healthy and happy adults. So this is a wonderful program.

Again, I commend the committee, Energy and Commerce Committee. I commend Mr. Green, Mr. Sullivan, Mr. Pallone, Mr. Deal.

I recommend that all my colleagues, of course, support H.R. 577.

Mr. PASCRELL. I was pleased to introduce the Vision Care for Kids Act with my colleagues Congressmen GREEN, SULLIVAN, and ENGEL and Congresswoman ROS-LEHTINEN in both this Congress and in the previous Congress. This important legislation will establish a federal grant program to provide for timely diagnostic examination, treatment, and follow-up vision care for children, which will complement existing State programs and allow eye exams for a vulnerable pediatric population that do not qualify for Medicaid or SCHIP and do not have access to private health insurance.

This issue has long been near to my heart. In fact, in 2003, I first championed legislation to create a grant program to provide comprehensive eye exams and necessary follow-up care for children whose families do not have the resources for or access to such care. Preventive vision care is critically important to avoid vision loss, and even blindness, in our nation's children, which can affect a child's physical, emotional, and intellectual development.

The CDC states that approximately 1.8 million children under the age of 18 are blind or have some form of visual impairment. Fortunately, in most cases, vision loss can be avoided with early diagnosis and treatment. Eye health has a direct impact on learning and achievement, and unfortunately, many visual deficits are caught only after they have impaired a child's early and most critical education. Consequently, it is a national disgrace that only one in three children receive preventive vision care before they are enrolled in elementary school.

This essential legislation will provide the tools to significantly mitigate the effects of visual impairment. In fact, H.R. 577 has the potential to open up a new world of academic and social opportunity for approximately half a million of our youngest children nationwide. As Congress continues its work to improve the health care and educational opportunities available to children in this country, the need to remove outside impediments to learning must be addressed to achieve long-term success.

I would like to thank Chairman WAXMAN and Chairman PALLONE, for their thoughtful consideration and support for preventive vision care for children, and I urge my colleagues to vote in favor of the Vision Care for Kids Act. Finally, I encourage the Senate to expeditiously consider this essential legislation to provide necessary vision care to our nation's most vulnerable children

Ms. JACKSON-LEE of Texas. Mr. Speaker, I rise in support of H.R. 577 "Vision Care for Kids Act of 2009." I want to thank my colleague Congressman GENE GREEN of Texas for introducing this legislation.

Mr. Speaker, I rise today to tell my colleagues that our nation's children are our future. They should be the center of all of our legislative efforts to improve the lives of all Americans.

The Vision Care for Kids Act of 2009 is a necessary grant program aimed at bolstering

children's vision initiatives in the states and encouraging new community-based children's vision partnerships. This legislation amends the Public Health Service Act to authorize the Secretary of Health and Human Services, acting through the Director of the Centers for Disease Control and Prevention (CDC), to award matching grants to states to complement existing state efforts to: (1) provide comprehensive eye examinations from a licensed optometrist or ophthalmologist for children who have been previously identified through a vision screening or eye examination by a licensed health care provider or vision screener as needing such services, who do not otherwise have coverage for vision services, and who are low-income children, with priority given to children who are under the age of nine years; (2) provide treatment or services as necessary to correct identified vision problems; and (3) develop and disseminate to parents, teachers, and health care practitioners educational materials on recognizing signs of visual impairment in children.

We used to hold our child's hands when our child takes their first step. However, not many help our children to learn how to use their eyes properly, how to see properly, and how to relax their eyes and protect their vision. Today's education system requires our children to give close attention, read many books, add or subtract numbers or operate a computer for hours. Therefore, it is important to learn to guide our children to attain good child vision health at various stages of their development.

Ten million children suffer from vision disorders, according to the National Parent Teacher Association. Vision disorders are considered the fourth most common disability in the United States, and they are one of the most prevalent handicapping conditions in childhood. According to data from the Making the Grade: An analysis of state and federal children's vision care policy research study, 32 states require vision screenings for students. but 29 of them do not require children who fail the screening to have a comprehensive eye examination. Because up to two-thirds of children who fail vision screenings do not comply with recommended eye exams, many children enter school with uncorrected vision problems. Undetected and untreated vision deficiencies, particularly in children, can take a large toll. Studies have shown that the costs associated with adult vision problems in the U.S. are at \$51.4 billion.

Undiagnosed and untreated vision problems for children are serious issues. Vision problems can affect a child's cognitive, emotional, neurological and physical development. While vision disorders are considered the fourth most common disability in the United States, two-thirds of all children entering school have never received a vision test. For the one-third of children who do receive a vision test, approximately 40–67 percent who fail the test do not receive the recommended follow-up care.

I urge my colleagues to support the Vision Care for Kids Act of 2009 so that we can protect our children of America.

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

Mr. PALLONE. I also yield back and ask for passage, Mr. Speaker.

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. 577, 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. BROUN of Georgia. Mr. Speaker, on that I demand the yeas and nays.

The yeas and nays were ordered.

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.

REPORT ON RESOLUTION PROVIDING FOR CONSIDERATION OF H. RES. 279, PROVIDING FOR EXPENSES OF CERTAIN COMMITTEES OF HOUSE OF REPRESENTATIVES IN 111TH CONGRESS

Mr. HASTINGS of Florida, from the Committee on Rules, submitted a privileged report (Rept. No. 111–63) on the resolution (H. Res. 294) providing for consideration of the resolution (H. Res. 279) providing for the expenses of certain committees of the House of Representatives in the One Hundred Eleventh Congress, which was referred to the House Calendar and ordered to be printed.

## HIGHER EDUCATION TECHNICAL CORRECTIONS

Mr. HINOJOSA. Mr. Speaker, I move to suspend the rules and pass the bill (H.R. 1777) to make technical corrections to the Higher Education Act of 1965, and for other purposes.

The Clerk read the title of the bill. The text of the bill is as follows:

### $\mathrm{H.R.}\ 1777$

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

#### SECTION 1. TABLE OF CONTENTS.

The table of contents for this Act is as follows:

Sec. 1. Table of contents.

Sec. 2. References.

Sec. 3. Effective date.

TITLE I—GENERAL PROVISIONS

Sec. 101. General provisions.

# TITLE II—TEACHER QUALITY ENHANCEMENT

Sec. 201. Teacher quality enhancement.

TITLE III—INSTITUTIONAL AID

Sec 301 Institutional aid

Sec. 302. Multiagency study of minority science programs.

#### TITLE IV—STUDENT ASSISTANCE

Sec. 401. Grants to students in attendance at institutions of higher education.

Sec. 402. Federal Family Education Loan Program.

Sec. 403. Federal work-study programs.

Sec. 404. Federal Direct Loan Program.

Sec. 405. Federal Perkins Loans.

Sec. 406. Need analysis.

Sec. 407. General provisions of title IV.

Sec. 408. Program integrity.

Sec. 409. PLUS loan auction extension.

TITLE V—DEVELOPING INSTITUTIONS

Sec. 501. Developing institutions.