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WASHINGTON, D.C. - Significant health-related measures championed by Rep. Anna G. Eshoo, D-California, are on the way to becoming law after winning final Congressional approval early Saturday in the frenzied last hours of the 109th Congress.

"Out of the thousands of bills introduced, all but a few die every two years when Congress adjourns," Rep. Eshoo said. "It's gratifying on the last day of the session to have Democrats and Republicans in the House and Senate unite behind legislation that benefits my constituents and our country."

Rep. Eshoo introduced or made significant contributions to the following bills.

• BARDA: Congress approved legislation to establish the Biomedical Advanced Research and Development Authority (BARDA).

BARDA was the centerpiece of legislation (H.R. 5533) introduced by Reps. Eshoo and Mike Rogers, R-Michigan, which the House passed unanimously on September 26. The Senate included BARDA in S. 3678, the Pandemic and All-Hazards Preparedness Act, which both houses of Congress approved on Friday. [Update: The bill was signed into law on December 19, 2006.]

BARDA will be the primary federal office devoted to shepherding the development of vaccines and other medical countermeasures critical to protecting our nation against bioterrorism, such as weaponized small pox, and pandemic health threats, such as Asian bird flu.

"This bill addresses an urgent issue which is critical to our nation's security and public health," Rep. Eshoo said. "With BARDA, the federal government will be able to encourage the work of drug and vaccine developers to produce innovative medical countermeasures that will save lives."

The lack of commercial demand for such drugs has created a funding gap known as the "Valley of Death," discouraging companies from developing them. As part of the U.S. Department of Health and Human Services (HHS), BARDA will bridge the gap by making interim payments at key development milestones, which will give companies incentives to pursue medicines showing promise in early research.

• **PREEMIE Act:** Congress approved S. 707, the Prematurity Research Expansion and Education for Mothers who deliver Infants Early (PREEMIE) Act, to stimulate research on reducing premature births. The legislation is identical to H.R. 2861, which Reps. Eshoo and Fred Upton, R-Michigan, introduced in the House in June 2005.

Since 1981, the CDC estimates that the number of infants born too soon has increased by over 30 percent. More than 500,000 infants are born prematurely each year. Premature infants are 14 times more likely to die in their first year of life, and premature babies who survive may suffer lifelong consequences including cerebral palsy, mental retardation, chronic lung disease, and vision and hearing loss.

"This legislation will help identify the causes of prematurity, and reduce the episodes of preterm labor and delivery," Rep. Eshoo said. "But the overarching goal of this legislation is to bring hope to the 1,305 babies born too soon each day, and extend hope to their families."

The PREEMIE Act requires HHS and the Centers for Disease Control (CDC) to expand and coordinate their research activities on preterm labor and delivery and infant mortality, and to conduct research on the relationship between prematurity, birth defects, and developmental disabilities.

To increase awareness of preterm birth as a serious and costly public health problem, the bill also requires the Surgeon General to conduct a conference on prematurity and to make recommendations on how the public and private sectors can identify the causes of and risk factors for preterm labor and delivery and improve treatments. [Update: The bill was signed into law on December 12, 2006.]

• **The Ryan White HIV/AIDS Treatment Modernization Act:** The legislation, H.R. 6143, reauthorizes the law establishing federal funding levels for our nation's HIV/AIDS programs for three years. Rep. Eshoo fought in the House Energy and Commerce Committee and on the House floor to sustain critical infrastructures of care already established in the Bay Area and other longstanding epicenters of the disease. [Update: The bill was signed into law on December 19.]

• **The National Institutes of Health Reform Act:** The legislation, H.R. 6164, reauthorizes the National Institutes of Health (NIH), our national medical research center, for the first time in 13 years. Rep. Eshoo was a vocal advocate for sustained funding increases for NIH and managed passage of the bill on the House floor. The bill authorizes a five percent annual increase in research funding and establishes a "Common Fund" to stimulate trans-NIH research in areas of emerging scientific opportunities, rising public health challenges or knowledge gaps that deserve special attention. [Update: the bill was signed into law on January 15, 2007.]

• **Medicare Physician Reimbursement:** As part of H.R. 6111, the Tax Relief and Health Care Act, Congress repealed the 5.1 percent physician reimbursement cuts scheduled to take effect on January 1, 2007. Rep. Eshoo supported the one-year, stop-gap measure but wants to find a permanent solution to the flawed formula in the 110th Congress. [Update: The bill was signed into law on December 20, 2006.]

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