

Health Centers and the Provision of Care to the Poor and Uninsured” have all highlighted the importance of the Medicaid DSH program to our health care safety net.

As the Commonwealth Fund report, which was released just this last week, notes: “The Medicaid DSH program has had a beneficial effect on patient access. The average payment rate for Medicaid inpatient services has increased dramatically. Medicaid payments for hospital services were only 76 percent of the cost of providing this care in 1989. By 1994, Medicaid payments had increased to 94 percent of costs.”

Unfortunately, as the Commonwealth Fund report adds, “. . . there are large inequities in how these funds are distributed among states.” In fact, for 15 states, including New Mexico, our federal DSH allotments are not allowed to exceed 1 percent of our state’s Medicaid program costs. In comparison, the average state spends around 9 percent of its Medicaid funding on DSH. This disparity and lack of Medicaid DSH in “extremely low-DSH states” threatens the viability of our safety net providers. In New Mexico, these funds are critical but inadequate to hospitals all across our state, including University Hospital, Eastern New Mexico Regional Hospital, St. Vincent’s Hospital, Espanola Hospital, and others.

In an analysis of the Medicaid DSH program by the Urban Institute, the total amount of federal Medicaid DSH payments in six states was less than \$1 per Medicaid and uninsured individual compared to five states that had DSH spending in excess of \$500 per Medicaid and uninsured individual. That figure was just \$14.91 per Medicaid and uninsured person in New Mexico. Compared to the average expenditure of \$218.96 across the country, such disparities cannot be sustained.

As a result, this bipartisan legislation increases the allowed federal Medicaid DSH allotment in the 15 “extremely low-DSH states” from 1 percent to 3 percent of Medicaid program costs, which remains far less, or just one-third, of the national average. I would add that the legislation does not impact the federal DSH allotments in other states but only seeks greater equity by raising the share of federal funds to “extremely low-DSH states.”

Once again, the Commonwealth Fund recommends such action. As the report finds, “States with small DSH programs are not permitted to increase the relative size of their DSH programs . . . [C]urrent policy simply rewards the programs that acted quickly and more aggressively, without regard to a state’s real need of such funds.” Therefore, the report concludes, “. . . greater equity in the use of federal funds should be established among states.”

Again, this is achieved in our legislation by raising the limits for “extremely low-DSH states” from 1 percent to 3 percent and not by redistrib-

uting or taking money away from other states.

Failure to support these critical hospitals could have a devastating impact not only on the low-income and vulnerable populations who depend on them for care but also on other providers throughout the communities that rely on the safety net to care for patients whom they are unable or unwilling to serve.

As the Institute of Medicine’s report entitled “America’s Health Care Safety Net: Intact But Endangered” states, “Until the nation addresses the underlying problems that make the health care safety net system necessary, it is essential that national, state, and local policy makers protect and perhaps enhance the ability of these institutions and providers to carry out their missions.”

I ask unanimous consent that the text of the bill be printed in the RECORD.

There being no objection, the bill was ordered to be printed in the RECORD, as follows:

S. 776

*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 “Medicaid Safety Net Improvement Act of 2001”.

**SEC. 2. INCREASE IN FLOOR FOR TREATMENT AS AN EXTREMELY LOW DSH STATE TO 3 PERCENT IN FISCAL YEAR 2002.**

(a) INCREASE IN DSH FLOOR.—Section 1923(f)(5) of the Social Security Act (42 U.S.C. 1396r-4(f)(5)) is amended—

(1) by striking “fiscal year 1999” and inserting “fiscal year 2000”;

(2) by striking “August 31, 2000” and inserting “August 31, 2001”;

(3) by striking “1 percent” each place it appears and inserting “3 percent”;

(4) by striking “fiscal year 2001” and inserting “fiscal year 2002”.

(b) EFFECTIVE DATE.—The amendments made by subsection (a) take effect on October 1, 2001, and apply to DSH allotments under title XIX of the Social Security Act for fiscal year 2002 and each fiscal year thereafter.

STATEMENTS ON SUBMITTED RESOLUTIONS

SENATE RESOLUTION 73—TO COMMEND JAMES HAROLD ENGLISH FOR HIS 23 YEARS OF SERVICE TO THE UNITED STATES SENATE

Mr. BYRD (for himself, Mr. STEVENS, Mr. LEAHY, Mr. KOHL, Mr. DASCHLE, Mr. REID, Mr. WARNER, and Mr. GRAMM) submitted the following resolution; which was considered and agreed to:

S. RES. 73

Whereas James Harold English became an employee of the United States Senate in 1973, and has ably and faithfully upheld the high standards and traditions of the staff of the United States Senate;

Whereas James Harold English served as Clerk of the Transportation Appropriations Subcommittee from 1973 to 1980;

Whereas James Harold English served as the Assistant Secretary of the Senate in 1987 and 1988;

Whereas James Harold English has served as Democratic Staff Director of the Appropriations Committee of the United States Senate from 1989 to 2001;

Whereas James Harold English has faithfully discharged the difficult duties and responsibilities of Staff Director and Minority Staff Director of the Appropriations Committee of the United States Senate with great pride, energy, efficiency, dedication, integrity, and professionalism;

Whereas he has earned the respect, affection, and esteem of the United States Senate; and

Whereas James Harold English will retire from the United States Senate on April 30, 2001, with over 30 years of Government Service—23 years with the United States Senate: Now, therefore, be it

*Resolved*, That the United States Senate—

(1) Commends James Harold English for his exemplary service to the United States Senate and the Nation, and wishes to express its deep appreciation and gratitude for his long, faithful, and outstanding service.

(2) The Secretary of the Senate shall transmit a copy of this resolution to James Harold English.

SENATE RESOLUTION 74—EXPRESSING THE SENSE OF THE SENATE REGARDING CONSIDERATION OF LEGISLATION PROVIDING MEDICARE BENEFICIARIES WITH OUTPATIENT PRESCRIPTION DRUG COVERAGE

Mr. DAYTON (for himself, Ms. STABENOW, Mr. JOHNSON, and Mr. ROCKEFELLER) submitted the following resolution; which was referred to the Committee on Finance.

S. RES. 74

*Resolved*, That it is the sense of the Senate that, by not later than June 20, 2001, the Senate should consider legislation that provides medicare beneficiaries with outpatient prescription drug coverage.

Mr. DAYTON. Mr. President, today I am introducing a resolution which expresses the sense of the Senate that the Senate will consider legislation providing prescription drug coverage for senior citizens by June 20, 2001. The resolution does not specify what form of coverage will be considered; rather, it simply commits us to scheduling consideration of this important legislation, and hopefully its passage, in the near future.

Many of us have promised the senior citizens of our states that Congress would enact this kind of program. As you know, last year the 106th Senate was unable to reach agreement on whether to provide prescription drug coverage directly through Medicare, through subsidized insurance policies, or another mechanism. While these disagreements stymied any one measure’s passage, it appeared that an overwhelming majority of Senators then supported some form of coverage.

I believe it is imperative that we get a program of financial assistance for hard-pressed senior citizens quickly enacted. While I have my own preference for direct, voluntary coverage under Medicare, I am most concerned that some form of financial assistance be provided to desperate senior citizens in

Minnesota and across the country, whose lives are being traumatized by the unaffordable costs of their prescription medicines. Their economic security, their emotional well-being, and their physical health are being threatened, even ruined, by ever-increasing costs over which they have no control.

I respectfully request your support for this resolution when it comes to the floor for a vote.

SENATE RESOLUTION 75—DESIGNATING THE WEEK BEGINNING MAY 13, 2001, AS "NATIONAL BIOTECHNOLOGY WEEK"

Mr. LOTT (for Mr. HUTCHINSON (for himself, Mr. DODD, Mr. CRAPO, Mr. KENNEDY, Mr. INHOFE, Mrs. FEINSTEIN, Mr. CRAIG, Mrs. MURRAY, Mr. SPECTER, Mr. EDWARDS, Ms. MIKULSKI, Mr. HELMS, Mr. BIDEN, and Mr. KERRY) submitted the following resolution; which was referred to the Committee on the Judiciary:

S. RES. 75

Whereas biotechnology is increasingly important to the research and development of medical, agricultural, industrial, and environmental products;

Whereas public awareness, education, and understanding of biotechnology is essential for the responsible application and regulation of this new technology;

Whereas biotechnology has been responsible for breakthroughs and achievements that have benefited people for centuries and contributed to increasing the quality of human health care through the development of vaccines, antibiotics, and other drugs;

Whereas biotechnology is central to research for cures to diseases such as cancer, diabetes, epilepsy, multiple sclerosis, heart and lung disease, Alzheimer's disease, Acquired Immune Deficiency Syndrome (AIDS), and innumerable other medical ailments;

Whereas biotechnology contributes to crop yields and farm productivity, and enhances the quality, value, and suitability of crops for food and other uses that are critical to the agriculture of the United States;

Whereas biotechnology promises environmental benefits including protection of water quality, conservation of topsoil, improvement of waste management techniques, reduction of chemical pesticide usage, production of renewable energy and biobase products, and cleaner manufacturing processes;

Whereas biotechnology contributes to the success of the United States as the global leader in research and development, and international commerce;

Whereas biotechnology will be an important catalyst for creating more high-skilled jobs throughout the 21st century and will lead the way in reinvigorating rural economies and;

Whereas it is important for all Americans to understand the beneficial role biotechnology plays in improving quality of life and protecting the environment: Now, therefore, be it

*Resolved*, That the Senate—

(1) designates the week beginning May 13, 2001, as "National Biotechnology Week"; and  
(2) requests that the President issue a proclamation calling upon the people of the United States to observe the week with appropriate programs, ceremonies, and activities.

Mr. HUTCHINSON. Mr. President, I rise today with Senators DODD, CRAPO,

KENNEDY, INHOFE, FEINSTEIN, CRAIG, MURRAY, SPECTOR, EDWARDS, MIKULSKI, HELMS, BIDEN, and KERRY to introduce a Senate Resolution declaring May 13–20, "National Biotechnology Week."

There have been phenomenal advancements in science over the last few years that are allowing us to improve health care, increase crop yields, reduce the use of pesticides, and replace costly industrial processes involving harsh chemicals with cheaper, safer, biological processes. These advancements have occurred due to the hard work and diligence of scientists and researchers in United States, and all around the world, who have spent their lives promoting and perfecting the practice of biotechnology.

Biotechnology is the use of biological processes to solve problems or make useful products. While the use of biological processes for these purposes is not new, the use of recombinant DNA technology and our greater understanding of the role of genetics in our lives have led to the creation of hundreds of products and therapeutic treatments with a wide variety of health, agricultural, and environmental benefits.

Through the analysis of genes and gene products, we will soon be able to forecast disease and create preventative therapies that will drastically reduce the cost of health care by limiting the number of drug treatments necessary and reducing the amount of time patients must be in the hospital. This same technology will enable us to refocus health care on promoting health and preventing disease rather than restoring health in the sick and treating the symptoms and effects of full-blown illness in our nation's health care clinics.

With the publication of the human genome sequence, we are now one step closer to understanding the mechanisms of disease. The identification of which genes are activated, how, and the determination of the functional characteristics of their RNA and protein products are frontiers that remain for our next generation of scientists. However, we are quickly moving towards those frontiers, shedding light on the complex functions of our own bodies that have been shrouded in mystery and speculation for centuries.

In the area of agriculture, the benefits and potential for biotechnology are no less stunning—allowing us to increase the yield of commodities while reducing the use of pesticides. As the world population continues to balloon and the amount of arable land available decreases, we will increasingly look to biotechnology to meet the needs of people everywhere. Researchers in industry and academia are also exploring the possibilities for genetic traits that will yield maximum production, even in the face of inclement weather.

They are also looking for ways to use biotechnology to create novel plants that will provide food that has value

added traits such as reduced fat content and increased levels of vitamins and minerals that our diets here in the United States or those in the developing world may be deficient in. The potential for the product known as "golden rice," which could substantially combat blindness and anemia in the third world, is immense. In the next ten to twenty years, we will likely be able to grow vaccines in plants, eliminating the difficulties of distribution in many areas of the world.

Industrial biotechnology also shows tremendous potential for reducing the pollution and waste generated through industrial production. Through the use of enzymes and other biological components, industries are able to minimize material and energy inputs while simultaneously maximizing renewable resources. An added benefit of those processes is that they limit the production of hazardous pollutants and wastes while producing recyclables or biodegradable products. Industrial biotechnology has been used to create environmentally friendly laundry detergents with fewer phosphates and paper production treatments that reduce the discharge of chlorine. Industrial enzymes have also been used to create ethanol and other alternative fuels from corn and biomass.

Aside from the environmental benefits of both agricultural and industrial biotechnology, researchers have used this technology to actually solve environmental problems and clean up environmental disasters. Through the use of bioremediation, the use of living organisms to degrade toxic waste into harmless byproducts, researchers and environmentalists have been able to clean polluted coastlines and areas where fuels have leaked into the soil. Cities and towns throughout the world are now using microbes to remove pollutants from their sewage systems, and the EPA is now using bioremediation to clean up some of our nation's most serious waste sites.

With all of these marvelous benefits, there is no doubt that biotechnology is touching our lives and improving our world. But, along with this technology comes the responsibility to understand and carefully evaluate it. If there is to be a future for this technology, and we are to fully realize its benefits, elected officials and the public must be informed and engaged about the basics of technology itself and its incredible benefits.

This is why my colleagues and I are pleased to introduce this resolution declaring May 13–20, 2001, as "National Biotechnology Week." It is our hope that public officials, community leaders, researchers, professors, and school teachers across the country will take this week to actively promote understanding of biotechnology in their communities and their classrooms.