Committee on Energy and Commerce

Opening Statement as Prepared for Delivery
of
Ranking Member Frank Pallone, Jr.

Markup of 16 Bills, Full Committee

May 21, 2026

Today the Committee is marking up 16 bills that I hope will garner strong, bipartisan support.

Fourteen of the bills come from our Health Subcommittee and will help us better protect the health of the American people. The legislation we are considering reauthorizes and strengthens work around three key areas of public health.

First, prevention and early detection are among the highest value investments we can make in the health of the American people. Whether the threat is cancer, an emerging infectious disease, a traumatic brain injury, or a complication of pregnancy, the principle is the same: we are far better off catching problems early and arming patients and providers with the tools to act. Four of the bills before us reauthorize important programs to continue meaningful early detection work including H.R. 1493, the Traumatic Brain Injury (TBI) Program Reauthorization Act, which I introduced.

This legislation was first championed by my good friend, the late Representative Bill Pascrell of New Jersey. It will secure continued support for Americans affected by traumatic brain injuries. This is critical because federal authorities that fund TBI research, surveillance, prevention, and state-level services lapsed in 2024.

Second, public health depends on sustained federal research and infrastructure. We are reauthorizing programs that are the scientific and surveillance backbone for state and local public health departments so they can respond to what is happening on the ground. I am also pleased that we are considering the "ACT for ALS Act," which extends programs at the Food and Drug Administration (FDA) and the National Institutes of Health (NIH) to accelerate research and promising therapies for ALS.

Third, these bills meet people where they are. They direct attention toward populations that too often fall through the cracks: younger women whose risk factors are missed by general guidelines, low-income and uninsured women who could not otherwise afford a screening, mothers and infants in communities with limited prenatal care, children in low-income families that rely on school-based health care, and Americans in regions where vector-borne disease has spread. Federal programs that close these gaps don't replace state, local, and private effort; they make it possible. For instance, I am pleased that we are considering legislation to reauthorize funding for school-based health centers, which allow students to access mental health, dental, and primary care as well as nutrition education right at school.

We are considering a bipartisan recycling bill from our Environment Subcommittee. This package is a long time coming and represents a good step forward to bolstering our domestic recycling and composting systems through improved data collection and increased recycling accessibility.

Finally, I am pleased we are here marking up a bipartisan safety bill that will be included in the larger Surface Transportation bill. Safety should not be a partisan issue and this bill contains many provisions that will enhance safety on our roadways both for vehicle occupants and for vulnerable road users, such as bicyclists.

I am glad that this package includes many priorities from Democratic members on everything from distracted driving to ensuring consumers can safely exit a car during a vehicle fire. It also includes a number of bipartisan priorities.

This was a long road and there is still work to be done, especially around ensuring consumer access to optional safety features and affordable repairs. I look forward to continuing that work. Thank you to the Chairman and his staff for working across the aisle on this package.

I will have more to say on several of these bills during the markup, but for now I yield back.