

and urge that the House pass this legislation.

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. 1230, 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. BURGESS. 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The point of no quorum is considered withdrawn.

GYNECOLOGIC CANCER EDUCATION AND AWARENESS ACT

Mr. PALLONE. Mr. Speaker, I move to suspend the rules and pass the bill (H.R. 2941) to reauthorize and enhance Johanna's Law to increase public awareness and knowledge with respect to gynecologic cancers, as amended.

The Clerk read the title of the bill.

The text of the bill is as follows:

H.R. 2941

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

SECTION 1. REAUTHORIZATION AND ENHANCEMENT OF JOHANNA'S LAW.

(a) IN GENERAL.—Section 317P(d) of the Public Health Service Act (42 U.S.C. 247b–17(d)(4)) is amended—

(1) in paragraph (4), by inserting after “2009” the following: “and \$18,000,000 for the period of fiscal years 2012 through 2014”; and

(2) by redesignating paragraph (4) as paragraph (6).

(b) CONSULTATION WITH NONPROFIT GYNECOLOGIC CANCER ORGANIZATIONS.—Section 317P(d) of such Act (42 U.S.C. 247b–17(d)), as amended by subsection (a), is further amended by inserting after paragraph (3) the following:

“(4) CONSULTATION WITH NONPROFIT GYNECOLOGIC CANCER ORGANIZATIONS.—In carrying out the national campaign under this subsection, the Secretary shall consult with the leading nonprofit gynecologic cancer organizations, with a mission both to conquer ovarian or other gynecologic cancer nationwide and to provide outreach to State and local governments and communities, for the purpose of determining the best practices for providing gynecologic cancer information and outreach services to varied populations.”.

SEC. 2. DEMONSTRATION PROJECTS REGARDING OUTREACH AND EDUCATION STRATEGIES RELATING TO GYNECOLOGIC CANCER.

(a) IN GENERAL.—Section 317P(d) of the Public Health Service Act (42 U.S.C. 247b–17(d)), as amended by section 1, is further amended by inserting after paragraph (4) the following:

“(5) DEMONSTRATION PROJECTS REGARDING OUTREACH AND EDUCATION STRATEGIES.—

“(A) IN GENERAL.—The Secretary may carry out a program to award grants or contracts to public or nonprofit private entities for the purpose of carrying out demonstration projects to test and compare different evidence-based out-

reach and education strategies to increase the awareness and knowledge of women and health care providers with respect to gynecologic cancers, including early warning signs, risk factors, prevention, screening, and treatment options. Such strategies shall include efforts directed at women and their families, physicians, nurses, and key health professionals.

“(B) PREFERENCES IN AWARDING GRANTS OR CONTRACTS.—In making awards under subparagraph (A), the Secretary shall give preference to—

“(i) applicants with demonstrated expertise in gynecologic cancer education or treatment or in working with groups of women who are at increased risk of gynecologic cancers; and

“(ii) applicants that, in the demonstration project funded by the grant or contract, will establish linkages between physicians, nurses, and key health professionals, health profession students, hospitals, payers, and State health departments.

“(C) APPLICATION.—To seek a grant or contract under subparagraph (A), an entity shall submit an application to the Secretary in such form, in such manner, and containing such agreements, assurances, and information as the Secretary determines to be necessary to carry out this paragraph.

“(D) CERTAIN REQUIREMENTS.—In making awards under subparagraph (A), the Secretary shall—

“(i) make awards, as practicable, to not fewer than five applicants; and

“(ii) ensure that information provided through demonstration projects under this paragraph is consistent with the best available medical information.

“(E) REPORT TO CONGRESS.—Not later than 12 months after the date of the enactment of this paragraph, and annually thereafter, the Secretary shall submit to the Congress a report that—

“(i) summarizes the activities of demonstration projects under subparagraph (A);

“(ii) evaluates the extent to which the projects were effective in increasing early detection of gynecologic cancers and awareness and knowledge of risk factors and early warning signs in the populations to which the projects were directed; and

“(iii) identifies barriers to early detection and appropriate treatment of such cancers.”.

(b) CONFORMING AMENDMENT.—Section 317P(d)(3)(A) of the Public Health Service Act (42 U.S.C. 247b–17(d)(3)(A)) is amended by inserting “(other than paragraph (5))” after “this section”.

The SPEAKER pro tempore. Pursuant to the rule, the gentleman from New Jersey (Mr. PALLONE) and the gentleman from Texas (Mr. BURGESS) 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 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 myself such time as I may consume.

I rise this evening in strong support of H.R. 2941, a bill to reauthorize Johanna's law. The bill reauthorizes an existing CDC program to promote awareness and outreach of gynecological cancers among women and health care providers.

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

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

H.R. 2941, a law to reauthorize Johanna's Law, was actually signed into law at the end of the 109th Congress and directed Health and Human Services to carry out a national campaign to increase awareness of gynecological cancer.

Gynecological cancer of the female reproductive tract affected, in 2006, over 76,000 women, and 27,000 died from their disease. H.R. 2941 would authorize the Centers for Disease Control and Prevention to continue the nationwide campaign.

This bill also calls for the Secretary of Health and Human Services to award grants to nonprofit private entities to carry out demonstration projects. These projects would test outreach and education strategies to increase the awareness and knowledge of women and health care provided regarding gynecologic cancer.

I am a cosponsor of the legislation. I urge my colleagues to support it.

Mr. BURTON of Indiana. Mr. Speaker, I rise today in strong support of H.R. 2941, a bill to reauthorize and enhance Johanna's Law to increase public awareness and knowledge with respect to gynecologic cancers. I would like to thank the Chairman and Ranking Member of the Energy and Commerce Committee for bringing this vitally important bill to the Floor. I would also like to thank Representative ROSA DELAURO and Representative DARRELL ISSA who have been tireless champions of this bill. I am proud to have worked with them to enact the “Gynecologic Cancer Education and Awareness Act”—also known as Johanna's Law—back in 2006; and I am proud to be a part of their efforts this year to reauthorize and enhance this program.

I first got involved in the fight against gynecologic cancer when Ms. Kolleen Stacey, a constituent of mine, who became a dear, dear friend, told me about her personal battle with ovarian cancer—the deadliest of the gynecological cancers. Kolleen told me about Johanna's Law, convinced me to become a co-sponsor; and she never stopped pushing me to get the bill signed into law; because she never wanted any other woman to go through what she was going through.

It took more than two years and a lot of hard work but in 2006, Johanna's Law became law and this country took a huge step forward towards fulfilling Kolleen's dream. On July 10, 2009, Kolleen tragically lost her fight with ovarian cancer. But I know that she is looking down on us today and smiling because her dream lives on in our actions today. God bless you Kolleen.

The American Cancer Society estimates that about 21,880 new cases of ovarian cancer will be diagnosed and 13,850 deaths are expected to be caused by ovarian cancer in the United States in 2010 alone. For the State of Indiana, The American Cancer Society estimates that in 2010, 450 women will be diagnosed with ovarian cancer and 300 women will die of ovarian cancer.

This is a tragedy. Research shows that many of those deaths could be prevented if

more women knew the risk factors and recognized the early symptoms of gynecologic cancers so that they could discuss them with their doctors. Ovarian cancer has a 93 percent five-year survival rate if detected in Stage One and only a 27 percent survival rate if detected in Stage Three or Four.

Yet, the majority of women and medical professionals are unaware of the symptoms of ovarian cancer. Women can go undiagnosed or misdiagnosed for years, like Kolleen Stacey. Just over five years ago on September 5, 2005, Kolleen testified before Congress about the need for legislation for added awareness and education on gynecological cancers. "It took an entire year for me to be diagnosed correctly. By then the cancer was Stage IIIC, an advanced stage of ovarian cancer with only a 38 percent chance of complete cure. Had it been discovered in an early stage, I would have had a 90 percent chance of complete cure."

That is why, in December 2006, Congress passed Johanna's Law, named for Johanna Silver Gordon, who lost her life to ovarian cancer despite being a health conscious woman who visited the gynecologist regularly. Like many women, Johanna had symptoms of ovarian cancer that were missed by both her and her healthcare provider.

Johanna's Law authorized the Centers for Disease Control to create a gynecologic cancer awareness campaign aimed at educating women and health care providers about the signs and symptoms of gynecologic cancers—bloating, pelvic or abdominal pain, difficulty eating or feeling full quickly, and urinary symptoms (urgency or frequency). The campaign, Inside Knowledge: Get the Facts About Gynecologic Cancer, seeks to raise awareness of the five main types of gynecologic cancer: ovarian, cervical, uterine, vaginal and vulvar. To date, the Inside Knowledge campaign has supported many activities, including the development of:

Cancer-specific fact sheets about gynecologic cancers in both English and Spanish,

A comprehensive gynecologic cancer brochure,

Formative research and concept testing using focus groups to better understand the target audience,

Materials for primary care and health care professionals, and

Print and broadcast Public Service Announcements (PSAs).

All materials created through Johanna's Law have been sent to television, radio and print outlets around the country. The CDC is tracking the airing of PSAs and audience impressions. The CDC is also reaching out to groups, encouraging the use of the materials.

We still have a long way to go but Johanna's law is making a difference. Doctors, nurses and cancer survivors agree—providing more information about gynecologic cancers saves women's lives.

H.R. 2941 reauthorizes and enhances this critically important awareness campaign. This legislation provides for the continuation of the education campaign started by the Centers for Disease Control and Prevention to increase the awareness and knowledge of health care providers and women with respect to gynecological cancers. It also enhances cooperation with non-governmental organizations carrying out complementary education and awareness campaigns.

H.R. 2941 is a good bill, it is good public policy. I urge my colleagues to support this bill, and I urge our colleagues in the Senate to act quickly and move this critically needed legislation to the President's desk for his signature. This is literally a matter of life and death.

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

Mr. PALLONE. I yield back the balance of my time and urge passage of the bill.

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. 2941, 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. BURGESS. 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.

BIRTH DEFECTS PREVENTION, RISK REDUCTION, AND AWARENESS ACT OF 2010

Mr. PALLONE. Mr. Speaker, I move to suspend the rules and pass the bill (H.R. 5462) to authorize the Secretary of Health and Human Services, acting through the Director of the Centers for Disease Control and Prevention, to establish and implement a birth defects prevention, risk reduction, and public awareness program, as amended.

The Clerk read the title of the bill.

The text of the bill is as follows:

H.R. 5462

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 "Birth Defects Prevention, Risk Reduction, and Awareness Act of 2010".

SEC. 2. BIRTH DEFECTS PREVENTION, RISK REDUCTION, AND AWARENESS.

(a) PROGRAM.—The Public Health Service Act (42 U.S.C. 201 et seq.) is amended by inserting after section 317T (42 U.S.C. 247b–22) the following new section:

"SEC. 317U. BIRTH DEFECTS PREVENTION, RISK REDUCTION, AND AWARENESS.

"(a) GRANT PROGRAM.—The Secretary shall establish and implement a birth defects prevention and public awareness program to award grants to States or organizations for the provision of pregnancy and breastfeeding information services.

"(b) PREFERENCE.—In the case of States or organizations that are otherwise equally qualified, the Secretary, in awarding a grant under this section, shall give preference to—

"(1) States that made pregnancy and breastfeeding information services available on January 1, 2006; and

"(2) organizations that will provide pregnancy and breastfeeding information services in such States.

"(c) MATCHING FUNDS.—The Secretary may only award a grant under this section to a State or organization that agrees, with respect to the costs to be incurred in carrying out the grant activities, to make available (directly or through donations from public or private entities) non-Federal funds toward such costs in an amount equal to not less than 25 percent of the amount of the grant.

"(d) COORDINATION.—The Secretary shall ensure that activities carried out using a grant under this section are coordinated, to the maximum extent practicable, with other birth defects prevention and environmental health activities of the Federal Government, including activities carried out by the Health Resources and Services Administration and the Centers for Disease Control and Prevention with respect to pediatric environmental health specialty units and children's environmental health centers.

"(e) EVALUATION.—In furtherance of the program established under subsection (a), the Secretary shall provide for an evaluation of pregnancy and breastfeeding information services to identify efficient and effective models of—

"(1) providing information;

"(2) raising awareness and increasing knowledge about birth defects prevention measures;

"(3) modifying risk behaviors; or

"(4) other outcome measures as determined appropriate by the Secretary.

"(f) PREGNANCY AND BREASTFEEDING INFORMATION SERVICES DEFINED.—For purposes of this section, the term 'pregnancy and breastfeeding information services' includes only—

"(1) information services to provide accurate, evidence-based, clinical information regarding maternal exposures during pregnancy or breastfeeding that may be associated with birth defects or other health risks to an infant that is breastfed, such as exposures to medications, chemicals, infections, foodborne pathogens, illnesses, nutrition, or lifestyle factors;

"(2) the provision of accurate, evidence-based information weighing risks of exposures during breastfeeding against the benefits of breastfeeding; and

"(3) the provision of information described in paragraph (1) or (2) through counselors, Web sites, fact sheets, telephonic or electronic communication, community outreach efforts, or other appropriate means.

"(g) AUTHORIZATION OF APPROPRIATIONS.—To carry out this section, there are authorized to be appropriated \$4,500,000 for fiscal year 2012, \$5,500,000 for fiscal year 2013, \$6,500,000 for fiscal year 2014, \$7,500,000 for fiscal year 2015, and \$8,500,000 for fiscal year 2016."

The SPEAKER pro tempore. Pursuant to the rule, the gentleman from New Jersey (Mr. PALLONE) and the gentleman from Texas (Mr. BURGESS) 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 in the RECORD.

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