

concurrently—it can save States, the Federal Government, and localities money.

This highway bill is truly a jobs bill not only for the workers who will build and repair America's roads and bridges, but these investments will also bring broader economic benefits to our communities.

Another good thing this bill does that will help further job growth in West Virginia is it reauthorizes the Appalachian Regional Commission. This reauthorization includes bipartisan language to establish a high-speed broadband development initiative for underserved areas in Appalachia.

Just this Sunday, the Charleston Gazette-Mail wrote about how the lack of broadband was hindering efforts to provide telemedicine in small West Virginia towns. The ARC reauthorization is a tangible step towards getting this region connected. Broadband access can power these communities.

So passage of the education and highway bills are tremendous recent achievements, and they follow earlier bipartisan accomplishments this year.

With our entitlement programs hurdling towards bankruptcy, it was important for Congress to act. In April, we permanently eliminated Medicare's sustainable growth rate, or SGR, putting an end to the long series of temporary patches that had vexed our Nation's seniors and doctors. These reforms will encourage competition, save taxpayer dollars, and provide a more reliable system for our seniors. We know there is more to do, but this marks a good first step to preserve Medicare for future generations.

This same legislation extended funding for the Children's Health Insurance Program—a program I have been intimately involved with in West Virginia since my early days as a member of the house of delegates.

We passed legislation to help veterans heal from the unseen wounds of war and to support victims of human trafficking.

We renewed trade promotion authority to facilitate new trade agreements that can expand American jobs. And we did all of this by working together to find common ground on behalf of the people we serve.

Even when consensus cannot be achieved or the President chooses to go it alone, the Senate should debate the tough issues and show the American people where we stand. We say where we stand when we are running for election. We should be saying where we stand now that we are elected. We shouldn't be shying away from that.

The President's relentless environmental campaign to expand Washington bureaucracy at the expense of our economy is an issue I have been deeply concerned about. Energy-producing States have been hit the hardest. My State of West Virginia now has the largest and highest unemployment rate after enduring thousands of layoffs and WARN notices. Nationwide,

coal mining employment has dropped by 30 percent since 2011. When I was a Member of the House of Representatives, I took action to rein in the President's regulatory agenda, but often legislation that passed the House could not garner enough support here in the Senate.

So as a newly elected Senator, I committed to change that and to lead the legislative response to protect affordable, reliable energy. Just last month, we succeeded. The Senate passed two resolutions to avoid the Clean Power Plan that are now headed to the President's desk, including the one that I led. Under new leadership, the Senate strongly opposed policies that are devastating our energy economy and have negligible environmental benefit.

ObamaCare is another costly disaster that has placed great burdens on the American people. The new Republican-led Senate recently delivered on its promise to pass legislation that repeals the broken law. Basically, ObamaCare is failing. Americans are facing skyrocketing premiums and deductibles. Countless people have lost access to the doctor and health care plan of their choice. Even insurance companies are threatening to pull out of the system, and the Nation's largest one is one of those.

President Obama and the Democrats are fighting to use taxpayers' dollars to bail out the big insurance companies in a misguided attempt to save their failed health care policy.

The repeal legislation we passed last week would reduce taxes by more than \$1 trillion, strengthen Medicare, and provide significant resources for a problem plaguing our country—substance abuse and mental health treatment. We know the President will veto the bill, but new leadership in the Senate has put a repeal bill on his desk for the first time. And this legislation will serve as a model for efforts to repeal and replace ObamaCare in the next Congress.

This year, we have addressed the concerns of many Americans and the serious challenges that we face. We have solved problems and delivered real results. And under Leader MCCONNELL's management, we have been able to debate critical issues on behalf of the Americans we serve, offer new reforms and ideas through the amendment process, and enact important bipartisan legislation.

But this is just the beginning. While much has been accomplished, our work is far from done, and I look forward to building on this record of bipartisan achievement in the year ahead.

I yield the floor.

I suggest the absence of a quorum.

The PRESIDING OFFICER. The clerk will call the roll.

The senior assistant legislative clerk proceeded to call the roll.

Ms. STABENOW. Mr. President, I ask unanimous consent that the order for the quorum call be rescinded.

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

#### MENTAL HEALTH CARE

Ms. STABENOW. Mr. President, I rise to talk about an opportunity we have in the midst of all the negotiations going on to do something incredibly meaningful, that has bipartisan support, and literally will address a group of diseases that affect one out of four people every year—one out of four people who work here, one out of four people in our families. A set of diseases right now for which less than 40 percent of those with the disease get the treatment they need, but when they do, it is manageable and they can go on and lead productive lives. What I am talking about is mental illness. One out of four people every year has some kind of mental illness which is treatable and with medications and with treatment—just like any other disease—can allow someone to go on and live their life.

We have started the process in public policy of doing what we call mental health parity by saying now that insurance can't discriminate whether it is a behavioral disease, mental health, substance abuse or physical health, but we don't yet have the services in the community. So what happens is we pay dearly. Not only do individuals pay with their lives, their livelihoods, their families, and communities pay, but we pay as taxpayers.

It was interesting to me, speaking at a conference a couple of days ago here in DC with law enforcement and mental health professionals coming together, to hear about the Cook County Jail in Chicago, a huge facility. The sheriff there now has appointed a psychiatrist as the director of the jail. Why? Because one-third of the people housed in the jail have psychiatric problems. They shouldn't be in the jail. They may have committed some minor infraction because they didn't have a job or maybe they were on the street. Maybe they were hearing voices in their head and didn't hear the police officer and didn't respond in a way—or where it was considered belligerent. We now know from papers today in Michigan that studies show that people who are mentally ill are 16 times more likely to be killed in a year by a police officer. I am not suggesting that it is at all on purpose but it is because of the nature of the behavioral problems and what ends up happening in the real world when people aren't getting the treatments they need. We know what happens in terms of violence and people committing crimes, although someone who has a mental health disease is much more likely to be a victim than a perpetrator.

We have people in the emergency rooms of our hospitals. I have talked to hospital administrators and doctors who say what we need is to make sure we have a 24-hour emergency psychiatric facility, a place where someone can go or family members can call or the police can use if they find someone who needs help, not the hospital emergency room and certainly not the jail.

The good news is that we have started a bipartisan effort that can fix this. My partner and colleague in this, Senator BLUNT, and I, over a year ago, authored a provision that was passed by the House and Senate to begin something called the Excellence in Mental Health Act. We now have in law a definition of quality behavioral health services. We have federally qualified health centers in the community where people without insurance can go and get preventive care and get the physical health services they need, but the health clinics can't get reimbursed for mental health or substance abuse services. So we now have a definition. We have standards for what quality behavioral health care, mental health, and substance abuse care looks like. We have standards. We begin to provide dollars so that communities can provide those services if they meet the standards.

A couple of years ago when we put together money for the first step by saying we are going to provide money for 8 States to be able to meet those standards—8 out of 50—the good news was that half the States in the country responded and said: We want to be one of those eight States. Twenty-four States across our country now have signed up. They have received planning grants to assess their community mental health services, what they are doing, and how they can meet these new high standards, how they can make sure they include 24-hour psychiatric emergency services in their community so their citizens have the help they need as well as ongoing help for families and individuals. Twenty-four States have said: Sign me up. We are willing to do the work.

We have funding for eight of those States to actually be able to do it, to change lives; eight of those States to be able to provide services, treatment, hope for individual families, help for the sheriff, and relief for the emergency room. What we are proposing now and what is under consideration is to fund the 24 States. We have 24 States that have stepped forward. Let's provide them the resources. In the context of what we are talking about in the budget, it is a very small amount of money. We could say to the communities across this country and virtually half of the States that we are going to give them the resources to meet higher quality standards, to be able to provide the services desperately needed for one out of four people every year who have some kind of mental illness. The ramifications of doing nothing are severe in so many ways.

The reality is that we are at a point where we have the opportunity to say that as a country we are going to recognize and treat diseases above the neck the same as diseases below the neck and support communities that step up with higher quality standards and services. In the world in which we live, this would be a huge bipartisan victory.

I know this is under discussion, and I am hopeful that as the leadership moves forward, they will join us—the bipartisan coalition in the House and the Senate—in saying yes to give the people an opportunity to live their lives, be successful, work, and manage their diseases in the community just like any other disease.

I wish to say in closing that if you are a diabetic, you check your insulin every day. If you check your sugar and take your insulin, you manage your disease. It is not debilitating. You can go out and live your life. I imagine there are many people who work in the Senate who are managing diabetes. You can do the same thing if you are bipolar. It is a chemical imbalance of the brain. It is just a different organ, a different part of the body. If, in fact, you have the medication to stabilize and you have the support and treatment you need, you can manage that disease, go on with your life, be successful, work, have a family, and be able to live with dignity. That is what we are talking about. We are talking about giving people who have diseases in the brain the same opportunity for treatment and management of those diseases to live healthy, hopeful, successful lives as we do for people who have diseases in any other organ of the body. We have the opportunity to do that. At the end of next week, I deeply hope we will be able to celebrate that we have done something incredibly important for families across America.

I yield the floor.

The PRESIDING OFFICER (Mr. FLAKE). The Senator from Indiana.

#### WASTEFUL SPENDING

Mr. COATS. Mr. President, this is the 29th time I have been on the floor over this current session to address what is called, "Waste of the Week." Twenty-nine weeks of this year, I have been on the Senate floor talking about examples of how the Federal Government wastes taxpayers' money through waste, fraud, and abuse. I have laid out specific examples.

Some changes have been made in programs as a result of the publicity it has received not just from me but from the accounting offices that are doing the checking and the inspectors general who are doing the checking.

Sometimes I wonder if anybody is listening, but I am very encouraged by the fact that a number of us now, including the Presiding Officer, are talking about this issue. I hope every Member in this body, all 100 of us, start thinking about ways in which we can make our Federal Government more efficient and effective and stop wasting through fraud and abuse, stop wasting taxpayer dollars. I don't want to keep doing this, but I am going to keep doing this until there is a majority and hopefully a unanimous clarion call saying: Let's clean up this government. Let's go after this waste, fraud, and abuse.

In terms of examples, we have now totaled well over \$100 billion. We are coming up with much higher numbers as we come down to the floor every week. The Presiding Officer just issued a book, which I think every Member of this body ought to read, collecting other examples of waste, fraud, and abuse.

All of this is really in honor of a former Member, Senator Tom Coburn of Oklahoma, who really led the charge on this issue. I regret that Tom is not still a Member of the Senate. He had a way of digging out this information that was commendable. He would come to the floor and make a persuasive case through the illustration of various forms of abuse of the taxpayers' dollars.

A number of my colleagues are picking up the clarion call. As I said, we need all 100 of us to come to the conclusion that we don't have to stand here and say we are doing everything we possibly can to manage the people's money when we know that is not true, when we know that inspectors general of virtually every agency in the government have come up with reports that simply say "Why in the world are you doing this in the first place?" or "Look at this amount of fraud."

One-hundred billion dollars or more is just a drop in the budget, so we are going to continue to expose this waste. Today I had hoped this 29th waste of the week would be the last one of this calendar year, but it looks as if we might be here 1 more week, so we will get the 30th in next week if necessary.

Recently, the inspector general for the Department of Housing and Urban Development conducted a series of audits on HUD's multibillion-dollar portfolio. The results that have been printed are deeply troubling. After reviewing HUD's books, the inspector general found that the agency's finances are missing records, contain inaccurate information, and have even violated Federal laws. He acknowledged that HUD's accounting has lacked appropriate oversight for a long time. This has been going on for a long time.

Let me quote from his report:

Multiple deficiencies existed in HUD's internal controls over financial reporting, resulting in misstatements on financial statements, noncompliance laws and regulations. We have reported on HUD's administrative control of funds in our audit reports and management reports since fiscal year 2005. HUD continued to not have a fully implemented and complete administrative control of funds system that provided oversight of both obligations and disbursements.

This was exposed in 2005. Ten years later, they are still having the problem. They still haven't cleaned up their act.

This is just one agency. Maybe this is the worst agency—I don't know—in terms of being irresponsible and how they spend money, but I doubt it. I suspect that this statement could have been made by a number of our agencies.