

shipped to Europe and alleviate their reliance on Russian energy supplies.

Expanding LNG exports to include WTO countries offers the U.S. a chance to bolster our domestic economy and revitalize the U.S. manufacturing sector. In 2012, the increase in unconventional energy production resulted in over 2 million jobs and reduced our trade deficit by more than \$164 billion over the last five years.

Increasing LNG exports stamped "Made in the USA" brings many benefits both at home and abroad. By passing H.R. 6, we are taking an important step that strengthens our long-term strategic interests in Asia, and also boosts our own domestic economy. I urge my colleagues to support the legislation.

OUR UNCONSCIONABLE NATIONAL  
DEBT

**HON. MIKE COFFMAN**

OF COLORADO

IN THE HOUSE OF REPRESENTATIVES

*Wednesday, June 25, 2014*

Mr. COFFMAN. Mr. Speaker, on January 20, 2009, the day President Obama took office, the national debt was \$10,626,877,048,913.08.

Today, it is \$17,535,731,914,061.53. We've added \$6,908,854,865,148.45 to our debt in 5 years. This is over \$6.9 trillion in debt our nation, our economy, and our children could have avoided with a balanced budget amendment.

HONORING DEBBIE A. JOHNS

**HON. JASON T. SMITH**

OF MISSOURI

IN THE HOUSE OF REPRESENTATIVES

*Wednesday, June 25, 2014*

Mr. SMITH of Missouri. Mr. Speaker, I rise today to honor Debbie A. Johns who has been a valuable asset to the Office of the Crystal City Clerk for over 38 years. Debbie has shown her dedication to the Office of the Clerk by continuing to obtain certifications in Computer Management, Grant Applicant Processing, Grant Administration, Department of Transportation Management Training, NID Certification in Emergency Management Training-Corps of Engineers and the Municipal City Clerk Certification (MOCCFOA.)

Debbie has shown outstanding dedication to the Office of the Clerk throughout her 38-year career while progressing through many positions therein; Water Clerk, Administrative Assistant, City Collector, Budget Officer, Finance Officer and City Clerk. Throughout her distinguished career Debbie has shown excellence in her handling of many responsibilities: Managing city investments, monitoring all leave taken and accrued by city employees, managing and organizing drug screening and testing of city employees, emergency management policy, grant coordination, and as the first line of contact for concerns by citizens and public interests of Crystal City.

It is with the utmost respect and deepest gratitude that I recognize and thank Debbie A. Johns for her 38 years of service to the Office of the Crystal City Clerk. I wish her health and

happiness in her retirement beginning July 1, 2014. I am grateful that we have such caring members of the Crystal City community; it is my pleasure to recognize her achievements before the House of Representatives.

NEWBORN SCREENING SAVES  
LIVES REAUTHORIZATION ACT  
OF 2014

SPEECH OF

**HON. MICHAEL K. SIMPSON**

OF IDAHO

IN THE HOUSE OF REPRESENTATIVES

*Tuesday, June 24, 2014*

Mr. SIMPSON. Mr. Speaker, I am proud to join with my friend and colleague from California, Congresswoman ROYBAL-ALLARD, to thank the House of Representatives and leaders on both sides of the aisle for their support of H.R. 1281, the Newborn Screening Saves Lives Reauthorization Act, which passed the House last night.

In 2008, Congresswoman ROYAL-ALLARD and I introduced the original Newborn Screening Saves Lives Act, which encouraged states to uniformly test for a recommended set of disorders and provided resources for states to expand and improve their screening programs.

Before this legislation, state screening tests varied greatly, and only 10 states and DC required infants to be screened for all the "core conditions" recommended by the Advisory Committee on Heritable Disorders in Newborns and Children.

Today, most states require screening for at least 29 of the 31 treatable core conditions.

This bipartisan reauthorization builds upon the foundation of the original bill and ensures infants continue to receive comprehensive screenings—which consists of a simple prick on the heel of newborns before they leave the hospital.

That blood sample tests for serious genetic, metabolic, or hearing disorders that may not be apparent at birth. Without this test, parents may have no way of knowing their child needs treatment.

Mr. Speaker, the importance of newborn screening is undeniable.

About one in every 300 newborns in the United States has a condition that can be detected through screening. Left untreated, these conditions can lead to serious illness, lifetime disabilities, or even death. These newborns appear healthy, but their conditions can deteriorate quickly and with no warning.

In addition, newborn screening is a powerful tool for savings in our overburdened health care system. As a former dentist, I have seen the value of diagnosing and treating a condition early in a child's life.

One example of the merit of newborn screening comes from a 2012 study on severe combined immunodeficiency, known as SCID. SCID is one of the 31 conditions recommended for state screening.

The Medicaid cost of treating a baby with SCID in the first two years can be \$2 million or more. Yet an infant diagnosed early can be cured through a bone marrow transplant in the first three months of life, costing \$100,000. Without the early intervention, families suffer enormous economic and emotional burdens.

Mr. Speaker, I want to thank all those who have worked so hard to make this legislation

a reality, particularly Congresswoman ROYBAL-ALLARD, who has led the way in making this a reality, and the public health organizations who worked day and night to help move this bill through the process. I look forward to my Senate colleagues passing this important legislation and sending it to the President's desk.

AUTISM COLLABORATION, ACCOUNTABILITY, RESEARCH, EDUCATION, AND SUPPORT ACT OF 2014

SPEECH OF

**HON. PHIL GINGREY**

OF GEORGIA

IN THE HOUSE OF REPRESENTATIVES

*Tuesday, June 24, 2014*

Mr. GINGREY of Georgia. Mr. Speaker, I rise in strong support of H.R. 4631—the Autism CARES Act of 2014. As a member of the Energy and Commerce Committee, I would like to commend the author of this legislation, CHRIS SMITH of New Jersey, for his leadership on this issue. I would also like to commend Full Committee Chairman FRED UPTON of Michigan and Health Subcommittee Chairman JOE PITTS from Pennsylvania for moving this important, bipartisan, bill through regular order.

Mr. Speaker, throughout the consideration of H.R. 4631, I have been pleased to collaborate with Atlanta's Marcus Autism Center. Those of us from Georgia and leaders in the Congressional Autism Caucus are very familiar with the innovative treatment offered to children with autism at the Marcus Autism Center and the cutting-edge research its scientists are conducting there. I am proud to say the Marcus Autism Center—which is part of the Children's Healthcare of Atlanta system—is one of three National Institutes of Health Autism Centers of Excellence.

Furthermore, I have enjoyed working with the Center's leadership, particularly Executive Director Don Mueller, to make sure that H.R. 4631—once implemented—will facilitate new breakthroughs in early diagnosis and intervention for children with autism. I have been impressed by the recent study authored by Marcus Autism Center researchers, Dr. Ami Klin and Dr. Warren Jones, which was published in *Nature*, a leading international scientific journal. This study showed that they detected signs of autism in the first two to six months of life using eye-tracking technology. This study opens a window for even earlier diagnosis and intervention in the future. By diagnosing and intervening earlier, we can reduce the most challenging disabilities related to autism and maximize the potential of children with autism.

Mr. Speaker, today, the average age for diagnosing children with autism in the United States is around five years old. I have been informed by Marcus Autism Center officials that this study is the first step towards transformational future change and that if the medical profession can identify signs of autism in toddlers and then infants, we can capitalize on this window of opportunity to change the very course of autism.

Therefore, as this reauthorization is being implemented, agencies must recognize the priority we place on facilitating improvements in early diagnosis and intervention of autism. I