

Pete Domenici, Republican of New Mexico, and Paul Wellstone, Democrat of Minnesota—is now pending that would require parity in all terms, including deductibles, co-insurance and duration of treatment.

Although Mr. Bush shared the stage in Albuquerque with Senator Domenici, a longtime supporter of full mental health parity, he did not endorse the senator's progressive and expansive bill, which would require parity for more than 200 mental health conditions listed in the chief diagnostic manual when they cause clinically significant impairment. In one comment, Mr. Bush seemed to be seeking "full mental health parity," but in another he talked only of putting "serious mental disease" on a par with other diseases. He also called it "critical" that the move toward parity not run up the cost of health care significantly.

The chief arguments shaping up in Congress involve the potential cost of upgraded mental health coverage and the appropriate range of mental illness to be covered. The Congressional Budget Office estimated last year that the Domenici-Wellstone bill would drive up premiums by about 1 percent, a cost that seems bearable given the importance of treating mental illness and removing the stigma attached to it. The health industry suspects that costs may rise faster and deplores any added cost to a system already under financial strain. But surely there are compromises that would install mental health parity as the norm but allow health plans to abandon parity if their psychiatric costs rose beyond a reasonable level. Mr. Bush needs to follow his rhetoric with some hard bargaining to get a bill passed by Congress this year.

Mr. WELLSTONE. Both editorials are strong. They thank the President and my partner in this effort, Senator DOMENICI, for their fine work. Both point out that we need to make sure we have full mental health parity. We need to end the discrimination and make sure our loved ones and other families are provided with the treatment they need. That is not happening today. This would be a huge civil rights bill that would end discrimination and get much more coverage to people.

I recommend to every colleague the three-part series in the New York Times, front page. I cannot even read it, it is so powerful and so painful with regard to what is happening to those put in homes for mental health coverage. Because of the coverage they are getting, there will be a criminal investigation. People have taken their lives by jumping out of windows because of no supervision. The staff is underpaid and poorly trained and does not know how to provide the pharmacological coverage.

People live in the homes which are supposed to be community-based care, and there is absolutely no treatment, no help. These are people who do not have money. They are not capable of being a political force. My God, they live under the most wretched conditions. This should not happen in the United States of America.

It is a powerful series. I have never seen a greater contribution than what the New York Times has done on the front-page series.

EDUCATION

Mr. WELLSTONE. My third topic is education. I spoke yesterday almost with a twinkle in my eye when I heard what this administration is proposing to do.

In Minnesota, in 1999, students took out \$483 million in loans; \$406 million in Federal loans. In 1987, it was \$188 million, \$483 million versus \$188 million.

Saying the students cannot consolidate loans and keep them at 4 percent and not worry about interest rates going up, average students—if this administration has its way—are going to be charged an additional \$3,000 more. It is unconscionable.

All Senators need to understand many of our students are not 19 or 20, living in a dorm. Even if they are, a significant number of them are working 30 hours a week. These are not people for whom the cost of higher education for their families is easy. A lot of them are students not living in the dorm—40, 45, and 50 years of age—going back to school. Some of our taconite workers are going back to school to try to find employment and support their families. These are hard-pressed people.

Now, this administration doesn't want to give them a break on interest rates on their loans? It is the most distorted of priorities. Give it all away in tax cuts. A vast majority of these tax cuts go to huge multinational corporations, wealthy citizens, the top 1 percent of the population. And to give them credit, many of them say: We do not need it.

Instead, we are told we don't have enough money to fund the Pell grant, so the way we will do it is to charge higher interest rates for students, many of whom are hard pressed. It is unconscionable, unacceptable.

I announce on the floor of the Senate, along with other Senators, including the Senator from Minnesota, the Presiding Chair, who cannot speak but I can speak for him, we are not going to let it happen. It is not going to happen. I say to the White House: It is not going to happen.

Tomorrow we will talk with teachers, including teachers from Minnesota. I will talk about the education budget. We had all of the symbolic politics "leave no child behind," with all the travel around the country, including in Minnesota and coming to the high school, Eden Prairie High School, all for education, all for the children—accept for when it comes to digging in the pocket and providing resources.

The State of Minnesota anxiously awaits the administration living up to the commitment to provide the full funding for special education. We had it done in the Senate. It was on a glide-path. The Presiding Chair and I would have liked to have seen it happen quicker. Over 5 years, it would be full funding, and over the next 5 years and the rest of the decade it would be mandatory, automatic full funding, \$2 bil-

lion more in resources for education for the State of Minnesota, half of which would be used for special education, and half to be used to cover other costs which we incur because we do not get the funding from the Federal Government. The House Republican leadership and the White House blocked it.

We are going to have a debate on this issue. There are a lot of different formulations. I say forego the tax cuts for the top 1 percent; forego giving multinational corporations breaks so they don't pay taxes. Then we will have \$130 billion, and over the next 10 years that is exactly what we need to provide full funding for special education.

I stake my political reputation on that tradeoff. I come from a State where we cut teachers, prekindergarten for children, and early childhood education programs. It breaks my heart to see that happen, where class sizes are going up. My daughter, Marsha, says her advanced Spanish class has 50 students.

Colleagues, education is a compelling issue in people's lives. If you want to talk about what is good for the country, good for the economy, and good for democracy, you are going to want to support education. We ought to be doing this. There will be a debate and every Senator will be held accountable. We need the full funding. That will be a fight. I know the Democrats will fight for it, and I hope many Republicans do as well.

Finally, "leave no child behind," is the mission statement of the Children's Defense Fund. It is probably too much for them to take because all we have is a tin cup budget from this administration. To me, education is pre-K through 65; it is not K through 12.

Talking about higher education, older students, talking about students going back to school, and then there is the prekindergarten, which for some reason always is put in parenthesis, that is probably the most important education of all.

I don't want to celebrate the administration's budget. I am in profound disagreement with the priorities of this administration on children and education. I celebrate the work of these childcare teachers, many of whom make \$7 an hour, with no health care benefits. It is preposterous. We say we love children, believe in children, but we devalue the work of the adults who help those children.

We are going to be meeting with Commissioner O'Keefe, probably with the Presiding Chair, as well, who has come from Minnesota. We are talking about TANF and welfare reform, and the administration has a new formula that 70 percent of the single parents, mainly women, will be working out of the home 40 hours a week, but they don't have additional money for childcare. There are a lot of other things that are wrong with this reform as well.

My point is, whether it be welfare mothers, whether it be families with

parents, whether it be single parents working, whether it be both parents working, whether it be low-income, moderate-income, or middle-income, this is a huge issue.

I ask unanimous consent that I have 3 more minutes to finish.

The PRESIDING OFFICER. Without objection, it is so ordered.

Mr. WELLSTONE. This is a huge issue for working families. Many of these families pay more for childcare than they do for higher education. In Minnesota, 30 percent of adult workers make under \$10 an hour.

Let's talk about another issue, affordable housing. To pay for the rent of a two-bedroom apartment, not amounting to that much, they will be lucky if they pay less than \$900 in Metropolitan Minnesota and it is pretty expensive in Greater Minnesota. If they have a 2- or 3-year-old, they will be very lucky if it is less than \$1,000 for childcare. If you have a single parent, that is two-thirds of their income gone. I have not even included health care or transportation or food. I have not even included, maybe once in a blue Moon, being able to take in a movie or maybe taking your children out to eat.

This administration talks about "leave no child behind." Now they want to expand the absolute requirement that these mothers are all going to work. They do not provide the money for childcare. Right now we have about 10 percent of low-income families who can take advantage of childcare and get any help because we do not have the funding. In Early Head Start, it is about 3 percent of these children who can take advantage of Early Head Start because we don't have the funding.

Then there are the middle-income people who look for some assistance, and this administration gives us nothing. And they want to talk about "leave no child behind." In all due respect, they want to talk about the importance of reading, all of which is fine, but where is the investment? Where is the investment in these children?

I finish in these words. I borrow in part from Jonathan Kozol but in part myself. This is my favorite way of putting it.

You help these children when they are little, not because when you help them when they are little they are more likely to graduate from high school—true; not because when you help them when they are little they are more likely to go to college—true; not because when you help them when they are little they are more likely to graduate and contribute to our economy and be good citizens—true. You help them when they are little because they are all under 4 feet tall and they are beautiful and we should be nice to them. That is why we should help children when they are little. That is a spiritual argument.

I don't see that in the budget from this administration. I intend, as a Sen-

ator, working with Democrats and as many Republicans as possible, to have amendments out here calling for a dramatic increase in investment in early childhood education, in K-12, in higher education. To me it starts with education.

I yield the floor.

The PRESIDING OFFICER. Under the previous agreement, the Senator from New Jersey is recognized for a period of up to 30 minutes.

TEACHING HOSPITALS

Mr. TORRICELLI. Mr. President, earlier this morning, Senators CORZINE, CLINTON, SCHUMER, and DURBIN were all here to join with me in making a common case. I hope they will be joining me during the course of the day, if they are able to return. If not, I would like to deliver what I believe is a common concern.

This morning Senators heard from my colleagues about the pressing problems of financing education in America in a difficult budget environment. I share in that concern.

I rise with a matter of equal importance for each of our States and all of our communities; that is, the rising pressure on medical care in America as a result of our difficult budget circumstances.

In the next few months the Senate Finance Committee and then the Senate itself is going to be debating the question of how to fund different components of American health care in this difficult budgetary environment. That debate will affect doctors and their ability to maintain their practices and the integrity of their profession; home health care providers and their ability to provide service to those who are often locked in their own homes and need desperately to have care; nursing homes, in many cases not simply the quality of their care but whether hundreds of nursing homes around the country continue to operate at all; and teaching hospitals. It is teaching hospitals this morning that I want to address in detail because in some ways their plight is the most perilous and the issue most immediate.

Since 1983, this Congress has recognized the unique role of teaching hospitals in the delivery of American health care. They have a particular contribution to make, providing technology dealing with difficult cases and providing the doctors themselves for each of our States and all of our hospitals. In recognition of these unique costs, the Congress created the Medicare indirect medical education funding, IME. For more than these 20 years, there was an adjustment for the 1,100 teaching hospitals around the country; that is, they were given a 6.5-percent additional payment for Medicare to fund their unique contributions, recognizing that all hospitals and all communities benefited by these few flagship hospitals in the Nation, these 1,100 institutions that made unique con-

tributions. This 6.5-percent payment was maintained in good years and bad years, years of deficits and surpluses, because we recognized that without them the medical system in the country simply could not be maintained at its current quality. That is until now.

On October 1 the 6.5-percent payment for 1,100 teaching hospitals will be reduced to a 5.5-percent additional payment. It is important that Members of the Senate understand the consequences. The first is to medical technology. All hospitals in America are important, but all do not make an equal contribution. The 1,100 teaching hospitals in America are the source of almost every major medical breakthrough in the country: drug-coated stents which prop open clogged arteries and prevent scar tissue from closing up the artery again—teaching hospitals; implanted cardio defibrillators, such as the one used by Vice President CHENEY, to keep heart rhythm regular—teaching hospitals; EKGs or heart-lung machines, open heart surgery, and angioplasties—teaching hospitals.

Indeed, if you were to go through every major medical advance of our generation, they would come back to the best minds and the best facilities and the best medical departments—in teaching hospitals. That is what is in jeopardy.

Certainly, as it is the leadership of technology in the medical profession, so, too, it is with the most important delivery of services. The chart on my left shows the difference in the burden being carried by these relatively few hospitals. Crisis prevention services are delivered by 11 percent of other hospitals; teaching hospitals, 52 percent. Teaching hospitals, 91 percent of them deal with AIDS service deliveries, 24 percent of other hospitals; geriatric services, 75 percent of teaching hospitals are in geriatric cases, 35 percent of other hospitals; substance abuse, 47 percent compared to 14; nutrition programs, 84 percent of teaching hospitals deal with nutrition programs, 58 percent of other hospitals.

This extraordinary concentration of the development of technology, and dealing with the most difficult and most pressing of the Nation's medical problems, is the basis—the reason why we have additionally provided 6.5 percent. This addition to Medicare is something on which we have never before compromised in recognition of the higher costs and societal contributions.

I recognize in the Senate there is a belief that these teaching hospitals are simply a matter for northern New Jersey or Manhattan, Boston, Chicago, Los Angeles, or Miami—a few urban centers servicing a small part of the population. That could not be further from the truth.

Last year, teaching hospitals around the Nation admitted 15 million people and provided care to 41 million Americans in emergency rooms. These teaching hospitals may have elite talent and give important care with advanced