

That is why I rise today on this legislation, and I look forward to reviewing this legislation, even as it passes, to assess whether or not our friends in the legal end of it, the DEA in particular, and I would hope maybe that the representatives from the DEA would meet with me in my office about their approach to ensure that it has the requirements and the restraints that we see in this present legislation. I want to congratulate the authors of this legislation because of that very fact.

I would just like to add one other point, if I could, as I close on my remarks. Having not been here for the legislation to deal with H.R. 5494, which is Ms. NORTON's legislation, which talks about the National Park Service and Secretary of the Interior transferring certain properties to the District of Columbia, it may not be equal, but I do want to make note that the GSA is holding property that the Texas Military History Museum has been paying rent on or paying taxes on because of their belief it belongs to them, and because the GSA had basically lost the property or had forgotten it existed. I look forward to them following at least the parameters of this legislation, where they can transfer those assets to a very important and distinctive group, the Texas Military Museum Association, that has now made this a military museum for Texans and for America. This was certainly appropriate to do so.

Finally, I want to make sure that I add my support to legislation, if it's coming to the floor, dealing with Rosa's Law, that is a Senate bill. And I will add supporting statements to the record.

But in conclusion, I think that this legislation, H.R. 5710, is a model for what can be an important life saver in America, and that is to get people to be weaned off of addictive drugs, but have a way of processing and determining where those drugs are, whether there is an addicted person, and how they can secure care.

So I ask my colleagues to support H.R. 5710, and I look forward to the Drug Enforcement Agency working with my office on the kind of restraints that are hopefully helpful when they have these mass campaigns for people to drop off old prescriptions and to make sure that they follow suit and do the right thing for the people of this country.

Mr. PALLONE. Mr. Speaker, I urge passage of the bill.

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. 5710, as amended.

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. BROUN of Georgia. 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.

ROSA'S LAW

Mr. PALLONE. Mr. Speaker, I move to suspend the rules and pass the bill (S. 2781) to change references in Federal law to mental retardation to references to an intellectual disability, and to change references to a mentally retarded individual to references to an individual with an intellectual disability.

The Clerk read the title of the bill.

The text of the bill is as follows:

S. 2781

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 "Rosa's Law".

SEC. 2. INDIVIDUALS WITH INTELLECTUAL DISABILITIES.

(a) HIGHER EDUCATION ACT OF 1965.—Section 760(2)(A) of the Higher Education Act of 1965 (20 U.S.C. 1140(2)(A)) is amended by striking "mental retardation or".

(b) INDIVIDUALS WITH DISABILITIES EDUCATION ACT.—

(1) Section 601(c)(12)(C) of the Individuals with Disabilities Education Act (20 U.S.C. 1400(c)(12)(C)) is amended by striking "having mental retardation" and inserting "having intellectual disabilities".

(2) Section 602 of such Act (20 U.S.C. 1401) is amended—

(A) in paragraph (3)(A)(i), by striking "with mental retardation" and inserting "with intellectual disabilities"; and

(B) in paragraph (30)(C), by striking "of mental retardation" and inserting "of intellectual disabilities".

(c) ELEMENTARY AND SECONDARY EDUCATION ACT OF 1965.—Section 7202(16)(E) of the Elementary and Secondary Education Act of 1965 (20 U.S.C. 7512(16)(E)) is amended by striking "mild mental retardation," and inserting "mild intellectual disabilities".

(d) REHABILITATION ACT OF 1973.—

(1) Section 7(21)(A)(iii) of the Rehabilitation Act of 1973 (29 U.S.C. 705(21)(A)(iii)) is amended by striking "mental retardation," and inserting "intellectual disability".

(2) Section 204(b)(2)(C)(vi) of such Act (29 U.S.C. 764(b)(2)(C)(vi)) is amended by striking "mental retardation and other developmental disabilities" and inserting "intellectual disabilities and other developmental disabilities".

(3) Section 501(a) of such Act (29 U.S.C. 791(a)) is amended, in the third sentence, by striking "President's Committees on Employment of People With Disabilities and on Mental Retardation" and inserting "President's Disability Employment Partnership Board and the President's Committee for People with Intellectual Disabilities".

(e) HEALTH RESEARCH AND HEALTH SERVICES AMENDMENTS OF 1976.—Section 1001 of the Health Research and Health Services Amendments of 1976 (42 U.S.C. 217a-1) is amended by striking "the Mental Retardation Facilities and Community Mental Health Centers Construction Act of 1963".

(f) PUBLIC HEALTH SERVICE ACT.—

(1) Section 317C(a)(4)(B)(i) of the Public Health Service Act (42 U.S.C. 247b-4(a)(4)(B)(i)) is amended by striking "mental retardation;" and inserting "intellectual disabilities;".

(2) Section 448 of such Act (42 U.S.C. 285g) is amended by striking "mental retardation," and inserting "intellectual disabilities;".

(3) Section 450 of such Act (42 U.S.C. 285g-2) is amended to read as follows:

"SEC. 450. RESEARCH ON INTELLECTUAL DISABILITIES.

"The Director of the Institute shall conduct and support research and related activities into the causes, prevention, and treatment of intellectual disabilities."

(4) Section 641(a) of such Act (42 U.S.C. 291k(a)) is amended by striking "matters relating to the mentally retarded" and inserting "matters relating to individuals with intellectual disabilities".

(5) Section 753(b)(2)(E) of such Act (42 U.S.C. 294c(b)(2)(E)) is amended by striking "elderly mentally retarded individuals" and inserting "elderly individuals with intellectual disabilities".

(6) Section 1252(f)(3)(E) of such Act (42 U.S.C. 300d-52(f)(3)(E)) is amended by striking "mental retardation/developmental disorders," and inserting "intellectual disabilities or developmental disorders".

(g) HEALTH PROFESSIONS EDUCATION PARTNERSHIPS ACT OF 1998.—Section 419(b)(1) of the Health Professions Education Partnerships Act of 1998 (42 U.S.C. 280f note) is amended by striking "mental retardation" and inserting "intellectual disabilities".

(h) PUBLIC LAW 110-154.—Section 1(a)(2)(B) of Public Law 110-154 (42 U.S.C. 285g note) is amended by striking "mental retardation" and inserting "intellectual disabilities".

(i) NATIONAL SICKLE CELL ANEMIA, COOLEY'S ANEMIA, TAY-SACHS, AND GENETIC DISEASES ACT.—Section 402 of the National Sickle Cell Anemia, Cooley's Anemia, Tay-Sachs, and Genetic Diseases Act (42 U.S.C. 300b-1 note) is amended by striking "leading to mental retardation" and inserting "leading to intellectual disabilities".

(j) GENETIC INFORMATION NONDISCRIMINATION ACT OF 2008.—Section 2(2) of the Genetic Information Nondiscrimination Act of 2008 (42 U.S.C. 2000ff note) is amended by striking "mental retardation," and inserting "intellectual disabilities".

(k) REFERENCES.—For purposes of each provision amended by this section—

(1) a reference to "an intellectual disability" shall mean a condition previously referred to as "mental retardation", or a variation of this term, and shall have the same meaning with respect to programs, or qualifications for programs, for individuals with such a condition; and

(2) a reference to individuals with intellectual disabilities shall mean individuals who were previously referred to as individuals who are "individuals with mental retardation" or "the mentally retarded", or variations of those terms.

SEC. 3. REGULATIONS.

For purposes of regulations issued to carry out a provision amended by this Act—

(1) before the regulations are amended to carry out this Act—

(A) a reference in the regulations to mental retardation shall be considered to be a reference to an intellectual disability; and

(B) a reference in the regulations to the mentally retarded, or individuals who are mentally retarded, shall be considered to be a reference to individuals with intellectual disabilities; and

(2) in amending the regulations to carry out this Act, a Federal agency shall ensure that the regulations clearly state—

(A) that an intellectual disability was formerly termed mental retardation; and

(B) that individuals with intellectual disabilities were formerly termed individuals who are mentally retarded.

SEC. 4. RULE OF CONSTRUCTION.

This Act shall be construed to make amendments to provisions of Federal law to substitute the term “an intellectual disability” for “mental retardation”, and “individuals with intellectual disabilities” for “the mentally retarded” or “individuals who are mentally retarded”, without any intent to—

(1) change the coverage, eligibility, rights, responsibilities, or definitions referred to in the amended provisions; or

(2) compel States to change terminology in State laws for individuals covered by a provision amended by this Act.

The SPEAKER pro tempore. Pursuant to the rule, the gentleman from New Jersey (Mr. PALLONE) and the gentleman from Kentucky (Mr. WHITFIELD) 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 within which to revise and extend their remarks and include extraneous material in the RECORD.

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 such time as he may consume to the gentleman from New York (Mr. MCMAHON), who is the sponsor of the legislation.

Mr. MCMAHON. Mr. Speaker, it is my great honor to champion the House companion of S. 2781, H.R. 4544, the Elizabeth A. Connelly Act, so I rise today in strong support of S. 2781. I thank Mr. PALLONE for his leadership on the subcommittee. And Mr. Chairman, I thank you for your leadership in this body, and especially as chairman on the Bipartisan Disabilities Caucus, and the work that you do there.

This bill will replace the term “mental retardation” with the term “intellectual disability” throughout the United States Code. Now, in July of this year, just recently, New York Governor David Paterson signed similar legislation into law, joining 48 other States that have dropped the “R” word. Over 70 Democrats and Republicans have cosponsored my bill and agreed that the time has finally come to put an end to discrimination against individuals with intellectual disabilities.

Every day, millions of children and adults have difficulty with tasks such as problem solving, decision-making, and communications because of intellectual disabilities. These Americans are often ridiculed, ignored, or even abused by their peers. Sometimes they are referred to publicly by insulting terms and treated as second class citizens. In particular, the term “mental retardation” has acquired a distinctly pejorative meaning, and is used intentionally and unintentionally to deride and humiliate many of our citizens.

H.R. 4544 is aptly named for a great woman from my home State of New

York, the Honorable Elizabeth A. Connelly. Mrs. Connelly was elected to the New York State Assembly in 1973 as the first woman from my district of Staten Island to be elected to public office. When she retired in 2000, she became New York’s longest serving female legislator.

Throughout her career, she was a staunch advocate and champion for individuals with intellectual and other developmental disabilities. She was instrumental in securing funds for mental health programs and creating the New York State Commission on Quality of Care for the Mentally Disabled, led the charge to close the notorious Willowbrook State School, and led this Nation from warehousing individuals into providing group home settings.

Assemblywoman Connelly was known throughout the community for working with parents, advocates, and government officials to make New York a leader in providing high quality services and programs for individuals with intellectual disabilities. She is known as the guardian angel of the mentally disabled. She was not only a pioneer of her time and one of New York’s greatest disability advocates, but she was my mentor. I was privileged to work as Ms. Connelly’s staff member and counsel for many years. It is her personal commitment and leadership that has inspired me to also become an advocate for these important issues. Sadly, we lost her all too prematurely a few years ago, but we honor her and her husband Robert and her family with this bill.

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So, Mr. Speaker, I cast my vote and urge my colleagues to do so as well in honor of Assemblywoman Connelly. I know she would be very proud to see the United States carrying out her lifelong mission by passing S. 2781.

I urge my colleagues to vote “yes” on S. 2781 and send this bill to the President’s desk for signature.

Mr. WHITFIELD. I yield myself such time as I may consume.

Mr. Speaker, I also rise in support of S. 2781, Rosa’s Law, and I certainly want to thank the majority and all of those involved in this important legislation for bringing it to the floor for final passage.

This legislation is really very simple, but very important. It simply modifies specific terms used in Federal law and instead of referring to the people as mentally retarded individuals, it refers to them basically as individuals with developmental disabilities.

It will affect the Social Security Act, the Public Health Service Act, and a lot of other Federal laws. I think it certainly is a step in the right direction, and I would urge passage of this legislation.

Mr. Speaker, I rise in support of S. 2781, Rosa’s Law, and I would like to thank the Majority for finally bringing this legislation to the floor of the House for final passage.

Rosa’s Law follows previous Congressional action to modify the specific terms used in

Federal law to refer to individuals, or broad categories of individuals, when earlier terminology became outdated, offensive, or otherwise inappropriate.

I would like to note that our former colleague, Nathan Deal of Georgia, actually offered an amendment during the Energy and Commerce Committee’s consideration of the ObamaCare legislation back in July of last year that would have changed references in Federal law to mentally retarded individual to references to an individual with an developmental disability, but unfortunately, Congressman Deal’s amendment was not accepted by the Majority, which prevented it from being included in the House-passed version of the health reform legislation.

However, by bringing this legislation to the floor today, the Majority can atone for their past mistake, and finally correct this glaring problem.

And speaking of health reform, I would also like to note that today is the 6-month anniversary of the Democrats’ ObamaCare package being signed into law, and just as Republicans, independents, and a few brave Democrats predicted, insurance premiums are rising and people are losing their current health insurance coverage as a direct result of the flawed provisions in that legislation.

Reports of problems in ObamaCare abound, but has this Congress held a hearing on its implementation? No. In fact, the Subcommittee on Health—on which I serve—has held 15 hearings since the passage of ObamaCare, but we have not dealt with the most radical change to America’s health care system in generations.

As all of us have noticed lately, people back home are experiencing the unhappy reality of the Federal Government’s health care takeover. And as many news reports indicate, many people seem to prefer a Congressional Majority that wants to get the truth from the Obama Administration about what’s gone wrong. I know the seniors in my district are completely clear about their desire to have us look into the Administration’s plans to cut \$575 billion from Medicare. They also want to know about statements by the Chief Actuary of Medicare that providers “could find it difficult to remain profitable” and might “end their participation in the program.”

And any American concerned about the disastrous spending policies of this Administration and the current Majority would want oversight over recent revelations that after passage of ObamaCare, health care spending is projected to increase more than the Obama Administration had projected before passage of this deeply flawed legislation.

During the run-up to passage, miracles were promised day in and day out. Seniors were told the law would strengthen Medicare, only to see reductions to the program spent on new entitlements. Everyone was told the cost curve would be bent down, only to see the Administration’s own actuaries report it will continue to go up.

Families were told that if they liked their current coverage they could keep it, only to learn that the law encourages employers to drop coverage, that health insurers will pass along increased costs through increased premiums, and that every plan will be subject to a host of costly new Federal rules and restrictions.

Where is the oversight? Where are the hearings? As the election nears, I would like

to note that the American people seem to want a new kind of Congress, one that is willing to find its mistakes and to fix them.

With that, I will urge my colleagues to support the bill before us today.

Mr. LANGEVIN. Mr. Speaker, I rise in strong support of Rosa's Law, which will replace all references of "mental retardation" with the term "intellectual disability" throughout the U.S. Code.

I would like to first thank my colleague from New York, Representative MIKE MCMAHON, who has been a passionate champion of ending discrimination against individuals with intellectual disabilities and lifting the stigma associated with the outdated and outmoded classification of an entire population.

At the turn of the last century, the prevailing sentiment in our society was that those with cognitive impairments or behavioral limitations should be institutionalized—excluded from mainstream society and locked away as wards of the state. In Federal statute, they were referred to as "feeble-minded." Of course, we have come a long way since then.

With passage of laws like the Americans with Disabilities Act, ADA, and the Individuals with Disabilities Education Act, IDEA, we have taken great strides to ensure that people with intellectual disabilities are afforded equal opportunities in schools and workplaces free from discrimination, as well as supports for independent living. We have broken down many of the exclusionary policies that relegated these individuals to being treated as second-class citizens.

However, the U.S. Federal Code still contains antiquated references to "mental retardation" that no longer reflect our collective values. This terminology has acquired a distinctly pejorative meaning and perpetuates the stigma that people with intellectual disabilities are somehow inferior to others. That couldn't be farther from the truth.

It is time we follow in the steps of entities like the World Health Organization and the U.S. Department of Health and Human Services. We must update the Federal Code to reflect our true intent and evolved beliefs that individuals with disabilities deserve the same respect and opportunities as any other human being. By fostering an environment of inclusion and empowerment, we can provide the means for every individual to fulfill his or her potential.

Mr. WHITFIELD. I yield back the balance of my time.

Mr. PALLONE. Mr. Speaker, I urge passage of the bill, 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. 2781.

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.

SUPPORTING BLOOD CANCER AWARENESS MONTH

Mr. PALLONE. Mr. Speaker, I move to suspend the rules and agree to the resolution (H. Res. 1433) expressing sup-

port for designation of September 2010 as Blood Cancer Awareness Month, as amended.

The Clerk read the title of the resolution.

The text of the resolution is as follows:

H. RES. 1433

Whereas blood-related cancers currently afflict more than 900,000 people in the United States, with an estimated 150,000 new cases diagnosed each year;

Whereas leukemia, lymphoma, multiple myeloma, myelodysplastic syndromes, and myeloproliferative disorders will kill more than 50,000 people in the United States this year;

Whereas Congress, in the National Cancer Act, established an aggressive Federal program for the diagnosis, prevention, and treatment of cancer;

Whereas Congress has maintained a steady investment in cancer research to answer basic questions about the causes of cancer and to develop new treatments for cancer;

Whereas the Federal investment in cancer research and control has contributed to important progress in understanding and treating some blood cancers and yielded significant advances in survival for some forms of blood cancer;

Whereas continued investment and innovation is critical to the early diagnosis and the more effective and safer treatment for blood cancers where research and treatment advances have to date been limited;

Whereas strategies to enhance and strengthen the cancer clinical research program and boost participation in clinical trials are necessary to achieve blood cancer treatment advances;

Whereas survivors of blood cancer may experience serious late and long-term effects of their treatment and may need life-long follow-up and survivorship care;

Whereas Congress has provided strong support to blood cancer research and has focused special attention on increasing awareness of blood cancers and intensifying the blood cancer research program;

Whereas the House of Representatives will continue to provide support for research for a cure for leukemia, lymphoma, multiple myeloma, myelodysplastic syndromes, and myeloproliferative disorders; and

Whereas September 2010 would be an appropriate month to designate as Blood Cancer Awareness Month: Now, therefore, be it

Resolved, That the House of Representatives—

(1) supports the designation of Blood Cancer Awareness Month to enhance the understanding of blood-related cancers, increase support for funding research to find a cure for blood cancers, encourage studies of the cause and prevention of blood cancers to reduce the number of new cases, and enhance understanding of clinical trials to boost provider and patient participation and accelerate the pace of clinical research;

(2) encourages participation in voluntary activities to support blood cancer research and education; and

(3) respectfully requests the Clerk of the House to transmit a copy of this resolution to the American Society of Hematology, the International Myeloma Foundation, the Lymphoma Research Foundation, the Multiple Myeloma Research Foundation, and The Leukemia & Lymphoma Society, voluntary health organizations dedicated to finding a cure for blood cancers.

The SPEAKER pro tempore. Pursuant to the rule, the gentleman from New Jersey (Mr. PALLONE) and the gen-

tleman from Kentucky (Mr. WHITFIELD) each will control 20 minutes.

The Chair recognizes the gentleman from New Jersey.

GENERAL LEAVE

Mr. PALLONE. I ask unanimous consent that all Members may have 5 legislative days in which to revise and extend their remarks and include extraneous material into the RECORD.

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

There was no objection.

Mr. PALLONE. Mr. Speaker, at this time I yield such time as she may consume to the lead Democratic sponsor of the bill, the gentlewoman from Colorado (Ms. MARKEY).

Ms. MARKEY of Colorado. Mr. Speaker, I rise today in support of this resolution raising awareness of blood cancers. I would like to thank the Representative from North Carolina for his work to bring this important resolution to the House.

Nearly 1 million people are currently afflicted with blood cancers in the United States and 150,000 are newly diagnosed each year. With these numbers, we probably all know someone whose life will be affected.

I was inspired to work on this important resolution by my staff and interns, many of whom have personal experiences with leukemia and other blood cancers. It is inspiring to see their commitment to increasing awareness, such as my staff member, Marissa Smith, who dedicated her free time in honor of a friend's mother and ran a half marathon with the Leukemia and Lymphoma Society.

Raising awareness of blood cancers through the designation of September as Blood Cancer Awareness Month will help ensure that we keep in mind their widespread impact and the importance of ample Federal research for funding, education, and research.

I encourage my colleagues to join me in supporting this important resolution.

Mr. WHITFIELD. Mr. Speaker, I also rise today in support of House Resolution 1433, expressing support for the designation of September 2010 as Blood Cancer Awareness Month.

At this time I yield such time as he may consume to the gentleman from North Carolina (Mr. JONES), who was the primary sponsor of this legislation and who has been a real leader on cancer awareness in the U.S. Congress.

Mr. JONES. I thank the gentleman for yielding.

I want to also thank BETSY MARKEY, who just spoke, from Colorado. She has worked with me hand in glove, as we should do more times than not, on the House floor, to be honest about it, and we were able to get over 130 cosponsors.

As she said, this year more than 50,000 people in this country will die from blood-related disorder.

This legislation asks the House to support this designation of September as Blood Cancer Awareness Month.