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CHAIRMAN FRANK PALLONE, JR. | 116TH CONGRESS

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Pallone Opening Remarks at Health Subcommittee Markup of Tobacco, Maternal Health and Citizen Petition Legislation

Washington, D.C. – *Energy and Commerce Chairman Frank Pallone, Jr. (D-NJ) delivered the following opening remarks at a Health Subcommittee markup of tobacco, maternal health and citizen petition legislation:*

Today, the Health Subcommittee will address the leading cause of preventable death worldwide, tobacco, as well as the public health crises of maternal mortality and morbidity. The Subcommittee will also continue its work to reduce drug prices by tackling the abuse of citizen petitions at the Food and Drug Administration. All four of the bills we are marking up have bipartisan support.

First, we will consider my bill, H.R. 2339, the Reversing the Youth Tobacco Epidemic Act. Every year, cigarette smoking causes 480,000 deaths in the United States, and an additional 41,000 people die due to exposure to secondhand smoke.

And while the United States had made progress in cutting down on youth tobacco use after passage of the Tobacco Control Act in 2009, in recent years, we have seen a dramatic uptick among young people due to the rapidly growing popularity of e-cigarettes. These products often carry flavors like mint, menthol, mango, and cotton candy to attract children and teens, and then hook them with extremely high doses of nicotine.

As a result, youth tobacco use has reached epidemic proportions. In the last three years alone, e-cigarette use among high school students has more than doubled to 27 percent this year. If smoking continues at its current rate, the Centers for Disease Control and Prevention estimates that 5.6 million American youth under the age of 18 today will die prematurely due to tobacco-related illness. We simply cannot allow this to happen. Congress must act now to avoid losing another generation to tobacco-related illnesses and premature death.

H.R. 2339 adopts a comprehensive approach to ending this epidemic. The bill raises the minimum age to purchase tobacco to 21. It prohibits flavors in tobacco products, including mint and menthol, two of the most popular flavors among youth. It bans all non-face-to-face sales of tobacco products; and protects kids from predatory marketing. Collectively, these actions will prevent millions of deaths and bring us closer to ending the public health scourge of tobacco once and for all.

The Subcommittee will also move two bills to address the maternal mortality and morbidity. CDC estimates that about 700 women in the United States die each year from pregnancy-related complications, and thousands more face severe maternal morbidity. When you compare these statistics to other countries around the world, the United States ranks near the bottom. And, the United States is the only country in the world with a rising maternal death rate. This is shocking and inexcusable.

I am hopeful though, that through our bipartisan work we can begin to counter these disturbing trends. The Maternal Health Quality Improvement Act, introduced by Representatives Engel and Bucshon, will authorize and improve a number of public health programs to address this crisis head-on. It incorporates provisions of Representative Torres Small's Rural MOMS Act to address health outcomes and access to care in rural areas. And it incorporates legislation from Representative Adams to educate health professionals on how to prevent discrimination in care, including how to recognize and address implicit and explicit biases. These provisions are critical since African American and Native American women are three times more likely to die from pregnancy-related conditions than others.

We will also consider H.R. 4996, the Helping Medicaid Offer Maternal Services Act, or the Helping MOMS Act. This bipartisan legislation, led by Representative Kelly and Ranking Member Burgess, would allow states the option of extending Medicaid coverage to 12 months postpartum. This would benefit a lot of families since Medicaid and CHIP pay for nearly 50 percent of all births. Babies born to mothers receiving Medicaid or CHIP are automatically eligible for coverage for the first year of their lives, but many women's eligibility ends 60 days after giving birth. This disrupts care and creates gaps in coverage during the critical first year postpartum.

This bipartisan bill would help ensure that women are able to have uninterrupted coverage and access to care in the first 12 months postpartum, which is proven to improve health outcomes.

We are also considering the STOP GAMES Act of 2019, bipartisan legislation, introduced by Representatives Levin and Rooney, that will help address the abuse of citizen petitions that delay or impede generic drugs from coming to the market. This legislation enhances FDA's authority to swiftly dismiss anticompetitive petitions. This policy has bipartisan support in the Senate and from the Administration. It is another step in this Committee's work to remove barriers that prevent cheaper generic drugs from coming to the market.

Madam Chair, these are important bills that will help us improve health outcomes and access to care, and I hope they will all garner strong, bipartisan support.

I yield back.

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