

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 Indiana (Mr. BUCSHON) that the House suspend the rules and pass the bill, H.R. 7224.

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.

AMENDMENTS TO THE CONTROLLED SUBSTANCES ACT

Mr. BUCSHON. Mr. Speaker, I move to suspend the rules and pass the bill (S. 223) to amend the Controlled Substances Act to fix a technical error in the definitions.

The Clerk read the title of the bill.

The text of the bill is as follows:

S. 223

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

SECTION 1. AMENDMENTS TO THE CONTROLLED SUBSTANCES ACT.

Section 102 of the Controlled Substances Act (21 U.S.C. 802) is amended—

(1) by redesignating paragraph (58) as paragraph (59);

(2) by redesignating the second paragraph designated as paragraph (57) (relating to the definition of “serious drug felony”) as paragraph (58); and

(3) by moving paragraphs (57), (58) (as so redesignated), and (59) (as so redesignated) 2 ems to the left.

The SPEAKER pro tempore. Pursuant to the rule, the gentleman from Indiana (Mr. BUCSHON) and the gentleman from Florida (Ms. CASTOR) each will control 20 minutes.

The Chair recognizes the gentleman from Indiana.

GENERAL LEAVE

Mr. BUCSHON. 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 on the bill.

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

There was no objection.

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

Mr. Speaker, I rise in support of S. 223, a bill to amend the Controlled Substances Act to fix a technical error in the definitions, led by Senators CHUCK GRASSLEY and Representative BURCHETT.

In 2018, the First Step Act, or the FSA, included a redundantly numbered subparagraph 57, causing “serious drug felony” and “serious violent felony” to be misnumbered in statute.

The misnumbering of the affected subparagraphs causes confusion in Federal district courts during litigation and can result in costly mistakes when the wrong subparagraph 57 charge is used.

Correcting this error is important to the efficiency and accuracy of Federal

criminal court cases. This bill rectifies this technical error by correctly renumbering the affected subparagraphs in the statute.

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

Ms. CASTOR of Florida. Mr. Speaker, I yield myself such time as I may consume.

Mr. Speaker, I rise to speak in support of S. 223, a bill that amends the Controlled Substances Act to fix a technical error in the definitions. This legislation, sponsored by Representatives BURCHETT and COHEN here in the House, would clarify the definitions of the different types of recidivist enhancements in the statute.

When the First Step Act was first signed into law in 2018, it created two new types of recidivist enhancements: serious drug felony and serious violent felony.

In the statute, however, both are numbered as paragraph 57, and this technical error has caused confusion between the two definitions. To prevent any further confusion with the interpretation of the statute, this bill corrects this technical error and properly numbers these definitions as different paragraphs.

Mr. Speaker, I encourage my colleagues to vote “yes” on this legislation to prevent potential costly mistakes in Federal criminal court cases, and I yield back the balance of my time.

Mr. BUCSHON. Mr. Speaker, in closing, I encourage a “yes” vote on this 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 Indiana (Mr. BUCSHON) that the House suspend the rules and pass the bill, S. 223.

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.

WOMEN AND LUNG CANCER RESEARCH AND PREVENTIVE SERVICES ACT OF 2024

Mr. BUCSHON. Mr. Speaker, I move to suspend the rules and pass the bill (H.R. 4534) to require a review of women and lung cancer, and for other purposes, as amended.

The Clerk read the title of the bill.

The text of the bill is as follows:

H.R. 4534

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 “Women and Lung Cancer Research and Preventive Services Act of 2024”.

SEC. 2. INTERAGENCY REVIEW TO EVALUATE AND IDENTIFY OPPORTUNITIES FOR THE ACCELERATION OF RESEARCH ON LUNG CANCER IN WOMEN AND UNDERSERVED POPULATIONS, GREATER ACCESS TO PREVENTIVE SERVICES, AND STRATEGIC PUBLIC AWARENESS AND EDUCATION CAMPAIGNS.

(a) IN GENERAL.—The Secretary of Health and Human Services, in consultation with the Secretary of Defense and Secretary of Veterans Affairs, shall conduct an interagency review to evaluate the status of, and identify opportunities related to—

- (1) research on lung cancer in women;
- (2) research on lung cancer in underserved populations that meet the eligibility criteria for lung cancer screening as recommended by the United States Preventive Services Task Force;
- (3) access to lung cancer preventive services; and
- (4) strategic public awareness and education campaigns on lung cancer.

(b) CONTENT.—The review and recommendations under subsection (a) shall include—

(1) a review and comprehensive report on the outcomes of previous research, the status of existing research activities, and knowledge gaps related to lung cancer in women and underserved populations in all agencies of the Federal Government;

(2) opportunities for collaborative, interagency, multidisciplinary, and innovative research, that would—

(A) encourage innovative approaches to eliminate knowledge gaps in research on lung cancer in women;

(B) evaluate environmental and genomic factors that may be related to the etiology of lung cancer in women; and

(C) foster advances in imaging technology and techniques to improve risk assessment, diagnosis, treatment, and the simultaneous utilization of other preventive services and activities;

(3) opportunities regarding the development of a national lung cancer screening strategy to expand access to such screenings, particularly among women and underserved populations; and

(4) opportunities regarding the development of a national public education and awareness campaign on—

(A) lung cancer in women and underserved populations; and

(B) the importance of early detection of lung cancer.

(c) REPORT.—Not later than two years after the date of the enactment of this Act, the Secretary of Health and Human Services shall submit to Congress a report on the review conducted under subsection (a).

The SPEAKER pro tempore. Pursuant to the rule, the gentleman from Indiana (Mr. BUCSHON) and the gentleman from Florida (Ms. CASTOR) each will control 20 minutes.

The Chair recognizes the gentleman from Indiana.

GENERAL LEAVE

Mr. BUCSHON. 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 on the bill.

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

There was no objection.

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

Mr. Speaker, I rise in support of H.R. 4534, the Women and Lung Cancer Research and Preventive Services Act of

2024, led by Representative BRENDAN BOYLE.

Mr. Speaker, lung cancer is the leading cause of cancer death for both men and women in the United States. Just this year, an estimated 230,000 Americans developed new cases of lung cancer, and about 125,000 died from the disease.

Currently, 20 percent of women diagnosed with lung cancer are non-smokers, and women who have never smoked are more than two times more likely to get lung cancer than men who have never smoked.

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To improve our ability to screen, diagnose, and treat lung cancer, we need a better understanding of the related risk factors.

This bill would review current lung cancer research in women and underserved populations, as well as identify current relevant opportunities related to education and access to prevention, detection, and treatment services.

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

Ms. CASTOR of Florida. Mr. Speaker, I yield myself such time as I may consume.

Mr. Speaker, I rise in support of H.R. 4534, the Women and Lung Cancer Research and Preventive Services Act. This legislation led by Representative BOYLE of Pennsylvania would require an interagency review to evaluate research on women and lung cancer.

In the United States, we are seeing a concerning trend among young and middle-aged women who are being diagnosed with lung cancer. Women are disproportionately being diagnosed with lung cancer at a higher rate than men, even though many of them have never smoked.

Approximately, two-thirds of never smokers who have been diagnosed with lung cancer are women. A clear understanding of the existing research and innovative opportunities to reduce lung cancer mortality, particularly among women and underserved populations, is needed.

The Women and Lung Cancer Research and Preventive Services Act will directly address these alarming statistics by supporting an interagency review on women and lung cancer.

This important bill will allow scientists and policymakers to identify opportunities to accelerate research in this area and develop a public awareness campaign on lung cancer screening to better reach underserved populations.

Led by the Department of Health and Human Services, with partnership from the Departments of Defense and Veterans Affairs, the review would include a report on the status of existing research and knowledge gaps and identify opportunities for collaborative research to determine the causes of lung cancer.

By passing H.R. 4534, we will move our country toward progress in reduc-

ing lung cancer mortality among women. I thank Representative BOYLE for his commitment and determined advocacy to ensure this legislation's success.

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

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

Ms. CASTOR of Florida. Mr. Speaker, I yield such time as he may consume to the gentleman from Pennsylvania (Mr. BOYLE).

Mr. BOYLE of Pennsylvania. Mr. Speaker, I thank my good friend from Florida (Ms. CASTOR) for yielding.

Mr. Speaker, I rise today in strong support of my bill, the Women and Lung Cancer Research and Preventive Services Act of 2024.

This bipartisan legislation would require the Secretary of Health and Human Services, in consultation with the Secretaries of Defense and Veterans Affairs, to conduct an interagency review of research on women and lung cancer, as well as access to preventive services. It also calls for interagency collaboration on public awareness campaigns to increase education and promote early detection.

While smoking rates continue to decline and overall lung cancer rates fall, there is one deeply concerning exception: young women who have never smoked. Studies show that women non-smokers are now twice as likely as nonsmoking men to develop lung cancer.

The statistics are indeed staggering. According to the American Cancer Society, 162 women in the United States die of lung cancer every single day. That is about one woman every 8 to 9 minutes. In 2024 alone, an estimated 59,280 women will lose their lives to this disease. Lung cancer remains the leading cause of cancer deaths among women, and we must do far more to address it.

This bill is about solutions. By increasing access to preventive services and public awareness, we can lower the prevalence of lung cancer among women.

Mr. Speaker, despite progress in preventing and treating lung cancer, disparities persist. Women continue to see slower declines in lung cancer rates as compared to men. It is past time for the Federal Government to step up, confront this disparity head-on, and take real action to address it.

Today is also a bittersweet day for me because much of the inspiration for this bill comes from my late colleague and friend, Congressman Rick Nolan. Rick was committed to this fight in honor of his late daughter, Katherine Benson, who courageously battled stage 4 non-small cell lung cancer until her untimely death in 2020 at just 46 years old. Katherine is survived by her husband and four children, and her legacy continues through this effort.

I am also proud to have worked on this proposal with the late Senator Dianne Feinstein, who was a steadfast

advocate for addressing disparities in lung cancer outcomes. Senator Feinstein and I first introduced this legislation together in 2016, and her dedication to improving the lives of women impacted by lung cancer will never be forgotten.

Mr. Speaker, I also thank my friend and fellow Pennsylvanian, Congressman BRIAN FITZPATRICK, for co-leading this effort from across the aisle.

Finally, I am grateful to the members of the Energy and Commerce Committee for helping advance this bill on both sides of the aisle, especially my good friend, BRETT GUTHRIE.

Mr. Speaker, in closing, this is a commonsense, bipartisan proposal to save lives and close a glaring disparity in healthcare. I urge my colleagues to support H.R. 4534 and stand with the countless women and families impacted by lung cancer.

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

Ms. CASTOR of Florida. Mr. Speaker, I thank Representative BOYLE again for his leadership and advocacy. I urge a "yes" vote on H.R. 4534, the Women and Lung Cancer Research and Preventive Services Act of 2024, and I yield back the balance of my time.

Mr. BUCSHON. Mr. Speaker, in closing, I encourage a "yes" vote on this bill, and I yield back the balance of my time.

The SPEAKER pro tempore (Mr. VALADAO). The question is on the motion offered by the gentleman from Indiana (Mr. BUCSHON) that the House suspend the rules and pass the bill, H.R. 4534, as amended.

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

A motion to reconsider was laid on the table.

SHANDRA EISENGA HUMAN CELL AND TISSUE PRODUCT SAFETY ACT

Mr. BUCSHON. Mr. Speaker, I move to suspend the rules and pass the bill (H.R. 7188) to require the Secretary of Health and Human Services to conduct a national, evidence-based education campaign to increase public and health care provider awareness regarding the potential risks and benefits of human cell and tissue products transplants, and for other purposes, as amended.

The Clerk read the title of the bill.

The text of the bill is as follows:

H.R. 7188

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 "Shandra Eisenga Human Cell and Tissue Product Safety Act".

SEC. 2. DEFINITIONS.

In this Act:

(1) **HUMAN CELL AND TISSUE PRODUCT.**—The terms "human cell and tissue product" and "human cell and tissue products" have the