

We need to make sure families and veterans have the support that they need so that when they come home they can receive the help they need. I am very proud of the fact we have about 50 organizations supporting the Excellence in Mental Health Act, such as sheriffs and police officers. Most likely, if somebody needs help, they are placed in a jail or in the emergency room. They don't go to a mental health facility.

What we are proposing is something that would provide 24-hour emergency psychiatric delivery, coupled with high quality community mental health services. The time is now to do this.

We have seen the need increase as states over the years have cut funding for in-patient mental health services and have not replaced them with services in the community.

Too often, people who need mental health treatment end up not getting the treatment they need, and end up in the emergency room or, worse, in jail. The ER and jail are not the place to treat mental illness.

It is fair to say that our need now is greater than ever.

Too many people who need treatment don't get it, including one-third of all people living with mood disorders and more than half of those with severe mental disorders.

Tragically, 22 American veterans commit suicide every day. At least 25 percent of returning veterans from Iraq and Afghanistan are in need of some form of mental health treatment.

We know that people suffering from mental illness are more likely to be the victims of violence than the perpetrators.

However, we have seen too many examples of what happens when people don't get the treatment they need around the country and right here in Washington, DC, where we've seen two tragic examples in the past 2 months, including the shootings at the Navy Yard and the woman who tried to drive her car into the White House and the Capitol.

What can we do to improve the way we treat mental health issues in this country? How can we improve people's lives?

We need to take the final step in mental health parity by strengthening access to quality mental health services in communities across America. That is why we need to pass the Excellence in Mental Health Act that the Senator from Missouri and I have sponsored together.

This bill would expand access to community mental health care by making sure more providers are available to treat mental health issues and can offer a broad range of mental health services, such as the 24-hour crisis psychiatric services, integrated preventive screenings, integrated treatment for mental illness and substance abuse, and expanded peer support and counseling services for patients and families.

This bill can help fulfill the legacy of President Kennedy's Community Mental Health Act and the Mental Health Parity and Addiction Equity Act.

There will be health care legislation coming to the floor before the end of this year to address physician payments, and that would be a natural place to address the Excellence in Mental Health Act.

I hope our colleagues will join us in supporting critical efforts to address mental health care in this country, and I hope they will join us in moving this proposal forward so we can get closer to this goal.

I wish to turn to my colleague, the distinguished Senator from Missouri for closing remarks. He has been a true champion for mental health and a wonderful partner to me and for his views on how we can work together to improve mental health treatment in America.

MR. BLUNT. I would just say that both our States have led in this area. Missouri has clearly been a pioneer in mental health efforts. Our community health centers—many of them—have added behavioral health in the last few years. There are other pieces of legislation out there that add to this mental health first aid, where people, particularly dealing with young people, can take a course. And they do not become people who can deal with your problem, but they may help you recognize if you have a problem and that somebody needs to deal with this.

In 2011, Missouri pioneered a program for Medicaid beneficiaries with severe mental illness that is based in community mental health centers and provides care coordination and disease management to address the "whole person," including both mental illness and chronic medical conditions. This combination saves money.

I have worked closely with the Missouri Coalition of Community Health Centers, which just celebrated their 35th anniversary and they are very excited about how this legislation could benefit the population they are serving.

I also co-sponsored the Mental Health First Aid Act of 2013 to help people identify, understand and respond to the signs of mental illnesses and addiction disorders through a pilot program for mental health first aid training. In my State, we are already benefitting from this program and in August over 100 new mental health first aiders were certified during Missouri's first large-scale mental health first aid training.

In addition, I co-sponsored the Justice and Mental Health Collaboration Act to improve access to mental health services for people in the criminal justice system. This bill would give law enforcement officers the tools they need to identify and respond to mental health issues, while continuing to support mental health courts and crisis intervention teams.

These bills—all of which have garnered bipartisan support—are steps in the right direction.

I hope Senate Majority Leader HARRY REID will allow stand-alone votes on mental health legislation, and I hope President Obama will work with members from both parties to improve our Nation's policies before another mental health crisis results in senseless loss.

I agree with Senator STABENOW that the time is now. We are actually probably beyond the time we should have done this. But we would be ill-advised to go further down this road without looking at this system and figuring out how we can improve it. There are many bipartisan ideas in the Senate, and I believe the Excellence in Community Health Act is right at the top of that list. But we need to look at this, do it, and do it now. I look forward to seeing something happen on this between now and the end of the year.

MS. STABENOW. Madam President, I again thank my friend from Missouri for his commitment and for working with so many colleagues across the aisle on a bipartisan basis. I believe we will get this done and we will now, on this 50th anniversary of President Kennedy's signing the Community Mental Health Act, complete the circle in terms of mental health parity in our country.

THE PRESIDING OFFICER. The Senator from Vermont.

THE BUDGET

MR. SANDERS. First of all, I congratulate the Senator from Michigan and the Senator from Missouri for touching on what is obviously a very serious national issue; that is, how we deal with the crisis of mental health in this country. I thank both of them for the work they are doing.

I would like to say a few words as a member of the conference committee on the budget, which is hoping to avert another government shutdown and come up with a sensible long-term budget for our country.

The first point I would make is that when I return from Vermont and come here to Capitol Hill, I am always amazed at how different the world view is here as opposed to the real world—whether it is Vermont or when I travel to other States around the country. It almost seems as if we are living on two separate planets.

As a member of the Budget Committee, I understand, as do the American people, that a \$17 trillion national debt and a \$700 billion deficit is a serious issue that must be addressed. The American people know that, but what they also understand is that there is an even more important issue out there; that is, real unemployment today is close to 14 percent. Youth unemployment—an issue Pope Francis is beginning to talk about a great deal—in this country is approximately 20 percent. African-American youth unemployment is over 40 percent.

The American people are saying: Yes, deal with the deficit, but do not forget that we continue to have a major economic crisis with millions of Americans unemployed. And for many other Americans who are working, their wages are deplorably low. We have millions of folks working for \$8 or \$9 an hour who cannot take care of their families under those wages.

While the middle class is disappearing and the number of people living in poverty is at an alltime high, we also have another dynamic we don't talk about too much here for obvious reasons; that is, the wealthiest people are doing phenomenally well, corporate profits are at recordbreaking levels, and the gap between the very wealthy and everybody else is growing wider and wider. We are surrounded by lobbyists representing the wealthy and large corporations, and they don't really like that discussion, so we don't talk about that too much, but it remains absolutely true.

When I go home and talk to Vermonters or when I go around the country, people tell me—and the polls tell me—that the American people—regardless of political persuasion, by the way—are in significant agreement about a lot of issues. We don't see that reflected here, but the American people are in significant agreement. If we ask the American people, I suspect, in North Dakota, Vermont, Maryland, or anywhere else whether they think we should cut Social Security, Medicare, and Medicaid, they would overwhelmingly say no.

These are tough economic times. Poverty is going up among seniors. People are worried about health care costs, and these programs are vital to the survival of so many people. So do not cut Social Security, Medicare, and Medicaid. That is not what BERNIE SANDERS is saying; that is what the American people are saying. That is what Democrats are saying, that is what Republicans are saying, that is what Independents are saying, and that is what people who agree with the tea party are saying. There is not a whole lot of dispute outside of Washington, but inside Washington the picture becomes a little different. We have virtually all Republicans talking about cutting Social Security, Medicare, and Medicaid. We have the President talking about cutting Social Security, Medicare, and Medicaid. We have some Democrats talking about it. But that is not what the American people believe.

According to the latest poll I have seen on this issue—the National Journal/United Technologies poll—81 percent of the American people do not want to cut Medicare, 76 percent of the American people do not want to cut Social Security, and 60 percent of the American people do not want to cut Medicaid. So I have a very radical idea for my colleagues. What about occasionally—we don't have to overdo it—listening to the people who sent us here? What they are saying is they do

not want to cut these terribly important programs.

Second of all, what do the American people want? What they want is for us to invest in our infrastructure and create the millions of jobs we desperately need. According to a Gallup poll of March 3, 2013, 75 percent of the American people—that includes 56 percent of Republicans, 74 percent of Independents, and 93 percent of Democrats—support “a federal jobs creation law [that would spend government money for a program] designed to create more than 1 million new jobs.”

The American people are saying: Yes, the deficit is important, but what is more important is creating jobs, and rebuilding our crumbling infrastructure is one way to do it, but don't cut Social Security, Medicare, and Medicaid.

What else are the American people saying? Well, not too surprisingly, when we see so much income and wealth inequality in America, the American people believe that when 95 percent of all new income in the last few years has gone to the top 1 percent, given the fact that the wealthy are doing phenomenally well, maybe they should be asked to pay a little more in taxes, and maybe we should end all of the corporate loopholes that currently exist.

Again, that is not BERNIE SANDERS. According to a January 29, 2013, poll by Hart Research Associates, 66 percent of the American people believe the wealthiest 2 percent should pay more in taxes and 64 percent of the American people believe large corporations should pay more in taxes than they do today.

The American people are giving us a solution to the major crises facing the American people. They want to invest in our economy, they want to create jobs, they want to ask the wealthy and large corporations to pay more in taxes, and they do not want to cut Social Security, Medicare, and Medicaid. That is the real world, but then when we come back to Washington, what are people saying? Let's cut Social Security, Medicare, and Medicaid; let's not invest in our infrastructure and create jobs; and, in fact, let's give more tax breaks to the wealthy and large corporations. This is an “Alice in Wonderland” world. The American people are saying one thing and the lobbyists around here and many Members of Congress are saying something very different.

The deficit is an important issue, and we should be proud, by the way, that we have cut the deficit in half in the last few years. We have more to go, but we should take some credit for that. But when we talk about the deficit, it is very important for us to remember how we got to where we are today—a \$17 trillion national debt and a \$650 billion-or-so deficit.

I find it interesting that some of those people who were most active in causing the deficit are now standing up

saying: Oh, I am really worried about this deficit that I helped cause; therefore, we have to cut all these programs that working people and children and the elderly need. So let's take a brief look back into the recent past and find out how we got to where we are today and who voted for those programs.

As I hope most Americans know, in January 2001 when President Clinton left office and President Bush took over, this country had a \$236 billion surplus—a \$236 billion surplus. That is quite a large surplus. The Congressional Budget Office projected that the 10-year budget surplus would be \$5.6 trillion; that there would be a huge increase in our budget surplus. The projections were very strong. In fact, they projected that we could erase the national debt by 2011. Imagine that. That was where we were heading.

Well, President Bush took office and a number of things happened. We went to war in Afghanistan and Iraq. I voted for the war in Afghanistan; I strongly opposed the war in Iraq. But be that as it may, many of my friends, who are great deficit hawks, forgot to pay for those wars. Those wars are estimated to cost somewhere around \$6 trillion. So folks who are standing up today saying: Gee, we just can't afford nutrition programs for children, they didn't have a problem voting for two wars and not paying for them. They also did not have a problem voting for huge tax breaks that went to the wealthiest people in this country, and they also did not have a problem voting for a Medicare Part D prescription drug program—written by the insurance companies, by the way, by the pharmaceutical industry—which also added to the deficit.

The point I am making is that many of the folks who are standing here demanding cuts in Social Security, Medicare, and Medicaid voted for two wars, tax breaks for the rich, and an unfunded Medicare Part D program. Then on top of all that, we had the Wall Street crash, which resulted in less revenue coming in to the Federal Government. Add all that stuff up and you have a large deficit.

Let me conclude by simply saying at a time when we have massive wealth and income inequality in America, which is something we should focus on from both a moral perspective as well as an economic perspective; at a time when the middle class is disappearing and millions of people are working longer hours for lower wages, at a time when we have the highest rate of childhood poverty in the industrialized world, at a time when senior poverty is increasing, at a time when we have 20 percent youth unemployment in this country, in my humble opinion, we do not balance the budget on the backs of the most vulnerable people in this country—working people, the elderly, the children, the sick, and low-income people. That is not what we do.

What we should do is go to those people who are doing very well and say to

them: You know what. Welcome to the United States of America. You are part of our country, and you are part of our economy. This country has problems now. You, if you are a large corporation—one out of four large corporations paying nothing in Federal income taxes—you are going to have to start paying your taxes. You can't just stash your money in the Cayman Islands and in other tax havens. And if you are an extremely wealthy person doing well, you are going to have to contribute more in tax revenue.

The bottom line is that we need to create jobs in this country, we need to protect the most vulnerable people in this country, and we need to do it in a way which is morally right and which makes good economic sense.

With that, I yield the floor.

The PRESIDING OFFICER. The Senator from Maryland.

COST OF GOVERNMENT SHUTDOWN

Mr. CARDIN. Madam President, this afternoon I joined with Senator WARNER and Senator KLOBUCHAR and Senator CASEY to point out just how much harm is caused to this country because we are governing from one manufactured crisis to another. The cost of the government shutdown, the cost of coming so close to defaulting on our obligations, the fact that we are governing through automatic across-the-board cuts known as sequestration, is hurting our economy.

This has been particularly difficult for the people in the State of Maryland, the State I represent. In our region we have so many Federal workers, so many Federal facilities—10 percent of our workforce works for the Federal Government—that we saw many small businesses in our communities that depend upon the Federal workforce literally having nobody in their restaurants and in their shops. Consumer confidence was at an alltime low.

There have been estimates as to the amount of harm caused by the government shutdown. Standard & Poor's said \$24 billion was taken out of our economy as a result of the government shutdown. Add that to the extra cost because we came so close to defaulting on the debt. Add that to the fact that since 2011 we have been living under sequestration. The estimate is we have lost about 900,000 jobs from this self-inflicted crisis management.

I could give many examples, but I will give a few.

I am very proud that the National Institutes of Health is based in the State of Maryland. Their impact is all over this country, including in the State of Massachusetts. As a result of sequestration and then the government shutdown, hundreds of grants could not be awarded. I think it was 700 by sequestration alone.

What does that mean? That means young researchers don't get a grant. They may stay with research, they may go to a different field, they may

go to a different country. It means that maybe the cure for Alzheimer's will be put back a little bit or the influenza vaccine will be put back a little bit. Literally, lives are at risk. But also, our economy is at risk because the research supports so many private sector jobs. I could give the same example at FDA, NIST, Beltsville Agricultural Research Center, or Fort Meade. We have many examples of how our country has been harmed. We cannot govern from one manufactured crisis to another.

My message is I hope we will get a budget agreement—I know the budget conferees met this week—which will give some predictability to our economy, eliminate sequestration, a progrowth budget so we can invest in education, research, and modern roads, bridges, and transit systems.

I am very optimistic about America's ability to globally compete if we stop these self-inflicted crises. I have been doing a "made in Maryland" tour throughout the State where I have visited many businesses. I give credit to my colleague in the House, Congressman HOYER, whose saying, "Make it in America" has really caught on. So I took my friend Congressman HOYER's suggestion, and I went around Maryland to meet with different companies. Maryland businesses are the best in the world. I know I am a little biased about Maryland, but they are the best in the world on innovation and creativity. I will give a few examples which may not be self-evident.

The Paul Reed Smith Guitar Factory is located on the eastern shore of Maryland in a small community called Stevensville. Over 200 people work there, and they produce the best guitars in the world and are sold all over the world. Santana's guitar was produced there. It is now in the Metropolitan Museum of Art, it is such an incredible instrument—not only in beauty, but in sound—and was made right here in Maryland, USA.

Another company I visited during my "Made in Maryland" tour was the Volvo Mack truck plant located in Hagerstown, MD, one of the largest employers in western Maryland, with good-paying jobs. They make the most efficient truck engine in the world and it is produced right in Maryland, in the United States of America, the most innovative and creative ways to deal with the problem of efficiency in trucks.

I visited Ernest Maier, which makes brick pavers with concrete. It is very close to the Nation's capital. We can do manufacturing in America and we can compete in manufacturing. They are developing the technology for pervious concrete. It is critically important to our environment.

I take great pride in the Chesapeake Bay and the work we are doing to clean up the Chesapeake Bay. One of the major sources of pollution comes every time we have a storm and all of the runoff goes into the tributaries that lead into the Chesapeake Bay, causing

a lot of pollutants to come into the bay, creating dead zones. If we have pervious concrete, allowing the water to seep rather than to flow, it cuts down dramatically the amount of pollution. The Ernest Maier Company is doing something about cleaning up our environment as well as selling a product that is well received around the country.

We have Marlin Steel located in Baltimore. It is a small specialty steel company. Their jobs are growing. One hundred percent of the ingredients come from the United States, and their product—steel, manufactured in Maryland—is exported around the world because it is a quality product.

Atlas Container is another Maryland manufacturer with a national market. I visited them. They are doing great. Their sales are up, their employment is up.

An area which I think is particularly important to the Presiding Officer is the craft beer industry. I have been up to Massachusetts and enjoyed some of their craft beers. There are over 100,000 jobs in the craft beer industry in this country, and it is growing. Times have been tough—but not in the craft beer industry. It is growing.

I visited Flying Dog in Frederick and Heavy Seas in Baltimore. They are coming out with new and seasonal beers, which is keeping a market growing, using creativity, besides having a very fine product.

It is not just in the craft beer industry, it is also in the wine industry. We have about 64 wineries in our State. I visited one in Montgomery County, MD. I don't know if most people know that Montgomery County, MD, produces one of the best wines in this country and can compete internationally. We are very proud of what is done at Sugarloaf Mountain Winery in Montgomery County, MD.

I wish to talk about some of the high-tech jobs done here. Brain Scope has developed a portable device available in the battlefield which can tell the severity of a head wound, as to whether the warrior needs immediate attention in order to save his life because of a brain injury or whether they can take a little more time before treatment. It is inexpensive in its operations and gives the data necessary to determine brain waves and the severity of the head injury. I think the total cost was about \$10 million to develop. The military is very appreciative of this discovery. Think about the lives it will save, and think about the application of this technology to our community life. I think we are always nervous when we see our children and grandchildren on the playing field at sporting events, knowing how common head injuries are. This technology can be used on the playing field to determine the severity—whether a person who suffers a head injury needs to seek immediate medical attention because it is life threatening or whether they just need to sit out for a while.