



COMMITTEE ON
ENERGY & COMMERCE
DEMOCRATS
RANKING MEMBER FRANK PALLONE, JR.

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**Statement of Ranking Member Frank Pallone, Jr., as prepared for delivery
House Energy and Commerce Committee
Subcommittee on Health
Hearing on “Examining Public Health Legislation:
H.R. 2820, H.R. 1344, and H.R. 1462”**

Thank you Chairman Pitts and Ranking Member Green for holding this hearing on important pieces of legislation that will surely improve the health of our nation. I am pleased that all three bills have robust bipartisan support and continue this committee’s tradition of a thoughtful, collaborative approach to public health legislation.

H.R. 2820, the Stem Cell Therapeutic and Research Reauthorization Act continues our highly successful *Be the Match Registry* for bone marrow and umbilical cord blood transplantation. I’d especially like to thank Representative Matsui for her continued leadership on this issue. For nearly 20,000 patients each year, such transplants are life-saving. Of those patients, 70 percent will not find a match within their family member and will require a non-relative donor. That is why the *Be the Match Registry* and its nearly 12.5 million registered bone marrow donors and the collection of more than 209,000 cord blood units is so important. This bill ensures that this critically important program continues to operate.

We will also hear about H.R. 1344, the Early Hearing Detection and Intervention Act of 2015 which was introduced by Representatives Capps and Guthrie. Prior to the authorization of the Early Hearing Detection and Intervention Program, less than half of all newborns were regularly screened for hearing loss. We’re proud to say that now approximately 97 percent of newborns receive hearing screening. This gives hearing impaired children early access to the interventions and treatments they desperately need. The evidence tells us that these early treatments are critical in minimizing a hearing-impaired child’s risk of developmental delays, especially communication, social skills and cognition. This bill would ensure that we continue to

support a public health program that has a proven track record of success as well as continue our obligation to protect the health of our children.

Finally, H.R. 1462, the Protecting Our Infants Act of 2015 is a greatly needed piece of legislation to address a sad reality of our country's opioid epidemic: prenatal opioid abuse and the steep increase in the incidence of neonatal abstinence syndrome or NAS. According to a recent study the incidence of NAS quadrupled between 2004 and 2013. NAS occurs in newborns who were exposed to opiates while in their mother's womb and is associated with negative health outcomes including preterm births, low birthweight, and complications such as respiratory distress.

This bill rightly recognizes our imminent need for a comprehensive national strategy to address prenatal opioid abuse and NAS. H.R. 1462 would require HHS to develop recommendations for the treatment and prevention of prenatal opiate abuse and neonatal abstinence syndrome, it would require the CDC to assist states in collecting data to monitor the problem and would direct HHS to develop a coordinated research and programming strategy to address the public health challenge of NAS. I want to also thank Rep. Katherine Clark for her leadership on this critical and timely issue.

Mr. Chairman, I look forward to working with you and our colleagues on these important public health bills.

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