

board. Sergeant Pearson was only 20 years old.

But it was not until two decades later that U.S. personnel were finally permitted by Vietnam to fully investigate and excavate what remained of the crash site. Despite the passage of time, the recovery team was able to identify and repatriate the remains of Sergeant Pearson, and we are grateful to our military for their efforts in this regard.

Sergeant Pearson was a hero, not only for his commitment to freedom and the sacrifices he made by serving in Vietnam, but also for his courage in trying to save a comrade, who, I might add, was eventually rescued six days later. His heroic deeds were exemplary of the New Hampshire spirit of duty, honor, and valor, and his story will be an inspiring and moving one in the history of United States Air Force Pararescue for all generations that follow in his footsteps.

As a fellow Vietnam veteran and a long-time advocate for the families of our POWs and MIAs who have suffered uncertainty for far too many years, my thoughts and prayers are with Sergeant Pearson's parents, siblings, family members, fellow comrades, and friends. I know they are all very proud of his service, as they now close this long, sad chapter in their lives.

Finally, Mr. President, I also want to publicly thank the United States Air Force, including personnel at Hanscom Air Force Base in Massachusetts, and Sergeant Pearson's fellow Maroon Berets for the special care they have taken to honor their own, and to bid Sergeant Pearson a fitting farewell in a such a dignified manner. I know that the honors bestowed on Sergeant Pearson by the Air Force during this difficult weekend ahead will help to console those who have suffered the most from his loss. It has been a long wait, but we are grateful he has now returned home for this fitting final goodbye in New Hampshire.●

DELTA TEACHERS' ACADEMY

● Mr. BUMPERS. Mr. President, The Agricultural Research, Extension, and Education Reform Act of 1997, which the Senate passed yesterday, includes a provision which authorizes the Secretary to provide funds to a national organization which promotes educational opportunities at the primary and secondary levels in rural areas with a historic incidence of poverty and low academic achievement.

The 1990 Report of the Lower Mississippi Delta Development Commission identified quality of education as one of its 68 issues to be addressed through State and/or Congressional action. One of several recommendations offered by the Commission was that educational agencies in the Delta establish cooperative partnerships with institutions of higher education. In 1992, the Delta Teachers' Academy was launched as one of the first large-scale,

federally funded responses to the Delta Development Commission. Since that time, the Delta Teachers' Academy has offered outstanding opportunities for elementary and high school teachers to increase their academic proficiency and has become the largest professional development program operated by the National Faculty. Acting under the assumption that well-prepared teachers beget well-educated students, Congress has continued to provide funding for the Delta Teachers' Academy. Giving teachers the resources, knowledge, and support they need to achieve the goals set for them should reside at the heart of educational improvement efforts.

The importance of preparing young people for the challenges and realities of the 21st Century is indisputable. The region of the United States known as the Lower Mississippi Delta—Eastern Arkansas, Southeast Missouri, Southern Illinois, Western Kentucky, Western Tennessee, Mississippi, and Louisiana—has lagged behind the rest of the country in economic growth and prosperity. This area suffers from a greater amount of measurable poverty and unemployment than any other region of the country. It is inhibited by people who have used their sense of place to develop a cultural and historical heritage that is rich and unique. A letter from then-Governor Bill Clinton which accompanied the Delta Commission's 1990 report identified the region as "an enormous untapped resource for America" that "can and should be saved." The Delta Teachers' Academy has endeavored to do just that.

The Delta Teachers' Academy, the National Faculty's single largest program, unites teachers from largely poor and isolated districts for long-term study in core disciplines. The three-year program combines intensive summer institutes with on-site sessions during the school year. Each teacher team works in collaboration with college and university scholars in one or more of five core disciplines—English, geography, history, math, and science. As teachers improve their mastery of these subject areas and gain confidence in their professional development, they are able to pass their knowledge along to the students with whom they come in contact. In 1995, the program served 600 teachers in 43 program sites. The Academy has continued to expand its outreach efforts and currently serves over 1000 teachers in the 219 counties and parishes comprising the Lower Mississippi Delta.

Positive outcomes have been reported for the Delta Teachers' Academy by the General Accounting office in June of 1995 and as recently as August of this year by Westat, an independent entity commissioned to evaluate the effectiveness of the program. Both determined that the Delta Teachers' Academy is effective in fulfilling its two primary goals—increasing understanding of academic subjects and providing new and useful teaching

skills. The GAO report specifically noted the Academy's success in helping teachers' institute changes in their curricula and classroom practice.

I feel that the Delta Teachers' Academy represents community partnership at its very best. I am pleased that Congress has agreed to provide a special authorization for this incredibly worthwhile program. This makes clear Congress' commitment to improving educational opportunity and the overall quality of life for people living in the Lower Mississippi Delta and the need to continue our support such as the Delta Teachers' Academy.●

MEDICARE FRONTIER HEALTH CLINIC AND CENTER ACT OF 1997

● Mr. THOMAS. Mr. President, I am pleased to join my colleague from Alaska, Senator FRANK MURKOWSKI (R-AK), in introducing the "Medicare Frontier Health Clinic and Center Act of 1997." This bill will go a long way in assuring rural families have access to emergency medical care on a 24-hour basis.

As cochairman of the Senate Rural Health Caucus, it has been my priority to put rural health care at the forefront of any legislative package. Included in this year's "Balanced Budget Act of 1997," is a comprehensive set of reforms that increases Medicare reimbursement rates to midlevel practitioners, improves payment levels to rural health plans contracting with Medicare and permits small hospitals to stay open even if they do not meet all of the requirements stipulated under Medicare's conditions of participation.

It is this last provision that is particularly beneficial to Wyoming's health care community. For the first time, our hospitals will be able to reconfigure their services and reduce excess bed capacity. The new entities will be called "Critical Access Hospitals" [CAH's]. They will be excused from some of the onerous staffing regulations designed with big cities in mind. In addition, they will be reimbursed on a reasonable-cost basis, which provides the extra payment needed to remain open.

While the newly established CAH Program goes to great lengths to expand medical care in rural America, there is still more to do. That is where our bill steps in. The "Medicare Frontier Health Clinic and Center Act," permits state certified health clinics in the most frontier areas to upgrade to CAH status. This will ensure that remote areas of the country will finally have access to hospital services.

Too often, health care providers are forced to close their doors because they cannot contend with low utilization rates, costly regulations and inadequate Medicare reimbursement payments. But closing a hospital or a medical clinic is not an acceptable option in Wyoming. In my State, if a town loses its most important point of service—the emergency room—it is typical

for patients to drive 100 miles or more to the closest tertiary care center. An alternative must be available.

Mr. President, our bill presents communities with a viable option. It accommodates different levels of medical care throughout a state while providing stabilization services needed in remote areas. It is one in a series of measures that the Rural Health Caucus is working on designed to improve quality medical care in rural America, and I look forward to working with my colleague from Alaska to pass this important piece of legislation.●

STUDY OF THE IMPACT OF THE NORTHEAST INTERSTATE DAIRY COMPACT

● Mr. FEINGOLD. Mr. President, the Agriculture appropriations bill, H.R. 2160, which the Senate has approved today contains a provision, section 732, requiring the director of the Office of Management and Budget to conduct a comprehensive economic evaluation of the direct and indirect economic impacts of the Northeast Interstate Dairy Compact on consumers within the six-state compact region and on producers outside of the region. The Senator from Minnesota [Mr. GRAMS] and I offered this amendment with Senators KOHL, LEVIN, ABRAHAM, and WELLSTONE during Senate consideration of the bill, because, to date, there has been no comprehensive analysis of the short and long-term impacts of the Compact from this perspective.

Wisconsin farmers, and many farmers throughout the nation, are extremely concerned that the artificially high milk prices under the Northeast Dairy Compact will place noncompact farmers at an unfair competitive disadvantage. Compact producers, who on July 1 of this year began receiving a Class I price of \$16.94, have been insulated from the market prices which farmers throughout the country have faced in 1997.

Wisconsin farmers are concerned about surplus production the inflated Compact price is likely to generate about the impact of potential milk surpluses on national milk prices. Furthermore, there is concern that this Compact, while ostensibly affecting only Class I milk, will result in surplus Class I milk being processed into cheese, butter and other products which are sold nationally. If the supply of manufactured dairy products rises due to increased manufacturing in the Northeast, national markets for manufactured products will be negatively affected and milk prices to producers may fall nationally. In addition, if milk production rises in the Compact region due to artificial production incentives, excess milk may be shipped out of the Compact region to fill cheese vats elsewhere, further depressing cheese and milk prices. So these secondary effects of the Compact must be examined.

Section 732 of this bill is very specific. It directs OMB to carefully exam-

ine changes and projected changes in levels of milk production, the number of cows, the number of dairy farms and milk utilization in the Compact region due to the Compact. OMB must compare changes in those factors resulting from the Compact to levels of production, cow numbers, dairy farms, milk utilization and disposition of milk that would have occurred in the absence of the Compact. It is extremely important that OMB compare Compact effects not with national averages, but rather with production, cow numbers, and other effects that would have occurred had Compact producers been subject to the market conditions facing dairy farmers nationally.

Section 732 also directs OMB to look at a number of economic indicators, such as changes in disposition of milk produced in the Compact region and changes in utilization of Compact milk, that will aid them in determining the impacts of the Compact on farmers outside of the Northeast.

There is also substantial concern about the consumer impacts of the Northeast Interstate Dairy Compact which taxes 14 million Northeast consumers to benefit just over 4000 dairy farmers in the six states. It is not surprising that consumer prices for fluid milk have risen since the Compact price has been in effect. The Compact raises Class I prices specifically because demand for Class I milk is less responsive to price than other dairy products and more revenue can be extracted from the consumer's pocket. OMB must examine the effects of milk price increases on consumers and, in particular, on low-income consumers.

The study must also examine the impacts of the Compact on USDA's vital nutrition programs that provide milk and dairy products to low-income women, children, infants and the elderly. OMB is directed by section 732 to study the impact of the Compact on both actual and projected changes in program participation, on the value of benefits offered under these programs and on the financial status of the institutions offering the programs. Will the purchasing power of food stamps fall because of the higher milk prices? Will schools offering school lunch and breakfast suffer from an effective lower per meal reimbursement rate? Will participation in the WIC program offered by the six northeastern states fall due to increased milk prices? Is the reimbursement scheme established by the Compact Commission adequate to compensate WIC for increased milk costs? These questions should be answered by OMB's analysis.

Finally, OMB must evaluate the impact of adding additional states to the Northeast Dairy Compact on all of the factors mentioned above. The Northeast Dairy Compact allows Delaware, New Jersey, New York, Pennsylvania, Maryland, Virginia, and any additional states contiguous to participating states, to join the Compact and benefit from inflated Class I milk prices. If

that happens, a much larger volume of milk, perhaps over 20 percent of national production, will be priced under the Compact and a much larger number of farmers will have artificial incentives to increase milk production. Congress must have information about the potential economic impact of adding more states to the Compact on farmers in Wisconsin, Minnesota, Idaho, California, New Mexico and other major milk producing states. Furthermore, consumer impacts will be magnified if additional states are added and we need to be able to quantify that impact.

Mr. President, the amendment which Senator GRAMS and I offered, which was adopted by the Senate and included in the final bill by the Conference Committee, lays out very clear direction for OMB on the issues they should evaluate regarding the Northeast Interstate Dairy Compact.

However, the Senator from Vermont [Senator LEAHY] made a statement shortly after this provision was adopted as part of the Senate FY 1998 Agricultural Appropriations Bill that implied that OMB should study issues much broader than stipulated by section 732. The Senator from Vermont [Mr. LEAHY] was not a cosponsor of the amendment adopted in the Senate and he is incorrect with respect to the issues the bill directs OMB to evaluate. There was no agreement between the authors of section 732 of this bill and the Senator from Vermont, or any other Senators, that any of the items he mentioned in floor statements subsequent to the passage of the amendment were to be included in the study. OMB should look at the requirements of section 732 and at the statements made by the amendment authors in setting the parameters of this study and the intent of Congress.

As a principal coauthor of the provision requiring OMB to study the impact of the Northeast Dairy Compact, I want to make clear what the Agriculture Appropriations Bill requires and what it does not require of OMB's evaluation.

The study does not require that OMB conduct a comprehensive evaluation of retail, wholesale, and processor milk pricing in New England and OMB should not include such a broad analysis in their study. The authors of the study provision did not intend for OMB to examine farm-retail asymmetry issues. OMB's study should not address whether those in the marketing chain should be passing on all or a portion of the increase in farm level milk costs to consumers. This study should provide an objective analysis of the direct impacts of the Northeast Compact on the wholesale and retail cost of fluid milk not a subjective review of how Compact associated price increases compare to price increases or decreases resulting from market conditions in the past.

OMB should not evaluate broader issues of what the appropriate profit margin for those in the marketing chain could or should be or what level