

Medicare and Medicaid also harms New York State's finances. New York State has effectively been subsidizing the Federal Government for years in the absence of a Federal provision for prescription drug benefits, by paying for the drug costs of these Medicare beneficiaries. But by failing to include dually eligible Medicare beneficiaries in the Medicare prescription drug benefit, this bill continues to leave New York, which is in a precarious State budget situation, to subsidize the Federal Government's lack of adequate investment.

Finally, the bill includes a Grassley-Baucus amendment that starting in 2009 will allow for government subsidization of private plans at levels much higher than the government funding for beneficiaries in traditional Medicare, and would then allow the private plans to offer benefits not available to the 90 percent of seniors in traditional Medicare, which I believe begins to subordinate the goal of health care for seniors to the goal of privatizing Medicare.

While I am pleased that New York's State drug program, EPIC, will still be available under a provision that Senators CORZINE, LAUTENBERG, SCHUMER and I worked hard to include, the other measures I supported to make sure seniors with other sources of coverage were not harmed by this proposal were unfortunately left out of the bill.

For their sake, for the sake of New York's fiscal situation, as well as for the sake of other New York seniors who will be confronted with an unnecessarily complex maze of bureaucracy to navigate in order to access benefits, I felt obliged to oppose the bill. There were some important provisions in the bill, including Senator SCHUMER's amendment that provides greater market competition for generic drugs so that seniors will have a cheaper alternative and don't have to rely on higher priced name-brand drugs.

These positive provisions were not enough, however, for me to vote for the bill unless it is substantially improved. While I believe New York deserves a better bipartisan alternative than the one that passed the Senate yesterday, I hope that those in conference will fight against changes that make the bill even worse for New York, and I will continue fighting this year, as well as in years to come, to correct these deficiencies and actually to deliver on the long-awaited promise of a simple, affordable, comprehensive prescription drug benefit for all seniors.

I request that this statement and a separate document, Governor Pataki's letter dated June 12, 2003, be submitted for the RECORD.

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

STATE OF NEW YORK,

June 12, 2003.

DEAR NEW YORK CONGRESSIONAL DELEGATION MEMBERS: Prescription drug costs continue to strain the budgets of the nation's senior citizens. I applaud your efforts this year to address this important issue. As you

begin consideration of legislation to provide prescription drug coverage to all senior citizens, please consider two issues vitally important to New York State.

First, New York taxpayers continue to support a significant cost for prescription drug coverage for its dual eligible population. The dual eligibles are elderly and disabled individuals who qualify for both the Medicare and Medicaid programs. Medicaid is required to provide medical services not covered by Medicare—including prescription drugs.

More than 600,000 New Yorkers are considered dual eligibles and each year New York's Medicaid program spends nearly \$1.5 billion on prescription drugs for the dual eligible population alone. We have always believed that these costs should be borne by the federal government and strongly support efforts to federalize prescription drug costs for the dual eligible population.

In addition, New York administers the nation's largest prescription program for seniors, EPIC. Today, more than 300,000 seniors are enjoying the significant benefits EPIC offers and savings thousands of dollars each on vitally important medicines. Costs for this program exceed \$600 million annually in State only dollars. Currently eighteen states have programs similar to New York's to provide prescription drug benefits to senior citizens.

Any federal program created this year to provide prescription drug coverage should recognize state efforts and allow seniors to choose their benefit plan (in New York, that choice would be between EPIC and the federal plan) while providing a direct Medicare subsidy to the state program for individuals that choose that option.

The Federal government has accepted responsibility of providing health care to senior citizens and I strongly urge an expansion to include prescription drug coverage. I applaud President Bush for his leadership on this issue and our Congressional delegation for its commitment to our seniors.

Your efforts on this important legislation could dramatically improve the health of a segment of our population that has given so much to New York's and America's safety and prosperity. We urge you to work with us to ensure that our seniors get the prescription drug coverage they deserve, and that the federal government assumes its rightful role in supporting services for our dual-eligible population.

Very truly yours,

GEORGE E. PATAKI,
Governor.

MEDICARE REIMBURSEMENT OF MAMMOGRAPHY

Ms. MIKULSKI. Madam President, I rise to state for the record my strong support of Senator HARKIN'S amendment to the Medicare prescription drug bill (S. 1) to increase Medicare reimbursement for mammograms. I am a proud cosponsor of this amendment. I am pleased that Senator GRASSLEY and Senator BAUCUS agreed to include it in the Medicare prescription drug legislation that passed the Senate earlier today. Americans must have access to mammography because it is an important tool to screen and detect breast cancer.

It is vital for Medicare beneficiaries to have access to mammography. A woman's risk of having breast cancer increases with age. A woman's chance of getting breast cancer is 1 out of 2,212

by age 30. This increases to 1 out of 23 by age 60 and 1 out of 10 by age 80. More than 85 percent of breast cancers occur in women over the age of 50. There will be 70 million Americans aged 65 and over in 2030. At the same time about 700 mammography facilities have closed nationwide over the last 2 years. Adequate reimbursement is essential to help ensure that women have access to this important screening tool. This amendment will increase Medicare reimbursement for mammograms. This amendment is also an important step to help radiologists enter and remain in the field of mammography by providing more adequate reimbursement. Mammography is not perfect, but it is the best tool we have now.

I have long fought to ensure that Medicare beneficiaries have access to mammography. I cosponsored the Assurance Access to Mammography Act, S. 869, that would increase Medicare reimbursement for mammograms. It would also increase the number of radiologists by increasing Medicare graduate medical education, GME, to provide three additional radiologists in each teaching hospital. In 1990, I introduced the Medicare Screening Mammography Amendments of 1990 to provide Medicare coverage of annual screening mammography. My legislation was included in the Omnibus Budget Reconciliation Act of 1990. Before that, Medicare did not cover routine annual screening mammograms. Additional legislation since then has expanded access to mammography for Medicare beneficiaries. I will continue to fight to ensure that women have access to quality mammography, and I urge that the final version of the Medicare prescription drug bill include provisions to increase Medicare reimbursement for mammograms.

EDUCATION FUNDING

Mr. KENNEDY. Madam President, there is troubling news on the education front. Yesterday, the Republican majorities on the House and Senate Appropriations Committees approved education budgets filled with harsh cuts that will hurt families, students, schools, and teachers throughout the country.

Unfortunately, the pattern is all too clear. Our Republican colleagues promise strong support for education and quietly break the promise. The bills unveiled yesterday contain a litany of broken promises on education.

Obviously, money is not the answer to all the problems of our schools. But the way we allocate resources in the Federal budget is a clear expression of our Nation's priorities. And the priorities on education reflected in this Republican Appropriations bill are profoundly wrong.

In January 2002, President Bush promised that "America's schools will be on a new path of reform . . . our schools will have greater resources to meet those goals." But yesterday, on a