educating and informing the public, based on evidence-based public health research and data, about Lyme Disease and other vector-borne diseases;

supporting early detection and diagnosis;

supporting prevention;

improving treatment; and

supporting care planning and management for individuals with Lyme disease and other tick- and vector-borne diseases.

I thank the Chairman BRETT GUTHRIE for his personal and extraordinarily strong support of H.R. 4348, as well as his Staff Director Megan Jackson and Health Subcommittee staff Jay Gulshen and Emma Schultheis.

Special thanks to Ranking Member FRANK PALLONE, Health Subcommittee Chair MORGAN GRIFFITH and Ranking Member DIANA DEGETTE as well as original cosponsors LLOYD DOGGETT, PAUL TONKO, and TOM KEAN.

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

Mr. PALLONE. Mr. Speaker, I yield 2 minutes to the gentleman from New York (Mr. TONKO).

Mr. TONKO. Mr. Speaker, I rise in strong support of the Kay Hagan Tick Act legislation that I am leading along with my colleagues, Representatives CHRIS SMITH, LLOYD DOGGETT, and TOM KEAN.

The Kay Hagan Tick Act would reauthorize key programs at the CDC that fund both research and support for local public health agencies to address tick-borne diseases such as Lyme disease.

Tick-borne diseases are a large and growing problem in New York, with more than 18,000 cases of Lyme disease reported in New York State in 2024. Lyme can cause serious health consequences, and for some, long-term complications persist after treatment.

With a warming climate, tick populations and ranges are on the rise, leading to fears that tick-borne diseases will continue to increase in frequency in the years to come. Already, warning signs are blaring that 2026 could be the worst year for tick exposures since 2017, based on CDC tracking data.

In this backdrop, research investments and public health resources are more vital than ever. That is what the Kay Hagan Tick Act will deliver.

I am proud to have worked on this commonsense bipartisan bill, and I would urge all of my colleagues to support this legislation.

Mr. PALLONE. Mr. Speaker, again, I would urge my colleagues to support this bill on a bipartisan basis, and I yield back the balance of my time.

Mr. GUTHRIE. Mr. Speaker, I encourage a ''yes'' vote on this bill, and I yield back the balance of my time.

The SPEAKER pro tempore (Mr. NEWHOUSE). The question is on the motion offered by the gentleman from Kentucky (Mr. GUTHRIE) that the House suspend the rules and pass the bill, H.R. 4348.

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.

□ 1510

STEM CELL THERAPEUTIC AND RESEARCH REAUTHORIZATION ACT OF 2025

Mr. GUTHRIE. Mr. Speaker, I move to suspend the rules and pass the bill (H.R. 5160) to reauthorize the Stem Cell Therapeutic and Research Act of 2005, and for other purposes, as amended.

The Clerk read the title of the bill.

The text of the bill is as follows:

H.R. 5160

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 ''Stem Cell Therapeutic and Research Reauthorization Act of 2025''.

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

Section 379B of the Public Health Service Act (42 U.S.C. 274m) is amended—

(1) by striking ''appropriated $31,009,000'' and inserting the following: ''appropriated—

''(1) $31,009,000'';

(2) in paragraph (1), as so inserted, by striking the period at the end and inserting ''; and''; and

(3) by adding at the end the following:

''(2) $33,009,000 for each of fiscal years 2027 through 2031.''.

SEC. 3. CORD BLOOD INVENTORY.

(a) IN GENERAL.—Section 2(a) of the Stem Cell Therapeutic and Research Act of 2005 (42 U.S.C. 274k note) is amended by striking ''at least 150,000 new units of high-quality cord blood'' and inserting ''a sufficient supply, as determined by the Secretary, of high-quality cord blood units''.

(b) APPLICATION.—Section 2(c) of such Act (42 U.S.C. 274k note) is amended—

(1) in paragraph (2), by striking ''in perpetuity or''; and

(2) by amending paragraph (5) to read as follows:

''(5) if the Secretary determines through an assessment, or through petition by the applicant, that a cord blood bank is no longer operational, does not meet the requirements described in subsection (d)(4), or does not meet the requirements of section 379(d)(4) of the Public Health Service Act, and as a result may not distribute the high-quality units, the Secretary may transfer the units collected pursuant to this section to another qualified cord blood bank or entity approved by the Secretary to ensure continued availability of high-quality cord blood units.''.

(c) DURATION OF CONTRACTS.—Section 2(d)(4) of such Act (42 U.S.C. 274k note) is amended to read as follows:

''(4) CONSIDERATION OF BEST SCIENCE.—The Secretary shall take into consideration current scientific and clinical information in order to maximize the availability of high-quality cord blood units meeting applicable clinical and quality standards for transplant when entering into contracts under this section, or when extending a period of funding under such a contract under paragraph (2).''.

(d) INVENTORY MANAGEMENT.—Section 2 of such Act (42 U.S.C. 274k note) is amended—

(1) by redesignating subsections (e), (f), and (g) and as subsections (f), (g), and (h), respectively; and

(2) by inserting after subsection (d) the following:

''(e) INVENTORY MANAGEMENT.—

''(1) IN GENERAL.—The Secretary shall manage the size and composition of the National Cord Blood Inventory to maximize clinical utility, ensure genetic diversity, and promote the efficient use of resources.

''(2) CONSIDERATIONS.—In carrying out paragraph (1), the Secretary may—

''(A) on the Secretary's own initiative or upon petition by a qualified cord blood bank, make determinations regarding the continued storage of cord blood units based on the best available scientific and clinical evidence; or

''(B) prioritize the collection, retention, or disposition of cord blood units based on scientific, clinical, or operational considerations that the Secretary determines to be relevant.''.

(e) DEFINITIONS.—Section 2(g) of such Act, as redesignated by subsection (d)(1) of this section, is amended—

(1) by redesignating paragraphs (4) and (5) as paragraphs (5) and (6), respectively; and

(2) by inserting after paragraph (3) the following:

''(4) The term 'high quality cord blood unit' means a cord blood unit that meets current industry standards and any requirements of the Food and Drug Administration.''.

(f) AUTHORIZATION OF APPROPRIATIONS.—Section 2(h) of such Act, as redesignated by subsection (d)(1) of this section, is amended by striking ''fiscal years 2022 through 2026'' and inserting ''fiscal years 2027 through 2031''.

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

The Chair recognizes the gentleman from Kentucky.

GENERAL LEAVE

Mr. GUTHRIE. Mr. Speaker, I ask unanimous consent that all Members may have 5 legislative days to revise and extend their remarks and include extraneous material on H.R. 5160.

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

There was no objection.

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

Mr. Speaker, I rise in support of H.R. 5160, led by my colleagues Representatives SMITH and MATSUI to reauthorize the C.W. Bill Young Cell Transplantation Program and the National Cord Blood Inventory program. The C.W. Bill Young Cell Transplantation Program supports patients across the country with identifying matching and facilitating the distribution of bone marrow peripheral blood stem cells and cord blood donors for those who need blood stem cell transplants.

This is critically important for those patients without a related family member who is unable to donate.

For some patients, blood stem cell transplants are an opportunity for remission or even a cure when other treatments have failed. This bill ensures patients have access to these lifesaving opportunities.

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

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

Mr. Speaker, I rise in support of H.R. 5160, the Stem Cell Therapeutic and Research Reauthorization Act. This bill reauthorizes the C.W. Bill Young Cell Transplantation Program and the National Cord Blood Inventory, two programs that serve as national registries to connect patients with lifesaving care.

Each year, thousands of Americans are diagnosed with conditions that could require stem cell transplants, such as leukemia, lymphoma, sickle cell anemia, and other immune system disorders. Some patients have a fully matched relative who can serve as a donor, but most patients require a search for an unrelated donor. This transplantation program helps identify, match, and facilitate the distribution of stem cells and cord blood from unrelated donors.

The National Cord Blood Inventory program maintains a robust inventory of high-quality cord blood units that can be used for research or transplantation.

Mr. Speaker, I am pleased we are considering this bill to extend these programs. I encourage all my colleagues to vote ''yes'' on H.R. 5160, and I reserve the balance of my time.

Mr. GUTHRIE. Mr. Speaker, I yield 5 minutes to gentleman from New Jersey (Mr. SMITH), my good friend.

Mr. SMITH of New Jersey. Mr. Speaker, each year over 3.6 million babies are born in the United States. In the past, virtually every placenta and umbilical cord was tossed as medical waste. Today, doctors have turned this medical waste into medical miracles.

Not only has God, in his infinite wisdom and goodness, created a placenta and an umbilical cord to nurture and protect the precious life of an unborn child, but now we know another gift awaits immediately after birth. Something very special is left behind: umbilical cord blood that is teeming with life-saving stem cells.

Mr. Speaker, today the House will vote to reauthorize the Stem Cell Therapeutic and Research Act of 2005, a law that I authored 21 years ago.

That law created a new nationwide umbilical cord blood stem cell program designed to collect, type, and cryogenically freeze cord blood units for transplantation into patients to mitigate and cure serious disease. The law also provided that cord blood stem cells be used for research. The new cord blood program was combined with an expanded bone marrow initiative, crafted over several years by our distinguished former colleague, Congressman Bill Young.

Mr. Speaker, umbilical cord blood stem cells obtained after the birth of a child have proven to be highly efficacious in treating over 75 diseases, including lymphoma, leukemia, sickle cell disease, and other metabolic and immune deficiencies.

I thank Dr. Joanne Kurtzberg of Duke University, an internationally renowned expert in pediatric hematology, oncology, and umbilical cord blood banking and transplantation. Dr. Kurtzberg helped draft our original law 26 years ago. It took 5 long years to enact it into law. It was blocked at many turns, but she was right there from the beginning and continues to be an extraordinary pioneer in the field.

Earlier today, I called Dr. Kurtzberg—we do talk a lot—and she said cord blood has been used as a donor for transplant, enabling over 50,000 patients with cancer, blood disease, and other genetic conditions to have a life-saving treatment. Cord blood is also used as starting material for manufacturing immune effector cells, like CAR T cells, and others to treat patients with cancer and autoimmune diseases. She said there is exciting research now using cord blood to treat children with cerebral palsy, birth asphyxia, and autism.

Mr. Speaker, the National Cord Blood Inventory—created by the original law and continued in this reauthorization—provides funding to public cord blood banks participating in the program to allow them to expand the national inventory of cord blood units that are available for transplant. These units are then listed on the registry by the National Marrow Donor Program. The funds appropriated thus far have led to an important increase in the use of these units. The registry now has approximately 121,000 available units.

The program registry allows patients and physicians to locate matching cord blood units, as well as adult donors, for both marrow and peripheral blood stem cell transplants.

Mr. Speaker, the program registry allows patients and physicians to locate matching cord blood units, as well as adult a donors, for marrow and peripheral blood stem cells. The program is the world's largest, most diverse donor registry, with more than 43 million potential marrow donors around the world. To date, NMDP, through its operation of the program, has facilitated over 150,000 transplants.

The bill before us today, Mr. Speaker, authorizes $280 million for these programs over 5 years—$115 million for cord blood, $165 million for bone marrow programs—to ensure that thousands of present and future patients benefit from this extraordinary field of regenerative medicine.

Mr. Speaker, I am deeply grateful to Chairman GUTHRIE for his amazing support and leadership in advancing the bill. I want to thank others, including my friend FRANK PALLONE; DORIS MATSUI, who is the prime Democrat cosponsor; Mr. BILIRAKIS, one of the originals and a great supporter; Ms. PINGREE; Ms. TENNEY; Mr. MFUME; and others. We have others, but they were the originals.

I also want to thank some of my staff, including Rebecca West, Evan Heitman, John McDonough, who worked overtime—as you know, so many details to be attended to—and, of course, the Staff Director Megan Jackson; Emma Schultheis; and Jackie Weinrich, who worked on the Democrat side in helping to get this to the floor. I thank them all so much.

Mr. Speaker, this will save lives, and I urge support for it.

Mr. GUTHRIE. Mr. Speaker, I yield such much time as he may consume to the gentleman from Florida (Mr. BILIRAKIS), a very important member of our committee and chairman of the Commerce, Manufacturing, and Trade Subcommittee.

Mr. BILIRAKIS. Mr. Speaker, I thank the chairman for yielding.

I rise today in strong support of the Stem Cell Therapeutic and Research Reauthorization Act, bipartisan legislation that will save lives by ensuring continued access to stem cell, bone marrow, and cord blood transplants for patients across our Nation.

Every year, thousands of Americans battling leukemia, lymphoma, sickle cell disease, and other blood disorders rely on the C.W. Bill Young program to help find a compatible donor. For many patients, that match is their only chance at survival, Mr. Speaker.

This legislation reauthorizes the program, modernizes the National Cord Blood Inventory, and strengthens our Nation's transplant system to help ensure patients continue to have access to these lifesaving transplants.

I am grateful to my colleagues on both sides of the aisle for working together to advance this important piece of legislation. Mr. Speaker, Representative SMITH of New Jersey has done an outstanding job over the years. He has done a great job leading this particular bill. He works on bills, Mr. Speaker, that positively directly affect our constituents. We appreciate him and the great chairman and, of course, Ranking Member PALLONE.

I urge my colleagues to pass this good piece of legislation.

Mr. GUTHRIE. Mr. Speaker, I am prepared to close, and I reserve the balance of my time.

Mr. PALLONE. Mr. Speaker, I urge support for this bill. It is not only bipartisan, it is very important.

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

□ 1520

Mr. GUTHRIE. Mr. Speaker, I yield myself the balance of my time.

Mr. Speaker, in closing, I encourage a ''yes'' vote on 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 Kentucky (Mr. GUTHRIE) that the House suspend the rules and pass the bill, H.R. 5160, 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.

ACCELERATING ACCESS TO DEMENTIA AND ALZHEIMER'S PROVIDER TRAINING ACT

Mr. GUTHRIE. Mr. Speaker, I move to suspend the rules and pass the bill (H.R. 3747) to amend the Public Health Service Act to reauthorize the Project ECHO Grant Program, to establish grants under such program to disseminate knowledge and build capacity to address Alzheimer's disease and other dementias, and for other purposes, as amended.