

have 32 pending judicial nominations as well. Ultimately, once we figure out some way to allow these nominations to be considered, I am confident that most, or many, are going to receive unanimous votes if this body is just given the opportunity to vote.

I guess my point is, as I look at the 8 nominations and the 32 nominations, I urge my colleagues not to take this sort of blanket or scorched earth policy of not letting anybody through at all. We need to be reasonable and we need to work together on these nominations. If there is a concern, and if there are certain nominations that are not being considered, there are a lot of different ways we can get attention to those individuals. But this sort of blanket holding things back is something we need to address.

I hope the nominations, many of which are probably cleared on both sides, are not held hostage by a few. On this side of the aisle, we are prepared to consider the ambassadors, we are prepared to consider the judges, and we are prepared to vote on the chairmen of a whole range of committees, such as the Consumer Products Safety Commission, HUD nominations, and the list goes on. It is time for good faith and it is time to do our constitutional duty. These nominations are sent to us to be voted upon.

ABUSE OF IRAQI PRISONERS

Mr. FRIST. Mr. President, I want to also mention that yesterday the Senate Armed Services Committee held a day-long hearing to learn more about the abuse of the Iraqi prisoners at the Abu Ghraib prison. Many of us did not see all of the testimony, but we were able to review it over the course of the day. The committee received detailed testimony from Major General Antonio Taguba, the senior officer who investigated and reported on the Abu Ghraib prison abuses, and from a range of other Defense Department officials.

Today, the Intelligence Committee will be holding a closed hearing to explore matters under their jurisdiction related to these incidents. As we know, both committees met last week in a similar fashion. This afternoon, from 2 to approximately 5 o'clock, in S. 407, there will be an opportunity for all Senators to review photographs and evidence related to the prisoner abuse scandal. We will have the opportunity to view them. They will be there from 2 p.m. to 5 p.m. in S-407, after which they will be returned.

As I stated yesterday, it is our expectation that the Senate will be apprised of the ongoing investigations being conducted by the Department of Defense and of all the actions being taken to ensure these incidents never occur again.

To that end, I simply wish to reflect my perspective that the Defense Department has been very responsive to our requests. Secretary Rumsfeld, General Myers, and their senior aides have

updated us as events have unfolded, and they have been attentive to the Senate's requests and to their needs.

As the President said the other day, Secretary Rumsfeld—I agree with the President—has done a superb job as Secretary of Defense in very trying and challenging times. I am confident he is taking action to address these deplorable acts in a deliberate manner, in a transparent manner, and is taking all measures to ensure that these acts will never occur again.

EXTENDING CONDOLENCES TO THE FAMILY OF NICHOLAS BERG

Mr. FRIST. Mr. President, I wish to extend my condolences to the family of Nicholas Berg who, as we all know, was murdered yesterday in Iraq by kidnappers. We grieve for him, and we grieve for his family.

At the same time, the actions of his murderers are a reminder to us of what all our soldiers on a daily basis are undergoing. We must endeavor to bring these terrorists to justice as we work to bring democracy, peace, and the rule of law to Iraq.

Let us keep in mind all of this in the days and weeks ahead, which will be very challenging times for us all.

PASSAGE OF FSC/ETI

Mr. FRIST. Mr. President, I wish to comment, because I did not have the opportunity last night, on the FSC/ETI JOBS bill that was passed last night after a long time on the floor and after a number of amendments, an approximately equal number considered from the Republican and Democratic side. It is a real achievement for this body. It was passed, and it is critical to accelerating jobs and production of jobs in this country.

The bill we passed will bring our trade and tax laws into compliance with our trade agreements finally. As many of my colleagues know, the Europeans are already imposing tariffs on our exports. That Euro tax started in March at 5 percent, and until we act—we have acted in the Senate, and now the House must act, but we must act as a Congress—these will increase 1 percent each month if we do not act.

I do want to mention the energy provisions that are part of this bill that were added on the Senate floor—too many for me to refer to now but provisions such as tax credits for the production of electricity from renewable sources, such as wind and solar. It contains tax incentives to promote the production and use of alternative fuels motor vehicles using natural gas. It includes added incentives to promote the use of clean coal and advanced clean coal technology. There are important incentives to increase the supply of natural gas, and the list goes on.

The Senate has acted, and I look forward to the House passing its version of this legislation so that the House and Senate can go to conference and we

can produce a conference bill without much delay and bring it back to the Senate.

There is a lot going on in the Senate both on and off the floor. I appreciate the cooperation of my colleagues as we move America forward.

The ACTING PRESIDENT pro tempore. The Democratic leader is recognized.

AMBASSADORIAL NOMINATIONS

Mr. DASCHLE. Mr. President, this morning the distinguished majority leader made some comments regarding ambassadorial nominations. This is an important issue, and I thought I would take a minute to talk about it and respond to some of the concerns we heard expressed on the floor over the last several days.

Last Thursday, I was pleased the Senate confirmed 20 ambassadors, including Ambassador Negroponte for the tough assignment in Iraq after June 30. I note Ambassador Negroponte's nomination was completed with near record speed, given that he was confirmed 1 week after he was nominated by the President. The other 19 ambassadors were confirmed less than a week after they were reported out of the Foreign Relations Committee.

By confirming those 19, the Senate filled three vacant U.S. Embassies. We had hoped to confirm other career Foreign Service officers for the vacancies that exist, including the Embassy in Nepal, which has been the site of some considerable violence over the last several months. Unfortunately, I am told there is still an objection to his confirmation from the Republican side, meaning the Embassy will continue to be vacant for the foreseeable future.

At the moment, I am told the State Department has nearly 170 Embassies around the world. Eight are currently vacant, meaning they have no confirmed ambassador. Of those eight, the President has chosen not to fill two of them, and two are currently too dangerous to fill. One is awaiting action in the Foreign Relations Committee, and the Republicans are objecting to another. The last two, in Sweden and Finland, are vacant because the political appointees who previously served in those posts did not serve out the terms they were committed to serve.

Last week, several of our Republican friends noted that the vacancies send a negative signal to these countries. I hope the President will move with dispatch to fill these vacancies as soon as possible. I also hope the President will work with us to address another problem: Ambassadors pulled out of the duties for which they were confirmed so that they can assume assignments in or related to Iraq.

Here are three examples. Our Ambassador to the Philippines has not been in Manila for the last several months, even though that country, which is hosting American forces that are training Filipino forces, just went through a

tight national election. Our Ambassador to Kuwait is resident in Baghdad. And our Ambassador to the Bahrain has been in Iraq since February.

That is not to say these jobs they are performing in Iraq are not important; they are. But if we are going to come to the floor and call attention to problems filling vacancies in the diplomatic corps, we ought to be sure we are considering the whole picture.

MEDICARE PRESCRIPTION DRUG DISCOUNT CARD

Mr. DASCHLE. Mr. President, this morning in the New York Times, there was yet another reminder of the great difficulty seniors are having in dealing with the Medicare prescription drug discount card, so-called. I noticed with some amusement a number of our colleagues on the other side of the aisle came to the floor highly critical of those of us who have expressed skepticism and concern about the drug card. Some have even expressed the belief that our motivation in coming to the floor to talk about these shortcomings in the drug card and the prescription drug benefit were politically motivated.

The New York Times has an article this morning quoting people who have nothing to do with politics. The title of the article is "73 Options for Medicare Plan Fuel Chaos, Not Prescriptions."

I ask unanimous consent that the article be printed in the RECORD.

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

[From the New York Times, May 12, 2004]

73 OPTIONS FOR MEDICARE PLAN FUEL CHAOS, NOT PRESCRIPTION (By John Leland)

When Mildred Fruhling and her husband lost their prescription drug coverage in 2001, they suddenly faced drug bills of \$7,000 a year. Mrs. Fruhling, now 76, began scrambling to find discounts on the Internet, by mail order, from Canada and through free samples from her doctors.

"It's the only way I can continue to have some ease in my retirement," she said.

Last week, when the federal government rolled out a new discount drug program, Mrs. Fruhling studied her options with the same thoroughness. What she found, she said, was confusion: 73 competing drug discount cards, each providing different savings on different medications, and all subject to change.

"I personally feel I can do better on my own," she said. But she added, "At this point, I don't think anyone can make an evaluation."

Even before they go into effect on June 1, the cards—which are approved by Medicare but offered by various companies and organizations—have been the subject of heated political debate, an AARP advertising campaign about how confusing they are and anxious speculation from those they are supposed to help. Among retirees of different income groups interviewed last week, the initial reaction was incomprehension.

"Even the person who came to explain it to us didn't understand it," said Mary Shen, 77, at the Whittaker Senior Center on Manhattan's Lower East side. "It's not fair to expect seniors, who have enough difficulties already, to have to figure this out."

Shirley Brauner, 75, pushed a metal walker through the center's lunchroom. "All I've got to say is they confuse the elderly, including me," she said. "I'm furious. They're taking advantage of the seniors. How can the seniors understand it?"

The prescription drug discount cards are a prelude to the Medicare Prescription Drug, Improvement and Modernization Act, which will provide broad drug coverage starting in 2006. The federal government projects that 7.3 million of Medicare's 41 million participants will sign up for the cards.

Those who wish to do so, however, face the daunting task of choosing the right card.

"What it's like is a bunch of confusion," said Katharine Roberts, 77, who said she had not been to a movie in six years, in part because of her drug expenses. "You might find you really need three cards, and you can only choose one."

The cards are a 19-month stopgap measure to provide discounts of 10 percent to 25 percent for Medicare participants who have no other prescription drug coverage. In addition, low-income participants are eligible for subsidies of \$600 a year.

The Department of Health and Human Services approved 28 companies or organization to issue cards; among them are AARP, insurance companies and health maintenance organizations. Cards cost up to \$30 a year. Each card provides different discounts on different drugs, and is accepted by different pharmacies. Participants can choose only one.

To help people sort through the options, Medicare and a company called DestinationRx set up a database on its Web site, medicare.gov, that lists the prices charged under various plans for whatever medications a user types in. People can get similar help by telephone at 1-800-MEDICAR. But some providers complained that the prices on the site were inaccurate, and some cards are not listed at all.

For many retirees, it is too much.

"I'm 85, do I have to go through this nonsense?" asked Florence Daniels, a retired engineer who said she received less than \$1,000 a month from Social Security, of which she paid \$179 a month for supplemental medical insurance. She gets drugs through a New York State program, which provides any prescription for \$20 or less. To make ends meet and afford her drugs, she said she bought used clothing and put off buying new glasses. Some of her friends travel by bus to Canada to buy drugs; others do without, she said.

Ms. Daniels did not use the government Web site to compare drug cards, in part because she cannot afford a computer. "I'm trying to absorb all the information, but it's ridiculous," she said. "Not just ridiculous, it's scary. If there was a single card and it was administered by Medicare, and it got the cost of drugs down—wonderful, marvelous. But with these cards, the only thing we know is that we'll have to pay money to other people to administer what we can get and can't get."

The discount program, which is financed largely by the cards' sponsors, reflects the Bush administration's desire to open Medicare to market principles without allowing participants to import drugs from other countries, which many Democrats favored.

Mark B. McClellan, an administrator at the Center for Medicare and Medicaid Services, said the complexity of the plan encouraged competition. "We're seeing more plans offering better benefits," he said, estimating that people will be able to save 15 percent or more using the cards.

But the complexity of choices will keep many people away from the program, said Marilyn Moon, director of health at the American Institutes for Research, a non-profit research organization in Washington.

Often, the discount provided by the cards is not as good as what people can get from existing state programs, union plans or consumer groups, said Robert M. Hayes, president of the Medicare Rights Center, a non-profit organization that helps individuals with Medicare problems.

Sydney Bild, 81, a retired doctor in Chicago, compared the discount cards with the prices he paid ordering his drugs by mail from Canada. Dr. Bild pays \$4,000 to \$5,000 for year for five medications. When he checked the government Web site, he said the best plans were about 50 percent to 60 percent higher than what he was paying.

But Dr. Bild said his main objection to the new plans was that companies could change prices on drugs, or change the drugs covered. Medicare requires plans to cover only one drug in each of 209 common categories. Consumers can change cards only once a year. Committing to a card is "like love—it's a sometime thing," Dr. Bild said "What if I chose one? They could drop my drugs two weeks later."

Companies began soliciting customers for their discount drug cards last week. When the first pamphlets arrived at Beverly Lowy's home in New York City, Ms. Lowy said, she looked at them carefully. She does not have drug coverage and last year spent about \$3,000 on prescription drugs, but the more brochures she read, Ms. Lowy said, the less clear things became.

"You really have to be a rocket scientist," Ms. Lowy, 71, said. "It takes time, energy, and you don't even save money. I thought, 'This one is offering this, this one is offering that.' Finally I decided this isn't for me."

At the Leonard Covello Senior Center in East Harlem, the new cards seemed opaque. Ramon Velez, 72, a retired taxi driver, said he had watched AARP advertisements in which people read the dense language of the federal Medicare bill.

"I was laughing at the people in the ads, but it's true," Mr. Velez said "Everyone's confused."

Mr. Velez receives \$763 a month from Social Security, and often skips his psoriasis medication because he cannot afford the \$45 co-payment under his Blue Cross/Blue Shield plan. He wondered if the new drug cards could save him money.

"But it's very confusing," he said "I'd go to the Social Security office to ask about the cards, but I don't think they'd know."

Alejandro Sierra, 67 a retired barber, paced around the center's pool table. Mr. Sierra takes six medications for diabetes and complications from cataracts and colon cancer, and sometimes skips a medication because he cannot afford it.

"I'm interested in the cards," he said. "But I can't figure it out on the computer, because I can't see."

Carlos Lopez, the director of the center, said the cards had so far produced little but anxiety. Mr. Lopez asked participants to bring any applications to him before signing them, and warned them about people selling phony cards.

"They're not nervous, but concerned," he said. "They feel, why now? Why do I suddenly need a card for medications?"

Mr. DASCHLE. Mr. President, to excerpt from this article, it talks about:

Last week, when the federal government rolled out a new discount drug program, Mrs. Fruhling—

Mildred Fruhling studied her options with the same thoroughness with which she has been reviewing all of this now for some time. "What she found," according to the article, "was confusion: 73 competing drug discount cards,