

Act. This legislation includes provisions that community pharmacists from across my State have been tirelessly advocating for and that are important to keeping them in business.

The Congressional Community Pharmacy Caucus worked hard to get these necessary fixes included in this legislation, and I am gratified that they were included in H.R. 6331. These provisions are included in bills that I have sponsored, and they include prompt pay. The bill requires pharmacies to be reimbursed within 14 days if clean claims are submitted electronically and 30 days if submitted in other ways.

The AMP delay, this is the average manufacturer's price, the bill delays the implementation of the provisions creating the average manufactured price that was developed by CMS and which in my opinion is a terribly flawed system. The bill delays the implementation of the AMP system until after September 30, 2009.

Finally, the bill suspends the competitive bidding requirements in the durable medical equipment program for 1 year as well, as well as exempting diabetes test supplies from being subjected to the competitive bidding process.

It is important to the health of Americans and certainly to the health of rural Kansans that the Senate promptly adopt this legislation.

Also this week, it was my pleasure to participate in a ceremonial signing of the Kansas legislation that will allocate \$20 million in funding to help the University of Kansas School of Pharmacy increase the school's ability to conduct more pharmaceutical research and expand the size of the entering class at the school. Under this proposal, nearly 200 students would be able to enter the program through a satellite campus in Wichita in a new building being built on the main campus in Lawrence.

The University of Kansas has a strong reputation for retaining graduates within our State. Sixty-three percent of KU pharmacy graduates live and work in Kansas. Increasing the educational capacity will give students an opportunity to learn, and will help address pharmaceutical shortages in our State.

I would like to commend the leadership of the university, especially the dean of the School of Pharmacy, Ken Andus; Executive Vice Chancellor Barbara Atkinson; Provost Richard Lavalare; and Chancellor Robert Hemenway. I would also like to thank the legislature of our State for seeing the importance of this expansion.

Madam Speaker, I appreciate the opportunity to commend the investment in this worthwhile project, and I ask that Congress continue to do its part to see that pharmacies remain an important component of delivering health care across America.

□ 1830

The SPEAKER pro tempore. Under a previous order of the House, the gentlewoman from Ohio (Ms. KAPTUR) is recognized for 5 minutes.

(Ms. KAPTUR addressed the House. Her remarks will appear hereafter in the Extensions of Remarks.)

RECOGNIZING THE CONTRIBUTIONS OF THE JOHNS HOPKINS UNIVERSITY TO THE STATE OF MARYLAND

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from Maryland (Mr. CUMMINGS) is recognized for 5 minutes.

Mr. CUMMINGS. Madam Speaker, I rise today to recognize Johns Hopkins University located in the Seventh Congressional District in the great State of Maryland for its continued commitment to excellence and its monumental contributions to the advancement of our society and to the health and wellbeing of people throughout the world.

Johns Hopkins is a stalwart not only in my hometown of Baltimore City but the entire State of Maryland and this Nation. The university currently supports more than 85,000 Maryland jobs. More than 3 percent of the people receiving paychecks in Maryland either work for Johns Hopkins or have a job because of the money.

Additionally, the institution adds at least \$7 billion a year of income to the Maryland economy. However, the University's groundbreaking research and contributions that can be felt throughout the entire world. The advancements that have been made in research and technology since the University's establishment in 1876 have been critical in keeping our Nation on the cutting edge.

The Johns Hopkins School of Medicine is one of the best in the world, receiving more research grants from the National Institutes of Health than any other medical school. The Bloomberg School of Public Health, renowned for contributions worldwide to preventative medicine and the health of large populations, ranks first among public health schools in Federal research support.

Madam Speaker, the medical breakthroughs made possible through Johns Hopkins research are saving lives every single day, and the University continues to make great strides in helping men, women, and children who suffer from illness. Just the other day in the Baltimore Sun, for instance, there was an article reporting new, unprecedented success by Johns Hopkins researchers in the treatment of multiple sclerosis.

MS is a chronic and often disabling, degenerative condition in which the body's immune system attacks the central nervous system. Symptoms of this disease range from numbness in the limbs to paralysis or blindness, and the

programs and severity of this disease is unpredictable.

According to the National Multiple Sclerosis Society, approximately 40,000 Americans are currently suffering from MS and an additional 200 people are being diagnosed each week. Although there are apparently a variety of treatments approved by the Food and Drug Administration that can lessen the frequency and severity of MS attacks, there is not yet a cure for this debilitating disease.

However, this new research from Johns Hopkins offers a giant leap forward in the search for a cure. In a small college study, nine people were chosen to receive a single infusion of cyclophosphamide over 4 days and were followed for 4 years. Madam Speaker, these nine patients have experienced the most severe symptoms of MS, and most of them had failed to respond to other treatments.

At the completion of the 2-year period, researchers found that the treatment not only slowed the progression of MS, but it also restored neurological function that had previously been lost to the disease. Seven of the nine patients showed a decrease in the number of brain lesions in MRIs, and some even began walking, controlling bladder function, and returning to work for the first time in many years.

One of the patients in the treatment program, 30-year-old Richard Bauer, summed up succinctly what this research has the potential to offer those who are suffering from MS. And he said, "I was falling apart . . . trapped in my own body," and he continued, "I'm a regular person again. I've gotten my life back."

Madam Speaker, there are countless other patients who have benefited tremendously from Johns Hopkins research and who credit this great university for giving them back their lives. I am proud to applaud the work of this great institution and to recognize its contributions to the State of Maryland, to our Nation, and indeed the world.

DO NOT BELIEVE THE U.S. FEAR FACTOR PROPAGANDA AS IT RELATES TO OUR FOREIGN POLICY

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from Texas (Mr. PAUL) is recognized for 5 minutes.

(Mr. PAUL asked and was given permission to revise and extend his remarks.)

Mr. PAUL. Madam Speaker, today we saw some financial fireworks on the markets. The Dow Jones average was down 350-some points, gold was up \$32, oil was up another \$5, and there's a lot of chaos out there; and everyone is worried about \$4-a-gallon gasoline. I don't think there is a clear understanding exactly why that has occurred.

We do know that there is a supply and demand, there's a lot of demand for