forests nationwide. This has a domino effect on communities and school districts in and around the forest, because, since 1908, counties in national forests are entitled to 25 percent of the receipts from timber sales under the 1908 Good Neighbor Compact.

These are communities which were built on the lumber industry and natural resources. Many are among the most rural, poorest in Pennsylvania, and the funding from timber sales is critical for schools, roads, and other public services, something these towns and school districts depend on.

Due to this diminished revenue and various challenges forest communities continue to face, we must pass real reform that leads to good management practices in our national forests. As such, I continue to support the Resilient Federal Forests Act of 2015, or H.R. 2647. I believe this legislation is a key to increasing timber harvests in our national forests, which will not only benefit our communities but will create a forest that is healthier and less prone to wildfires and invasive species.

NORTHERN CALIFORNIA ACADEMY NOMINEE ANNOUNCEMENTS

(Mr. LAMALFA asked and was given permission to address the House for 1 minute.)

Mr. LAMALFA. Mr. Speaker, I am pleased to announce my nominees for appointment to our Nation's service academies. With the recommendations of my Veterans Council, we have nominated a group of young men and women that are committed to representing the First District and our great Nation.

For the U.S. Naval Academy, we have Trent Foster; we have Kody Rulofson and David Shattuck.

For the U.S. Military Academy, we have Nicholas Katz, Bradley Salyer, and Wyatt Wyckoff.

For the U.S. Air Force Academy, we have Christiana Jackman.

For our Merchant Marine Academy, we have Anna Lewis and Garret Reader.

For the U.S. Naval Academy and the U.S. Air Force Academy, we have Mason Royse.

And for the U.S. Naval Academy and the U.S. Military Academy, we have Rory Sprague.

Congratulations to them all.

We thank the Veterans Council for helping with the interview process and vetting these young people.

We thank the parents for raising them to be the go-getters that they are and for the dedication required to get to this point. And we thank the nominees themselves for the hard work that it takes and the service that they are willing to do and put out and their sacrifice for us.

God bless them all.

ANNOUNCEMENT BY THE SPEAKER PRO TEMPORE

The SPEAKER pro tempore (Mr. PALAZZO). Pursuant to clause 8 of rule XX, the Chair will postpone further proceedings today on motions to suspend the rules on which a recorded vote or the yeas and nays are ordered, or on which the vote incurs objection under clause 6 of rule XX.

Record votes on postponed questions will be taken later.

STEM CELL THERAPEUTIC AND RESEARCH REAUTHORIZATION ACT OF 2015

Mr. PITTS. Mr. Speaker, I move to suspend the rules and concur in the Senate amendment to the bill (H.R. 2820) to reauthorize the Stem Cell Therapeutic and Research Act of 2005, and for other purposes.

The Clerk read the title of the bill.

The text of the Senate amendment is as follows:

Senate amendment:

Strike out all after the enacting clause and insert:

SECTION 1. SHORT TITLE.

This Act may be cited as the ''Stem Cell Therapeutic and Research Reauthorization Act of 2015''.

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

(a) IN GENERAL.—Section 379(d)(2)(B) of the Public Health Service Act (42 U.S.C. 274k(d)(2)(B)) is amended—

(1) by striking ''remote collection'' and inserting ''collection''; and

(2) by inserting ''including remote collection,'' after ''cord blood units,''.

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

(1) by striking ''$30,000,000 for each of fiscal years 2011 through 2014 and''; and

(2) by inserting ''and $30,000,000 for each of fiscal years 2016 through 2020'' before the period at the end.

(c) SECRETARY REVIEW ON STATE OF SCIENCE.—The Secretary of Health and Human Services, in consultation with the Director of the National Institutes of Health, the Commissioner of the Food and Drug Administration, and the Administrator of the Health Resources and Services Administration, including the Advisory Council on Blood Stem Cell Transplantation established under section 379(a) of the Public Health Service Act (42 U.S.C. 274k(a)), and other stakeholders, where appropriate given relevant expertise, shall conduct a review of the state of the science of using adult stem cells and birthing tissues to develop new types of therapies for patients, for the purpose of considering the potential inclusion of such new types of therapies in the C.W. Bill Young Cell Transplantation Program (established under such section 379) in addition to the continuation of ongoing activities. Not later than June 30, 2019, the Secretary shall submit to the Committee on Health, Education, Labor, and Pensions of the Senate and the Committee on Energy and Commerce of the House of Representatives recommendations on the appropriateness of such new types of therapies for inclusion in the C.W. Bill Young Cell Transplantation Program.

SEC. 3. CORD BLOOD INVENTORY.

Section 2 of the Stem Cell Therapeutic and Research Act of 2005 (42 U.S.C. 274k note) is amended—

(1) in subsection (a), by striking ''one-time'';

(2) by striking subsection (c);

(3) by redesignating subsections (d) through (h) as subsections (c) through (g), respectively;

(4) in subsection (d) (as so redesignated)—

(A) in paragraph (1), by striking ''paragraphs (2) and (3)'' and inserting ''paragraphs (2), (3), and (4)'';

(B) in paragraph (2)(B), by striking ''subsection (d)'' and inserting ''subsection (c)''; and

(C) by adding at the end the following:

''(4) CONSIDERATION OF BEST SCIENCE.—The Secretary shall take into consideration the best scientific information available in order to maximize the number of cord blood units available for transplant when entering into contracts under this section, or when extending a period of funding under such a contract under paragraph (2).

''(5) CONSIDERATION OF BANKED UNITS OF CORD BLOOD.—In extending contracts pursuant to paragraph (3), and determining new allocation amounts for the next contract period or contract extension for such cord blood bank, the Secretary shall take into account the number of cord blood units banked in the National Cord Blood Inventory by a cord blood bank during the previous contract period, in addition to consideration of the ability of such cord blood bank to increase the collection and maintenance of additional, genetically diverse cord blood units.'';

(5) in subsection (f) (as so redesignated)—

(A) by striking paragraph (4); and

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

(6) in subsection (g) (as so redesignated)—

(A) in paragraph (1)—

(i) by striking ''$23,000,000 for each of fiscal years 2011 through 2014 and''; and

(ii) by inserting ''and $23,000,000 for each of fiscal years 2016 through 2020'' before the period at the end; and

(B) by striking paragraph (2).

SEC. 4. DETERMINATION ON THE DEFINITION OF HUMAN ORGAN.

Not later than one year after the date of enactment of this Act, the Secretary of Health and Human Services shall issue determinations with respect to the inclusion of peripheral blood stem cells and umbilical cord blood in the definition of human organ.

The SPEAKER pro tempore. Pursuant to the rule, the gentleman from Pennsylvania (Mr. PITTS) and the gentleman from Texas (Mr. GENE GREEN) each will control 20 minutes.

The Chair recognizes the gentleman from Pennsylvania.

□ 0915

GENERAL LEAVE

Mr. PITTS. Mr. Speaker, I ask unanimous consent that all Members may have 5 legislative days in which to revise and extend their remarks and insert extraneous materials in the RECORD on the bill.

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

There was no objection.

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

Mr. Speaker, I rise today in support of H.R. 2820, the Stem Cell Therapeutic and Research Reauthorization Act, introduced by my colleagues, Representative CHRIS SMITH of New Jersey and Representative DORIS MATSUI of California.

This bill is another example of the Energy and Commerce Committee's ongoing effort to work together in a bipartisan manner to strengthen public health and solve problems in our Nation's healthcare system.

H.R. 2820 reauthorizes the National Cord Blood Inventory program and the C.W. Bill Young Cell Transplantation Program through fiscal year 2020,

which provides Federal support for cord blood donation and research essential to increasing patient access to transplants.

The National Cord Blood Inventory, the NCBI, is a program to collect, store, and distribute umbilical cord blood to those in need of a cord blood stem cell transplant. These cord blood units must meet specific criteria, and are available through the C.W. Bill Young Cell Transplantation Program to treat patients who need a transplant.

The blood-forming cells from cord blood have unique qualities that help some patients who would otherwise be unable to have a potentially lifesaving transplant. NCBI is the largest and most diverse marrow registry in the world.

The C.W. Bill Young Cell Transplantation Program provides support to patients who undergo a transplant and helps match donors to patients who are in need of an unrelated marrow donor. Seventy percent of all patients who need a transplant don't have a match donor in their family, and this program gives them somewhere to turn.

I support H.R. 2820. I urge my colleagues to support this important piece of legislation.

I reserve the balance of my time.

Mr. GENE GREEN of Texas. Mr. Speaker, I yield myself such time as I may consume.

H.R. 2820, the Stem Cell Therapeutic and Research Reauthorization Act, would continue the highly successfully Be The Match Registry for bone marrow and umbilical cord blood transplantation.

This program provides hope to people in need of lifesaving transplants. Each year about 20,000 patients receive blood marrow transplants. Seventy percent of those patients do not find a match within their family and instead rely on the Be The Match Registry to find a non-relative bone marrow donor.

That is why continued Federal support for the Be The Match Registry and its nearly 12.5 million registered bone marrow donors and collection of more than 209,000 cord blood units is so important.

I am glad that we have come together on a bipartisan basis in our committee and in the House and the Senate to support this lifesaving program.

I want to thank Congresswoman MATSUI for her leadership in this area. I urge my colleagues to vote ''yes'' to concur with Senate H.R. 2820.

I reserve the balance of my time.

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

I would like to reiterate the important work that the National Marrow Donor Program does for patients. Be The Match, operated by the National Marrow Donor Program, has facilitated more than 68,000 marrow and cord blood transplants, which is an average of more than 520 transplants a month. They conducted their first transplant as the National Marrow Donor Program in 1987.

They also continue to lead the way in developing new cellular therapies, in advancing services to speed the transplant process, and improving treatments for post-transplant complications. Be The Match invests in dedicated researchers whose countless hours in the lab and caring for patients have helped more patients than ever before to receive a transplant.

Beyond establishing the registry, investment in medical research over the years has been essential in helping find the answers that save the lives of more patients.

In 1990, the Nobel Prize in Medicine was awarded to Dr. E. Donnall Thomas for discoveries in cellular transplantation.

In 1994, the first peripheral blood stem cell collected for use in unrelated transplants occurred.

In 1998, the cord blood program was launched.

In 2001, the NMDP Repository was built, one of the world's largest tissue sample storage facilities used for medical research.

In 2004, Be The Match and the NMDP partnered with the Medical College of Wisconsin to create the Center for International Blood and Marrow Transplant Research.

The great work and discovery continues. I urge bipartisan support for H.R. 2820 and support for discovery and cures for patients.

I reserve the balance of my time.

Mr. GENE GREEN of Texas. Mr. Speaker, I continue to reserve the balance of my time.

Mr. PITTS. Mr. Speaker, I yield 2 minutes to the gentleman from Georgia (Mr. CARTER).

Mr. CARTER of Georgia. Mr. Speaker, I rise today in support of H.R. 2820, the Stem Cell Therapeutic and Research Reauthorization Act of 2015.

This bill reauthorizes the National Cord Blood Inventory program and the C.W. Bill Young Cell Transplantation Program, two programs that save lives every day through bone marrow transplants and blood infusions.

This bill is very similar to legislation that the Georgia General Assembly passed in 2007, establishing the newborn umbilical cord blood bank. I voted for that legislation in the Georgia General Assembly, and I will vote in favor of this legislation.

For some patients who have leukemia, lymphoma, sickle cell anemia, or a life-threatening blood cancer, help from programs like the National Cord Blood Inventory program and the C.W. Bill Young Cell Transplantation Program, may be their last hope at living longer, healthier lives. That is why H.R. 2820 is so important.

This bill reauthorizes these two programs through 2020, and continues to provide lifesaving techniques and research to many who fight for their lives every day.

This bill originally passed the House on September 8 by voice vote. I encourage my colleagues to support it again.

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

Mr. PITTS. Mr. Speaker, I yield such time as he may consume to the gentleman from New Jersey (Mr. SMITH), the prime sponsor of this legislation.

(Mr. SMITH of New Jersey asked and was given permission to revise and extend his remarks.)

Mr. SMITH of New Jersey. Mr. Speaker, I want to thank, first of all, our distinguished chairman, Chairman PITTS, for his extraordinary work on this legislation.

I also want to thank Mr. GENE GREEN of Texas, Mr. PALLONE, and, of course, Chairman UPTON for his strong support of this reauthorization.

In the Senate, we have had a tremendous team of ORRIN HATCH, JACK REED, RICHARD BURR, and AL FRANKEN, who again worked in a very bipartisan way to ensure that this life-affirming, lifesaving legislation not only made it through the Senate, but was beefed up, made stronger.

People talk about the lack of bipartisanship. I do believe this is one of those bills where we have all come together to try to say—whether it be bone marrow or adult stem cells in the form of cord blood—that it be made available to as many people as possible in the most usable and efficacious way.

Mr. Speaker, just let me say—and we know this and I will try not to be too redundant because I think the chairman has explained it—the bill under consideration by the House today does reauthorize through 2020 two critically important and complementary programs, the C.W. Bill Young Cell Transplantation Program and the National Cord Blood Inventory.

It is especially appropriate during this time of gift-giving to reauthorize these life-giving programs. Americans willing to give the gift of life to others are at the heart of the success of this program.

In reauthorizing it, we are grateful for the adult donors willing to provide bone marrow or peripheral blood stem cells as well as mothers who donate their child's cord blood through public cord blood banks.

Under the National Cord Blood Inventory program, Mr. Speaker, contracts are awarded to cord blood banks to collect cord blood units donated after mothers give birth.

Around 4 million births occur in the United States every year. God, in his grace and love, has left a gift that then gives life and helps to cure diseases, including leukemia and other devastating blood-related diseases, left after that birth.

Again, cord blood and the placenta itself is teeming with stem cells that are, again, highly efficacious in curing and mitigating disease.

Americans have access to more than 12 million adult volunteer donors and 209,000 cord blood units through Be The Match. The program's Bone Marrow and Cord Blood Coordinating Centers

make information about bone marrow and cord blood transplants available to donors and patients. The Office of Patient Advocacy helps support patients and families dealing with a life-threatening diagnosis. The Stem Cell Therapeutic Outcomes Database tracks results.

Again, if you want to know how something is working or not, you track it, and you are constantly recalibrating it in order to make it better.

Today's bill is the second reauthorization of the Stem Cell Therapeutic and Research Act of 2005, a law that I authored a decade ago, joined by Artur Davis of Alabama, legislation that, again, cleared the Senate with the great help of Senator ORRIN HATCH.

That law built upon the excellent work of our distinguished, late colleague Bill Young of Florida to facilitate bone marrow transplants and created a brand-new national umbilical cord blood donation and transplantation program.

Dr. Jeffrey Chell, the CEO of NMDP/Be The Match, has noted that, for many diseases, including blood cancers and sickle cell anemia disease, cellular therapy is the best hope for a cure.

As he told Chairman PITTS and his committee, the patient population rising the most quickly is the elderly population, growing by double digits every year. The reason for that is that the medical conditions for which transplant is often the only cure tend to occur in older populations; diseases like acute leukemia, myelofibrosis, and others.

Breathtaking scientific breakthroughs have turned medical waste, post-birth placentas, and umbilical cord blood into medical miracles, treating more than 70 diseases—some say as many as 80—including leukemia, lymphoma, and sickle cell anemia.

Let me just conclude by pointing out that, during consideration of the Senate HELP Committee, language was added to direct relevant agencies to study the state of science using adult stem cells and birthing tissues to develop new therapies for patients.

Last year I visited Celgene Corporation in Summit, New Jersey, to learn of their extraordinary efforts to use cord blood to heal diabetic foot ulcers and how they turn amniotic membrane, an old placenta, into wound management that now has advanced past stage 3 clinical trials to the approval and regulatory filings stage.

Again, I want to thank the chief cosponsor, Ms. MATSUI; Mr. JOLLY; and Mr. FATTAH. Again, this is a bipartisan bill.

Mr. Speaker, the bill under consideration by the House today reauthorizes through 2020 two critically important and complementary programs—the C.W. Bill Young Cell Transplantation Program and National Cord Blood Inventory.

During this time of gift-giving, it is incredibly timely to reauthorize these life-giving programs. Americans willing to give the gift of life to others are at the heart of the success of this program. In reauthorizing it we are grateful for the adult donors willing to provide bone marrow or peripheral blood stem cells, as well as mothers who donate their child's cord blood through public cord blood banks.

Today, Mr. Speaker, under the National Cord Blood Inventory Program (NCBI), contracts are awarded to cord blood banks to collect cord blood units donated after mothers give birth. These units are then made available through the C.W. Bill Young Cell Transplantation Program also called the Be the Match Registry. The Program provides a single point of access, enabling those in need of lifesaving transplants to search for a match via an integrated nationwide network of bone marrow donors and cord blood stem cells. Americans have access to more than 12 million adult volunteer donors and 209,000 cord blood units through Be The Match. The Program's Bone Marrow and Cord Blood Coordinating Centers makes information about bone marrow and cord blood transplant available to donors and patients, and the Office of Patient Advocacy helps support patients and families dealing with a life-threatening diagnosis. And the Stem Cell Therapeutic Outcomes Database tracks results.

The leadership of Senators ORRIN HATCH, JACK REED, RICHARD BURR and AL FRANKEN was invaluable in shepherding this vital bill through the Senate. And special thanks to both Chairmen UPTON and PITTS for their outstanding leadership and help on this bill, as well as the strong support by Ranking Members PALLONE and GREEN. I am deeply grateful to original cosponsors Ms. MATSUI, Mr. JOLLY and Mr. FATTAH for their important contributions.

Today's bill is the second reauthorization of the Stem Cell Therapeutic and Research Act of 2005, a law that I sponsored a decade ago joined by Artur Davis of Alabama; legislation that cleared the Senate with the incomparable help of Senator ORRIN HATCH. That law built upon the excellent work of our distinguished late colleague Bill Young of Florida to facilitate bone marrow transplants and created a brand new national umbilical cord blood donation and transplantation program.

Dr. Jeffrey W. Chell, CEO of NMDP/Be the Match has noted that for many diseases including blood cancers and sickle cell disease, cellular therapy is the best hope for a cure. He told Chairman PITTS' subcommittee that the patient population "rising the most quickly is the elderly population . . . growing by double digits every year, and the reason for that is the medical conditions for which transplant is often the only cure tend to occur in older populations for diseases like acute myeloid leukemia, myelodysplastic syndrome, myelofibrosis and others."

Breathtaking scientific breakthroughs have turned medical waste—post birth placentas and umbilical cord blood—into medical miracles treating more than 70 diseases including leukemia, lymphoma and sickle cell anemia.

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

In addition to currently treating more than 70 diseases like sickle cell anemia and leukemia, cord blood units from NCBI banks are also made available for research on future therapies. In groundbreaking research, Dr. Kurtzberg of Duke University also testified last June that "in addition to use in patients with malignant and genetic diseases, cord blood is showing enormous potential for use in cellular therapies and regenerative medicine. Cord blood derived vaccines against viruses and certain types of cancers are currently under development and in early phase clinical trials. Cells, manufactured from cord blood units are being developed to boost recovery of the immune system. Cells regulating autoimmunity (Regulatory T cells) are also in clinical trials. These approaches, which often utilize cord blood banked in family banks, may help patients with Type 1 Diabetes, as well as other diseases."

Dr. Kurtzberg further testified that she and others are developing uses for cord blood to treat acquired brain disorders. "Over the past six years" she said "we have initiated trials of autologous (the patient's own) cord blood in babies with birth asphyxia, cerebral palsy, hearing loss and autism . . ."

Dr. Kurtzberg has also said "We've learned that when donor cells are infused into one's body, they go to the brain and help heal the brain. When a child has a brain injury around birth, we can use their own cord blood cells to correct the damage that's occurred."

Inportantly, during consideration in the Senate HELP Committee, language was added to direct the relevant agencies to study the state of science using adult stem cells and birthing tissues to develop new therapies for patients. Last year, Mr. Speaker, I visited Celgene Corporation of Summit, New Jersey to learn of their extraordinary efforts to use cord blood to heal diabetic foot ulcers and how they've turned amniotic membrane—an old placenta—into wound management that has now advanced past stage 3 clinical trials to the approval and regulatory filings stage.

H.R. 2820 authorizes $265 million over five years and will ensure that thousands of present-day and future patients benefit from the exciting field of regenerative medicine.

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

The SPEAKER pro tempore. The question is on the motion offered by the gentleman from Pennsylvania (Mr. PITTS) that the House suspend the rules and concur in the Senate amendment to the bill, H.R. 2820.

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. PITTS. 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, further proceedings on this motion will be postponed.

□ 0930

NATIONAL GUARD AND RESERVIST DEBT RELIEF EXTENSION ACT OF 2015

Mr. GOODLATTE. Mr. Speaker, I move to suspend the rules and pass the bill (H.R. 4246) to exempt for an additional 4-year period, from the application of the means-test presumption of