

Mr. REID. Mr. President, I ask unanimous consent that the live quorum under rule XXII be waived.

The PRESIDING OFFICER. Without objection, it is so ordered.

MORNING BUSINESS

Mr. REID. Mr. President, I ask unanimous consent that there now be a period for the transaction of morning business, with Senators permitted to speak for up to 10 minutes each.

The PRESIDING OFFICER. Without objection, it is so ordered.

S. CON. RES. 21

AMENDMENT NO. 589

Mr. KYL. The fiscal year 2006 and fiscal year 2007 budget resolutions included an importation reserve fund for drugs imported from countries "with strong safety laws." Yet the Dorgan-Snowe amendment omits that language. Does the Senator from New Hampshire agree that under the Dorgan-Snowe amendment, the term "safe importation" means from countries "with strong safety laws"?

Mr. GREGG. Yes. The term "safe importation" means importation only from countries with strong safety laws. The additional language "with strong safety laws," which was included in last year's budget, was redundant, but the absence of those words does not alter the meaning, in my opinion. "Safe importation" refers to the importation of prescription drugs from countries that require the review of drugs for safety and effectiveness by an entity of the government of the country; that require the methods used in and the facilities and controls used for the manufacture, processing, and packing of drugs in the country to be adequate to preserve their identity, quality, purity, strength, and efficacy; that require the labeling and promotion of drugs to be in accordance with the approval of the drug and whose valid marketing authorization system is equivalent to the systems in the United States.

GENOMICS AND PERSONALIZED MEDICINE ACT

Mr. BURR. Mr. President, I rise today to express my support for S. 976, the Genomics and Personalized Medicine Act of 2007, which my distinguished colleague from Illinois, Senator OBAMA, and I introduced on March 23, 2007. Senator OBAMA introduced this legislation last year. We have worked together on some revisions, and I am proud to join him in cosponsoring the legislation this year.

I believe this legislation will help improve the quality and safety of health care by providing a better understanding of what causes certain diseases. Through a coordinated research initiative and safer genetic tests, patients and doctors will be empowered

to make more informed decisions about medical treatments.

This bill will advance the study of human genes and their functions to better predict patients' susceptibility to certain diseases or conditions and better customize drugs and medical treatments to meet patients' unique needs. By facilitating genomics research, fostering a capable genomics workforce, and encouraging the development of high quality genetic tests, patients will be better informed about the medical care they need.

I am proud that North Carolina is a leader in genomics and personalized medicine research. Duke University's Institute for Genome Sciences and Policy and the University of North Carolina at Chapel Hill's Institute for Pharmacogenomics and Individualized Therapy are both conducting significant research efforts in this area and support a stronger Federal focus on genomics. This legislation will increase Federal support for initiatives at Duke and Chapel Hill—a win-win for North Carolina and patients.

Specifically, this bill establishes an Interagency Working Group at the U.S. Department of Health and Human Services to pull together and accelerate genomics research by developing standardized terminology and establishing quality standards and guidelines for the collection, processing, and storage of genomic samples and data. It advances genomics research by establishing a national biobanking distributed database that collects and integrates genomic data to simplify pooled data analysis. The bill also develops biobanking initiatives at academic medical centers across the country, including biobanks containing biological specimens. It will improve genetics and genomics training by developing model training programs, residency curricula and teaching materials, and by integrating genetics and genomics into clinical and public health practice by developing health professional guidelines.

The bill will also encourage drug sponsors and device companies to develop companion diagnostic tests, and it will improve Federal oversight and regulation of genetic tests by identifying which tests require review and which agency—the Centers for Medicare and Medicaid Services or the Food and Drug Administration—should have oversight over specific categories of tests. It requires the Centers for Disease Control and Prevention to evaluate direct-to-consumer marketing of genetic tests to which consumers have direct access and to educate the public about genomics and its applications. It also asks the Agency for Healthcare Research and Quality to assess the clinical utility and cost-effectiveness of companion diagnostic tests that guide prescribing decisions.

ADDITIONAL STATEMENTS

BURLINGTON COMMUNITY HEALTH CENTER

● Mr. HARKIN. Mr. President, this spring, the new community health center in Burlington, IA, officially opened for business. Having secured funding for the center and attended the groundbreaking ceremony last June, I know how important this health care facility is to Burlington and the surrounding communities. At long last, Des Moines County has a permanent, unified medical and dental clinic, which has been sorely needed for many years.

This is a truly unique community health center. It is housed on the grounds of Southeastern Community College, and there is an agreement between the CHC board and the community college to allow nursing and health aide students to do some of their training in the center. This gives the center an edge in recruiting staff, and it gives students hands-on training opportunities right there on campus. Clearly, this is a win-win-win arrangement for the center, for the community college, and for the entire Burlington community.

I salute Ron Kemp and others who had the vision to create this new community health center, and the persistence to transform their vision into bricks and mortar. The facility is welcoming, modern, and well-equipped. The staff members are truly an inspiration. They have a special passion for their work, and take pride in the fact that they are providing first-rate health care to underserved communities.

Dr. Martin Luther King, Jr., used to say that "Life's most persistent and urgent question is: What are you doing for others?" The staff members at the community health centers of Southeast Iowa have answered that question in powerful ways. They have committed themselves to providing high-quality health care to all comers, regardless of ability to pay. All are welcomed equally. All are served with professionalism and excellence. As chair of the Health and Human Services Appropriations Subcommittee, I am 100 percent committed to securing appropriate funding for community health centers all across America. One thing I know for certain: Every dollar Congress appropriates for centers like the one in Burlington is a dollar spent wisely and frugally. It never ceases to amaze me how their staff members are able to do so much—and to serve so many people—with such limited resources.

I dare say that no one in the health care profession faces greater challenges than those who choose to work in community health centers. These challenges include chronic illness, cultural and linguistic differences, geographical barriers, and homelessness, to name just a few. Nothing stops these dedicated professionals.