

arthritis, Parkinson's, and Alzheimer's disease, cancer, heart disease, and stroke.

With so many of these diseases that are debilitating or life-threatening, we are so close, so close to the finish line in finding a cure and being able to provide for a treatment or a cure. We now talk of finding cures for so many diseases in 5 years in our lifetime.

NIH-funded research enter many of these diseases, and that is the foundation underlying the search for answers. Without the essential role that the NIH is playing in our health care equation, we as a Nation will fail to achieve the goal of a healthier, more productive Nation.

The American people want increased funding for medical research. Many polls have shown that the majority of Americans support Federal investment in medical research. With this research, we have learned that disease is a complex and evolving enemy.

Despite the extraordinary progress that has been made in the fight against many diseases, serious challenges still exist. I want to mention several examples of a new preventive strategy against disease which is changing the lives of millions of Americans.

This month, NIH announced a new clinical trial of 10 research centers which will soon begin testing a promising technique for transplanting insulin-producing pancreas cells that may one day allow people with type-one diabetes to stop their insulin shots.

This year a team of researchers funded by the National Institute of Child Health and Human Development has found that infants who die of Sudden Infant Death Syndrome suffer from abnormalities in certain regions of the brain stem. This brings us closer to finding a preventive treatment for SIDS.

In a ground-breaking, NIH-funded study published in the July issue of the proceedings of the National Academy of Sciences, researchers rapidly restored lost vision in a mouse model of Leber's. Leber's is a group of severe, early-onset, retinal degenerative diseases causing rapid vision loss at birth or during very early childhood.

This finding represents the first time researchers have restored vision in an animal model of retinal degeneration. The researchers are now moving toward doing human clinical trials.

Mr. Speaker, scientific advances resulting from NIH-supported research mean improved health and reduced suffering, job creation, biomedical research, and biotechnology, and far-reaching economic benefits touching every State through major universities, government laboratories, and research institutes.

In global competition, biomedical research and biotechnology are areas of strong American leadership and commitment. Continued support for the

National Institutes of Health will ensure that American scientific excellence continues as we move through this century. We can afford to do no less for this generation and for generations to come.

I urge my colleagues to continue with our objective of doubling the budget for the National Institutes of Health.

#### LEAVE OF ABSENCE

By unanimous consent, leave of absence was granted to:

Mr. GILMAN (at the request of Mr. ARMEY) for July 24 and the balance of the week on account of medical reasons.

Mr. WOLF (at the request of Mr. ARMEY) for today until 1:00 p.m. on account of attending a funeral.

#### SPECIAL ORDERS GRANTED

By unanimous consent, permission to address the House, following the legislative program and any special orders heretofore entered, was granted to:

(The following Members (at the request of Mr. KIND) to revise and extend their remarks and include extraneous material:)

Mr. PALLONE, for 5 minutes, today.

Mr. CUMMINGS, for 5 minutes, today.

Mr. STRICKLAND, for 5 minutes, today.

Mr. KIND, for 5 minutes, today.

(The following Members (at the request of Mr. GOSS) to revise and extend their remarks and include extraneous material:)

Mr. DEMINT, for 5 minutes, today.

Mr. GOSS, for 5 minutes, today.

Mr. JONES of North Carolina, for 5 minutes, today.

Mrs. WILSON, for 5 minutes, today.

#### REPRINTED WITH CORRECTED TEXT AND TITLE, AS PASSED BY THE HOUSE ON JULY 19, 2000.

H.R. 2634

*Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,*

##### SECTION 1. SHORT TITLE.

This Act may be cited as the "Drug Addiction Treatment Act of 2000".

##### SEC. 2. AMENDMENT TO CONTROLLED SUBSTANCES ACT.

(a) IN GENERAL.—Section 303(g) of the Controlled Substances Act (21 U.S.C. 823(g)) is amended—

(1) in paragraph (2), by striking "(A) security" and inserting "(i) security", and by striking "(B) the maintenance" and inserting "(ii) the maintenance";

(2) by redesignating paragraphs (1) through (3) as subparagraphs (A) through (C), respectively;

(3) by inserting "(1)" after "(g)";

(4) by striking "Practitioners who dispense" and inserting "Except as provided in paragraph (2), practitioners who dispense"; and

(5) by adding at the end the following paragraph:

"(2)(A) Subject to subparagraphs (D) and (J), the requirements of paragraph (1) are waived in the case of the dispensing (including the prescribing), by a practitioner, of narcotic drugs in schedule III, IV, or V or combinations of such drugs if the practitioner meets the conditions specified in subparagraph (B) and the narcotic drugs or combinations of such drugs meet the conditions specified in subparagraph (C).

"(B) For purposes of subparagraph (A), the conditions specified in this subparagraph with respect to a practitioner are that, before the initial dispensing of narcotic drugs in schedule III, IV, or V or combinations of such drugs to patients for maintenance or detoxification treatment, the practitioner submit to the Secretary a notification of the intent of the practitioner to begin dispensing the drugs or combinations for such purpose, and that the notification contain the following certifications by the practitioner:

"(i) The practitioner is a qualifying physician (as defined in subparagraph (G)).

"(ii) With respect to patients to whom the practitioner will provide such drugs or combinations of drugs, the practitioner has the capacity to refer the patients for appropriate counseling and other appropriate ancillary services.

"(iii) In any case in which the practitioner is not in a group practice, the total number of such patients of the practitioner at any one time will not exceed the applicable number. For purposes of this clause, the applicable number is 30, except that the Secretary may by regulation change such total number.

"(iv) In any case in which the practitioner is in a group practice, the total number of such patients of the group practice at any one time will not exceed the applicable number. For purposes of this clause, the applicable number is 30, except that the Secretary may by regulation change such total number, and the Secretary for such purposes may by regulation establish different categories on the basis of the number of practitioners in a group practice and establish for the various categories different numerical limitations on the number of such patients that the group practice may have.

"(C) For purposes of subparagraph (A), the conditions specified in this subparagraph with respect to narcotic drugs in schedule III, IV, or V or combinations of such drugs are as follows:

"(i) The drugs or combinations of drugs have, under the Federal Food, Drug, and Cosmetic Act or section 351 of the Public Health Service Act, been approved for use in maintenance or detoxification treatment.

"(ii) The drugs or combinations of drugs have not been the subject of an adverse determination. For purposes of this clause, an adverse determination is a determination published in the Federal Register and made by the Secretary, after consultation with the Attorney General, that the use of the drugs or combinations of drugs for maintenance or detoxification treatment requires additional standards respecting the qualifications of practitioners to provide such treatment, or requires standards respecting the quantities of the drugs that may be provided for unsupervised use.

"(D)(i) A waiver under subparagraph (A) with respect to a practitioner is not in effect unless (in addition to conditions under subparagraphs (B) and (C)) the following conditions are met: