tax cuts, but for debt reduction instead.

Why should we do this rather than use this money to reduce taxes?

First of all, if we pay down the debt, we are going to decrease our interest payments on the national debt—a debt which stands at $5.7 trillion today. This fiscal year, it will cost us more than $224 billion to service our national debt—more than $600 million a day in interest costs alone!

Out of every federal dollar that is spent this year, 13 cents goes to pay the interest on the national debt.

In comparison: 16 cents goes for national defense; 18 cents goes for non-defense discretionary spending; and 53 cents goes for entitlement spending.

We'll spend more on interest this year than we'll spend on Medicare.

When I consider these numbers, it makes me determined to do all that I can to decrease our debt even further.

That's why I believe that every fiscal decision we make in this Congress should be measured against the backdrop of how it will decrease our $5.7 trillion national debt. And I'm not the only one who believes that.

In fact, in testimony before the Senate Budget Committee this past January, CBO Director Crippen stated that ''most economists agree that saving the surpluses, paying down the debt held by the public, is probably the best thing that we can do relative to the economy.''

And on the very same day, Federal Reserve Chairman Greenspan said, ''my first priority would be to allow as much of the surplus to flow through into a reduction in debt to the public. From an economic point of view, that would be, by far, the best means of employing it.''

Lowering the debt sends a positive signal to Wall Street and to Main Street. It encourages more savings and investment which, in turn, fuels productivity and continued economic growth. It also lowers interest rates, which in my view, is a real tax reduction for the American people.

Furthermore, devoting on-budget surpluses to debt reduction is the only way we can ensure that our nation will not return to the days of deficit spending should the economy take a sharp turn for the worse or a national emergency arise.

As Alan Greenspan has testified before Congress, ''a substantial part of the surplus . . . should be allowed to reduce the debt, because you can always increase debt later if you wish to, but it's effectively putting away the surplus for use at a later time if you so choose.''

Some of my colleagues on the other side of the aisle oppose the tax cuts, preferring instead to use the money to increase spending. I believe that spending the surplus is an even worse use of the money.

Now, many have argued that putting the Social Security surplus in a ''lockbox'' will be enough to pay down our debt. However, I should remind my colleagues that in the near future, we might not have Social Security surpluses available for debt reduction, because we may need them for Social Security reform, especially if we go to a system of private accounts.

We cannot keep putting off our responsibilities. If we have the ability—like we do now—we have a moral obligation to pay back our debts.

We must face the fact that because of 30 years of irresponsible fiscal policies our national debt has increased 1,300%. During that time Congress and our Presidents weren't willing to pay for the things they wanted, or, in the alternative, do without those items they could not afford.

I agree with General Accounting Office (GAO) Comptroller General David Walker, who, in testimony before the House Ways and Means Committee last year, said:

> . . . this generation has a stewardship responsibility to future generations to reduce the debt burden they inherit, to provide a strong foundation for future economic growth, and to ensure that future commitments are both adequate and affordable. Prudence requires making the tough choices today while the economy is healthy and the workforce is relatively large—before we are hit by the baby boom's demographic tidal wave.

As most of my colleagues know, Congressional Budget Office (CBO) figures show that the United States will achieve a $26 billion on-budget surplus this current fiscal year, FY 2000.

However, it is of utmost importance that we oppose the temptation to squander this surplus.

In that regard, I have to commend Majority Leader TRENT LOTT for sticking to his guns on not moving forward on a fiscal year 2000 supplemental appropriations bill. He has stated his opposition to a separate bill, preferring instead, to include funding in the regular appropriations bills.

And we need to get moving on those bills quickly, especially because of the need for money to ensure our nation's defense readiness, our Kosovo peacekeeping mission and Colombia's drug eradication efforts.

All we need to do is look at the version of the supplemental that passed in the House of Representatives to see why we should not move forward with a supplemental bill. Indeed, the House started with the President's request of $5.1 billion, reported a bill out of the Appropriations Committee that was some $9 billion and passed a final bill that was $12.7 billion.

Imagine the size of the supplemental once the Senate got through with it?

The worst thing that Congress could do now is throw away any portion of that $26 billion on-budget surplus that was achieved in FY 2000 on non-emergency spending.

And another reason that we should not pass the supplemental is that it can be argued that $22 billion of the $26 billion on-budget surplus that Congress would be tapping into comes from the Medicare Part A trust fund.

Instead of squandering this surplus, let's use it to pay down the debt. It will be our first sizable on-budget surplus that we've been able to use for debt reduction in 40 years, and a truly historical accomplishment.

And let's continue to make history by using future on-budget surpluses to pay down our national debt.

Mr. President, I believe that if we can pass this amendment, and add it to the fine work that the Budget Committee Chairman has accomplished in this resolution—and with the promise from the Majority Leader on the supplemental—I believe we will have made a real difference.

We will have provided a decent budget that should address some of our most pressing problems, and, we will take whatever on-budget surplus dollars that come in and use them to reduce the national debt. Not spending increases, not tax breaks, but simply paying down the debt.

Mr. President, again, my amendment is simple: it takes the $150 billion in tax cuts assumed by this budget resolution and instead says to spend it on debt reduction. I urge my colleagues who believe that we should do all that we can to bring down our national debt to support this amendment.

Thank you Mr. President. I yield the floor.

MORNING BUSINESS

Mr. MURKOWSKI. Mr. President, I ask unanimous consent that there be a period for the transaction of morning business with Senators permitted to speak therein for up to 10 minutes each.

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

LEADERSHIP OF SOUTH DAKOTA BASKETBALL GREAT MIKE MILLER

Mr. DASCHLE. Mr. President, it is a great honor for me to represent the people of South Dakota in the United States Senate. They are the best resource in a state with an infinite number of tremendous attributes, and the best part of my job is getting to know and work with them on a daily basis.

I have often stood before my colleagues here in the Senate to recognize the accomplishments of South Dakotans. Many times, the names sound unfamiliar to those in this chamber. Today, however, I want to congratulate a young man who made the country stand up and take notice—and who showed the country how we play basketball in South Dakota. His name is Mike Miller, and, as every college basketball fan knows, he recently led the Florida Gators to the NCAA Division I National Championship basketball game. Although the Gators fell in a hard fought battle to the Michigan State Spartans, anyone who saw that game knows that Mike Miller is a very special basketball player.

Mike was named Most Outstanding Player in his region for the tournament. That is a tremendous feat for any college player and was made possible only because Mike's last-second shot against Butler advanced Florida and kept his team's hopes of reaching the championship game alive. His clutch play continued in every game of the tournament, making it easy to see why Mike was named the best player in his region. Remarkably, Mike did all of this as just a sophomore.

Mike Miller is from Mitchell—a leader in South Dakota high school basketball—and as a Kernel he played under the legendary Gary Munsen. Mike started learning about the game of basketball long before he got to high school, however. His uncle, Dakota Wesleyan great Alan Miller, is the all-time leading college scorer in South Dakota. And Mike's older brother Ryan, who played for Northern State, currently plays professionally in Australia. The Millers are a big part of the reason that growing up in Mitchell means growing up around basketball.

In a time when too many athletes seem to be more concerned with individual statistics than playing as a team, when the bottom line seems to matter more to some professionals than the love of the game, it's refreshing to see someone like Mike Miller on the court. Through the course of the tournament and the championship game in Indianapolis, Mike showed his opponents and the country how basketball is played in South Dakota—and how it should be played everywhere else. His unselfish play makes the players around him better; he has an uncanny ability to step up his game during crunch time; and he never stops working to improve. That's what he learned in Mitchell—that's what he learned in South Dakota—and that's what he's showing the college basketball world.

Although the Gators fell a few points shy the other night in Indiana, Mike Miller made us proud in South Dakota. He proved to the country what those at the Corn Palace and at Mitchell High already know—that Mike Miller is a champion. We are very proud to call him one of our own.

Let me, of course, congratulate the Michigan State Spartans and the University of Connecticut Huskies women's team for their championship seasons. But, on behalf of everyone who cheered for him, I would also like to take this opportunity to congratulate Mike, his team and his parents—Tom and Sheryl Miller of Mitchell—for the incredible run the Florida Gators had this season. It was fun to watch, and I know we all look forward to seeing more of Mike Miller in the years to come.

HEALTH CARE FOR MILITARY RETIREES

Mr. GORTON. Over the past few weeks, I have had the opportunity to sit down and listen to military retirees during their veterans service organizations' annual visit to Washington, DC. Without exception, access to health care was a priority for each and every group. As a retired officer in the Air Force Reserve, I understand the interest in and importance of this issue to those who dedicated a career to serving and defending our Nation—I speak not only of the service members themselves, but their spouses and dependent family members as well.

After listening to retirees' personal stories and policy presentations, as well as reading the numerous letters on health care legislation I receive each week from military retirees across Washington State, I am convinced that Congress, the President and the Department of Defense must address the issue of retirees' access to health care. In response to the requests of my military retiree constituents, I am cosponsoring Senate bills 915 and 2003, the ''Keep Our Promise to America's Military Retirees Act.''

In the past several years, I cosponsored and supported efforts to establish the Medicare subvention demonstration program, now known as Tricare Senior Prime, and the FEHBP demonstration program. The Tricare Senior Prime demonstration program allows Medicare-eligible retirees to receive care at military facilities with Medicare paying the Department of Defense for the costs of that care. Some retirees in my State of Washington have been able to participate in the Tricare Senior Prime demonstration program as Madigan Army Medical Center was one of the designated test sites. I have spoken with the Commanding Officer at Madigan, my staff has met at length with those overseeing the test at Madigan, as well as the participating retirees, and it appears the test is a significant success.

Two concerns I have heard about the Tricare Senior Prime program are that this is a demonstration and is scheduled to end in December of this year, and that Medicare's current reimbursement scheme to the Defense Department will not fiscally support a permanent program. Senate bill 915 will make the Tricare Senior Prime test program permanent and expand it nationwide to facilities not in the test. It is important for the Defense Department and Congress to act to ensure Tricare Senior Prime demonstration program does not expire at the end of this year and I will be working hard to ensure Tricare Senior Prime is maintained. I also intend to work to see that Medicare fairly reimburses the Defense Department so that the costs of the Tricare Senior Prime program do not impact the services' ability to care for active duty service members and their families.

Senate bill 2003, sponsored by Senators TIM JOHNSON, PAUL COVERDELL, and 24 other Senators, would entitle all retirees, and their widow or widower, access to the Federal Employee Health Benefit Plan (FEHBP), to which all federal non-military retirees have access. As I stated previously, I supported establishing the current FEHBP demonstration program. My support for the demonstration and my decision to cosponsor this bill is driven, to a great degree, by the fact that there are many retirees who do not live in close proximity to a military treatment facility, some due to base closures that shut down facilities in their area of the country. This legislation would provide retirees access to health care regardless of where they choose to live. S. 2003 will also expand access to Tricare to allow Medicare-eligible retirees.

One other issue that I know is of considerable concern to military retirees is the cost of prescription drugs. This concern is heightened, in a border State like Washington, by the disparity in drug prices between the United States and Canada—an issue on which I am working for a commonsense, straight-forward solution. Of interest to Medicare-eligible retirees is access to prescription drugs from DoD facilities or a mail-order program. I believe that it is only fair and appropriate for Congress to consider military retirees when debating the creation of a Medicare prescription drug benefit, which I support.

My cosponsorship of Senate bill 2003 and 915 is driven by the firm belief that Congress must address the current health care situation of military retirees. The President and Defense Department must be active participants in this matter. Military retirees dedicated their lives to defending our Nation and protecting our interests around the world—they are due a serious legislative response.

NATIONAL ORGAN TRANSPLANTATION ACT

Mr. DURBIN. Mr. President, I ask unanimous consent that a letter dated April 5, 2000, addressed to Senators LOTT and DASCHLE, be printed in the RECORD.

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

We are writing to lodge our strong objection to consideration of H.R. 2418 by the Senate. This bill would reauthorize the National Organ Transplantation Act (NOTA) in a manner that would adversely affect patients in many states including our own, who are desperately in need of organ transplants.

Every year, over 4,000 people die waiting for an organ transplant. The organ allocation policy established by the Organ Procurement and Transplantation Network (OPTN) has been inequitable. Patients with similar severities of illness are treated differently, depending on where they live or at which transplant center they are listed. Patients in some parts of the country wait much longer than patients in other regions, who have the same level of illness. So for some, the chance of dying before they actually receive a transplant is much higher than for others. Over the last 3 years, 97 people died while waiting for an organ transplant at the University of Chicago, 187 died while