organ system;

Whereas more than 15,000 children each year are diagnosed with type 1 diabetes, a disease caused by an autoimmune attack that destroys the insulin-producing beta cells of the pancreas;

Whereas diabetes is one of the most costly chronic diseases, costing the United States economy more than \$174,000,000,000 and costing individuals with diabetes an average of \$13,000 in annual health care costs, compared to \$2,600 for individuals without diabetes;

Whereas insulin treats but does not cure this potentially deadly disease and does not prevent the complications of diabetes, which include blindness, heart attack, kidney failure, stroke, nerve damage, and amputations;

Whereas the National Institutes of Health has established 6 goal areas to guide type 1 diabetes research focused on the reduction, prevention, and cure of type 1 diabetes and its complications;

Whereas Federal funding has enabled research focused on determining the underlying genetic and environmental causes of diabetes and testing of promising new treatments to halt and reverse the autoimmune attack causing type 1 diabetes;

Whereas a cure for type 1 diabetes will require restoring beta cell function either by replacement with transplantation or by beta cell regeneration;

Whereas the development of a “closed-loop” artificial pancreas would greatly alleviate the daily burden of disease management for type 1 diabetes patients by continuously monitoring blood sugar levels, infusing insulin as necessary when blood glucose levels become too high, and warning patients when blood glucose levels become dangerously low;

Whereas continued progress toward a cure for type 1 diabetes depends on training the next generation of diabetes researchers;

Whereas a strong public-private partnership to fund type 1 diabetes exists between the Federal Government and the Juvenile Diabetes Research Foundation International, a foundation which has awarded more than \$1,000,000,000 for diabetes research since its founding and in fiscal year 2008 provided more than \$156,000,000 for diabetes research in 20 countries;

Whereas Congress has provided \$150,000,000 annually through fiscal year 2011 for the Special Statutory Funding Program for type 1 Diabetes Research;

Whereas the National Institutes of Health devoted a total of \$433,000,000 in fiscal year 2009 for type 1 diabetes research; and

Whereas leading type 1 diabetes researchers have recommended a total funding level of \$4,100,000,000 for fiscal years 2009 through 2013 in order to meet the National Institutes of Health’s type 1 research goals: Now, therefore, be it

Resolved, That Federal funding for diabetes research should be increased to meet the National Institutes of Health’s goals so that a cure for type 1 diabetes can be found.

The SPEAKER pro tempore. Pursuant to the rule, the gentlewoman from California (Mrs. CAPPS) and the gentleman from Nebraska (Mr. TERRY) each will control 20 minutes.

The Chair recognizes the gentlewoman from California.

GENERAL LEAVE

Mrs. CAPPS. Mr. Speaker, I ask unanimous consent that all Members may have 5 legislative days in which to revise and extend their remarks and to

include extraneous materials into the RECORD.

The SPEAKER pro tempore. Is there objection to the request of the gentlewoman from California?

There was no objection.

Mrs. CAPPS. I yield myself such time as I may consume.

Mr. Speaker, I rise today in support of House Resolution 35, expressing the sense of the House that Congress should provide increased Federal research funding for type 1 diabetes. Diabetes is one of the most prevalent and costly chronic conditions in the United States today.

According to the Centers for Disease Control and Prevention, nearly 24 million Americans—that’s roughly 8 percent of the United States population—have diabetes. Direct and indirect costs of diabetes totaled \$174 billion in 2007, \$120 billion of which were direct medical costs attributable to diabetes.

Three million Americans have type 1 diabetes, which results when the body’s immune system destroys insulin-producing cells in the pancreas that regulate blood glucose levels. Individuals with type 1 diabetes depend on insulin, but even with adherence to insulin treatment, individuals with type 1 diabetes are still very vulnerable to the many complications that this disease offers, which are blindness, kidney failure, and amputation.

As a school nurse, I became intimately aware of the challenges faced by children with type 1 diabetes and of the impact it has on their families and on their classmates as well. During the years I cared for those students, we discussed the potential for a cure by now. Unfortunately, we still have a ways to go.

The Federal funding of diabetes research has resulted in tremendous advancements for our understanding and our treatment of the disease. We have successfully determined underlying genetic and environmental causes of diabetes, and we are testing and promising new treatments, but there is still much more work to be done.

The National Institutes of Health devoted \$433 million in fiscal year 2009 for type 1 diabetes research. This resolution calls for a doubling of annual NIH funding to meet leading researchers’ estimates of the funding needed to accomplish NIH’s six goals related to type 1 diabetes.

Mr. Speaker, I am pleased to join my colleagues in calling for the passage of this resolution and of increased research funding to find a cure for type 1 diabetes. I want to thank my colleague on the Energy and Commerce Committee, Congressman GENE GREEN, for his leadership on this important issue. I reserve the balance of my time.

Mr. TERRY. I yield myself as much time as I may consume.

Mr. Speaker, as a member of the Diabetes Caucus and throughout most of the 1990s, I was a member of our regional diabetes board for the ADA. In fact, I call myself a perpetual vice

chairman of our region. So it is with great pride that I am here in support and that I encourage my colleagues to support H. Res. 35.

I want to recognize the 23.6 million Americans who suffer from diabetes. Diabetes can lead to serious complications and premature death, but people with diabetes can take steps to control the disease and to lower their risks of complications.

The Centers for Disease Control has stated that the progression of diabetes among those with prediabetes is not inevitable, and studies have shown that people with prediabetes who lose weight and who increase their physical activity can prevent or delay diabetes and can return their blood pressure to near normal. Through regular exercise and a steady diet, Americans can return to a healthier state of living and can avoid diabetes.

Because diabetes affects individuals in different ways, it is important that we educate our communities about the causes and about effective ways to avoid diabetes through living a healthy lifestyle. Additionally, we must continue to research the causes, treatment, education, and eventual cure for diabetes through public and private partnerships.

I do believe that the 1,000-page health reform bill, which was rushed through the House of Representatives by the other side of the aisle to establish a government takeover of health care, will negatively impact those with diabetes and will severely curtail our ability to find a cure. I fail to see how a massive government takeover of our health care system and how the creation of scores of new bureaucracies will revitalize our economy or will give Americans better care.

Instead, the House Tri-Committee bill would ration health care like it is done in the U.K. and Canada. This rationing of health care will not be better for the patients. It will lead to many diabetics in need of dialysis and care who will be turned away or who will have longer wait times when they need access to physicians.

In addition to nearly a \$1 trillion health reform bill which was pushed on the American public, the recent stimulus legislation provided an extra \$10 billion of funding to the NIH for the advancement of scientific research. Unfortunately, long-held processes on the length and structure of trials have been ignored in order to spend the funds as quickly as possible and in as many Congressional districts as possible.

Instead of rushing to spend billions of dollars for a political photo op, it would have been more responsible, both scientifically and fiscally, to continue to have the NIH determine what trials’ processes deserve the most merit. If we hadn’t rushed to spend in the name of “stimulus,” I believe that some of the \$10 billion could have been used for research into type 1 diabetes.

I want to see Americans recognizing the significance of monitoring their

own and members of their families' health in getting the proper and timely treatment for diabetes. I would also like to see, through public-private partnerships, a continued commitment to diabetes research so that, one day, we may have a cure.

I would like to thank the sponsor of this bill, Representative GENE GREEN from Texas, for his work on this resolution. I stand, once again, in support of this legislation, and I hope my colleagues will join me.

I reserve the balance of my time.

Mrs. CAPPS. Mr. Speaker, I wish to respond to my friend and colleague from Nebraska by reminding us all that, with the health care and insurance reform legislation that has been proposed, one of the effects would be that more Americans would have access to preventative and primary care, which would, hopefully, mitigate the onset of diabetes and its effects on Americans.

Now it is my great pleasure to yield as much time as he may consume to my colleague from Texas, GENE GREEN. He is the resolution sponsor.

Mr. GENE GREEN of Texas. I would like to thank the vice Chair of the Energy and Commerce Committee for yielding to me.

Mr. Speaker, this resolution discusses type 1 diabetes, which is typically the early onset of juvenile diabetes in some of us, but it does sometimes affect older children. Type 1 diabetes is a chronic, genetically determined, and debilitating disease caused by an autoimmune attack that destroys the insulin-producing beta cells of the pancreas, and it affects every organ system. As many as 3 million Americans suffer from type 1 diabetes, with more than 15,000 children being diagnosed with the disease annually.

Diabetes is one of the most costly chronic diseases, costing the United States economy more than \$174 billion annually in direct and indirect health care costs. On average, individuals with diabetes pay \$13,000 in annual health care costs compared to \$2,600 for individuals without diabetes.

Insulin treats but does not cure this potentially deadly disease nor does it prevent the complications of diabetes, which include blindness, heart attacks, kidney failure, strokes, nerve damage, and amputations. Diabetes is also the leading cause of legal blindness in working-age adults, and nearly all of type 1 diabetes patients exhibit some degree of eye disease after living with diabetes for 15 to 20 years.

A special diabetes program was created that provides significant support to the Diabetic Retinopathy Clinical Research Network, which is a nationwide network involving 163 clinical sites in 43 States, in order to address the number of individuals diagnosed with type 1 diabetes and to find a cure.

The National Institutes of Health has established six goal areas to guide type 1 diabetes research, which are focused on the reduction, prevention, and cure

of type 1 diabetes and its complications. The National Institutes of Health devoted \$433 million in fiscal year 2009 for type 1 diabetes research. Congress currently provides \$150 million annually, through fiscal year 2011, for the Special Statutory Funding Program for type 1 diabetes research. Promising advances have been made in determining root causes of the disease, and finding a cure will depend on funded research initiatives and on training the next generation of diabetes researchers.

Congress can do more to advance the research on type 1 diabetes. This resolution calls for the doubling of annual NIH funding to meet leading researchers' estimates of funding needed to meet NIH's six goals related to type 1 diabetes.

I am pleased to sponsor this resolution with the 101 other Members who are calling for research funding to find a cure for type 1 diabetes. I want to thank all of my cosponsors, including both of my colleagues—the vice Chair of the Energy and Commerce Committee, Congresswoman CAPPS; and also Congressman TERRY from Nebraska, who is also, like I said, a cosponsor of the resolution.

Hopefully, our national health care plan will actually help those who have either type 1 diabetes or type 2 diabetes to make sure they can go see physicians when they need to.

□ 1430

Mr. TERRY. I yield myself as much time as I may consume.

Mr. Speaker, as I mentioned, from my activities in the Diabetes Caucus, I have learned that, as I stated in the main statement, that education, nutrition, and exercise leads to prevention of much of type 1 and type 2. Today is the sixth anniversary of the Medicare and Medicaid Reform Act that was passed in 2003 on a nearly partisan vote. It was then that we recognized that the Republicans, who authored that bill, supported that bill and that actually this is the first time that Medicare would pay for education, nutrition counseling.

I thought it was very odd that under Medicare for a diabetic, that Medicare would pay for an amputation or kidney dialysis, but it wouldn't pay \$150 to prevent those from happening by way of education, diabetic education classes, which included nutrition and exercise and such. We have come a long way in recognizing prevention.

Certainly we don't need the government, through its history of not wanting to cover preventive care—I think we could do a better job within the private side or free enterprise side. We don't need government running health care to make sure that people that are in need of diabetes education, nutrition, a dietician, exercise, counseling, could receive that.

I again want to thank GENE GREEN for bringing this much-needed resolution. Once again, I rise in support of this resolution.

Ms. EDDIE BERNICE JOHNSON of Texas. Mr. Speaker, I rise today in support of House Resolution 35 to express the sense of the House of Representatives that Congress should provide increased federal funding for continued type 1 diabetes research.

This legislation is particularly timely as roughly 3 million people suffer from type 1 diabetes across the country. It is important for us to move forward in the fight against this disease and increase funding for research that aims to prevent and treat diabetes. It is estimated that over \$4 billion will be necessary to fund the National Institute of Health's research goals for type 1 diabetes through 2013, and as this disease continues to affect millions of people across America, it is imperative that we fund research at increased levels to see its end.

I would also like to mention one of the efforts that we are undertaking in North Texas to help combat diabetes. Recently the Baylor Health Care System announced that it would be transforming the Juanita J. Craft Recreation Center in south Dallas to the area's first and only diabetes health and wellness institute. This center will help to save lives by offering improved diabetes care, educational programs, and conducting research in addition to encouraging healthy lifestyles for those living with the disease. The center will also educate the community on preventative measures for type 2 diabetes so that a preventative lifestyle becomes a natural and normal part of everyday life in this neighborhood. It is my hope that increased funding for diabetes research will encourage similar centers to be created across the country.

Mr. Speaker, I encourage my fellow colleagues to join me in supporting this important resolution so that we recognize the need for diabetes research funding and help countless people across the country living with the disease.

Mr. TERRY. I have no further speakers, and I yield back the balance of my time.

Mrs. CAPPS. I have no remaining speakers on this side, and I also urge our colleagues to support this resolution.

I yield back the balance of our time. The SPEAKER pro tempore (Mr. CUELLAR). The question is on the motion offered by the gentlewoman from California (Mrs. CAPPS) that the House suspend the rules and agree to the resolution, H. Res. 35.

The question was taken.

The SPEAKER pro tempore. In the opinion of the Chair, two-thirds being in the affirmative, the ayes have it.

Mrs. CAPPS. Mr. Speaker, I object to the vote on the ground that a quorum is not present and make the point of order that a quorum is not present.

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.

The point of no quorum is considered withdrawn.

NATIONAL PRADER-WILLI SYNDROME AWARENESS MONTH

Mrs. CAPPS. Mr. Speaker, I move to suspend the rules and agree to the resolution (H. Res. 55) expressing support