

stripped of their rights to vote and to run for public office. Several were sentenced to life in prison. Nothing was done to prosecute the police officers who fired on the protesters. The situation had gone from bad to worse.

Then suddenly, less than 2 weeks ago, the Ethiopian Government announced the pardon and release of 38 opposition leaders. I am pleased that Prime Minister Meles heeded the pleas of the Ethiopian people and the international community and released these prisoners. The fact is, none of them should have been arrested or tried in the first place. Their release was long overdue and is welcome.

I hope the government acts expeditiously to release the remaining political detainees, and bring to justice police officers who used excessive force. I also hope the negotiations that resulted in the prisoners' release will lead to further discussions between the government and the leaders of the opposition, to ensure that their political rights are fully restored and that future elections are not similarly marred.

While this news is positive, it comes at a time when journalists and representatives of humanitarian organizations report human rights abuses of civilians, including torture, rape and extrajudicial killings, by Ethiopian security forces, including those trained and equipped by the U.S., in the Ogaden region.

Congressman DONALD PAYNE, chairman of the Subcommittee on Africa and Global Health, and a vocal defender of human rights and democracy in Ethiopia, inserted into the CONGRESSIONAL RECORD a June 18, 2007, New York Times article that described these abuses.

This situation is also addressed in the Senate version of the fiscal year 2008 State, Foreign Operations Appropriations bill and report, which were reported by the Appropriations Committee on July 10. The Appropriations Committee seeks assurance from the State Department that military assistance for Ethiopia is being adequately monitored and is not being used against civilians by units of Ethiopia's security forces. We need to know that the State Department is investigating these reports. We also want to see effective measures by the Ethiopian Government to bring to justice anyone responsible for such abuses.

Unfortunately, it appears that the Bush administration has made little effort to monitor military aid to Ethiopia. It is no excuse that the Ethiopian military has impeded access to the Ogaden, as it has done. In fact, this should give rise to a sense of urgency. If we cannot properly investigate these reports, and if the Leahy law which prohibits U.S. assistance to units of foreign security forces that violate human rights is not being applied because the U.S. Embassy cannot determine the facts, then we should not be supporting these forces.

As if the allegations of human rights violations were not enough, the New York Times reported on July 22 that the Ethiopian military is blocking food aid to the Ogaden region. The article also claimed that the military is "siphoning off millions" of dollars intended for food aid and a UN polio eradication program. A subsequent article on July 26 indicated that the World Food Program and the Ethiopian Government have reached agreement, after weeks of discussions, on a process for getting food aid through the military blockade to civilians in the Ogaden region. But the same article also reported that regional Ethiopian officials have expelled the Red Cross.

During the Cold War we supported some of the world's most brutal, corrupt dictators because they were anti-Communist. Their people, and our reputation, suffered as a result. Now the White House seems to support just about anyone who says they are against terrorism, no matter how undemocratic or corrupt. It is short sighted, it tarnishes our image, and it will cost us dearly in the long term.

Prime Minister Meles has been an ally against Islamic extremism in the Horn of Africa, for which we are grateful. But there are serious concerns with Ethiopia's U.S.-supported military invasion of Somalia. It has led to some of the same problems associated with the Bush administration's misguided decision to invade Iraq without a plan for leaving the country more stable and secure than before the overthrow of Saddam. Iraq's partition now seems only a matter of time, and it is hard to be optimistic that Somalia a year from now will be any more secure, or any less of a threat to regional stability, than before the influx of Ethiopian troops.

Ethiopia is also a poor country that has faced one natural or man-made disaster after another, and the U.S. has responded with hundreds of millions of dollars in humanitarian and other assistance. We have a long history of supporting Ethiopia and its people, and we want to continue that support. But our support to the government is not unconditional. We will not ignore the unlawful imprisonment of political opponents or the mistreatment of journalists. We will not ignore reports of abuses of civilians by Ethiopian security forces

WIRED FOR HEALTH CARE QUALITY ACT

Mr. GRASSLEY. Mr. President, I want to take a few minutes to explain the action I am taking related to S. 1693, the Wired for Health Care Quality Act. Today, with great reluctance, I have asked Republican Leader MCCONNELL to consult with us prior to any action regarding the consideration of this bill, which the Health, Education, Labor, and Pensions Committee reported on August 1, 2007.

The Wired for Health Care Quality Act would encourage the development

of interoperable standards for health information technology, IT, offer incentives for providers to acquire qualified health IT systems to improve the quality and efficiency of health care, and facilitate the secure exchange of electronic health information. The bill also includes provisions to require all federal agencies to comply with standards and specifications adopted by the Federal Government for purposes determined appropriate by the Secretary of Health and Human Services, HHS, and to ensure quality measurement and reporting of provider performance under the Public Health Service Act.

I fully support fostering the adoption of health information technology to assist providers in making quality improvements in our health care system. In 2005, Senator BAUCUS and I introduced the Medicare Value Purchasing Act, S. 1356, in conjunction with Senators ENZI and KENNEDY's legislation known as the Better Healthcare Through Information Technology Act, S. 1355. Although the Medicare Value Purchasing Act did not pass in its entirety, provisions based on our bill have been enacted in other legislation.

Medicare is the single largest purchaser of health care in the Nation, so adopting quality payments in Medicare influences the level of quality in all of health care. We have seen time and time again how when Medicare leads, the other public and private purchasers follow. Medicare can drive quality improvement through payment incentives. The adoption of information technology is also desirable, both to facilitate the reporting of quality measures and to increase the efficiency and quality of our health care system. These two concepts should work together.

A number of legislative initiatives have been enacted in Medicare in recent years to promote the development and reporting of quality measures. The Medicare Prescription Drug, Improvement, and Modernization Act of 2003, MMA, included provisions that required the reporting of quality measures for inpatient hospitals. The Deficit Reduction Act of 2005 expanded the reporting of quality measures for inpatient hospital services and extended quality measures to home health settings.

Last year, the Tax Relief and Health Care Act of 2006, TRHCA, extended quality measure reporting to hospital outpatient services and ambulatory service centers. TRHCA also authorized the 2007 Physician Quality Reporting Initiative, PQRI, a voluntary quality reporting system in Medicare for physicians and other eligible health care professionals. Beginning July 1, 2007, the new PQRI program provides Medicare incentive payments for the successful reporting of quality measures that have been adopted or endorsed by a consensus organization. The Centers for Medicare and Medicaid Services, CMS, has worked diligently with the

American Medical Association Physician Consortium for Performance Improvement, the Ambulatory Quality Alliance, and the National Quality Forum in the development, adoption, endorsement, and selection of quality measures for this program.

Considerable time and effort have been devoted to the development and reporting of quality measures for various providers in Medicare under the Social Security Act. Many of these programs have now been up and running for some time. This is why I am greatly troubled that, as currently drafted, the Wired for Health Care Quality Act would require the development and reporting of quality measures under the Public Health Service Act.

It is hard to comprehend how the quality measurement system created by S. 1693 would interact with the various quality measurement programs that have already been enacted by Congress under the Social Security Act and implemented by CMS. Creating two different quality measurement systems would have the potential to create differing or even duplicative quality measurement systems which could drastically interfere with our common goal of improving the quality of health care in this country.

Under the bill, the Secretary also would establish Federal standards and implementation specifications for data collection. Within three years of their adoption, all Federal agencies would have to implement these standards according to the specifications. While this sounds appealing, I am concerned about the reality of implementing such standards—across the myriad programs at the Departments of Health and Human Services, Veterans Affairs, Defense, and all the other Federal agencies that may have health care data. It would be an enormous challenge. Agencies collect data for many different purposes, using many different data systems. Six years ago, when Secretary Thompson first arrived at the Department of Health and Human Services, the department had eight different computer systems. Presumably other agencies similarly have multiple systems. All will be expensive and difficult to retrofit to meet new federal standards.

The bill also would require the HHS Secretary to provide federal health data, including the Medicare claims databases, to at least three “Quality Reporting Organizations” that agreed to provide public reports based on the data.

The Quality Reporting Organizations would be required to release regular reports on quality performance that are provider- and supplier-specific. Any organization, including those with commercial interests, could request that the Quality Reporting Organizations compile specific reports based on the requester’s methodology. So, for example, drug companies could request data on physician prescribing patterns to determine which physicians their salespeople should target.

In overseeing Medicare, Congress is working to bring more quality reporting into the program. As I mentioned before, just this past December Congress enacted the Tax Relief and Health Care Act of 2006, which implemented a physician pay-for-reporting program in Medicare. The Finance Committee has been working for some time now to phase-in the use of quality measures with various providers. Eventually, I hope that Medicare can compensate providers appropriately for providing high-quality care.

I am, however, concerned about public disclosure of provider-specific information without appropriate safeguards. If not used properly, the data could be misinterpreted. For example, hospitals that specialize in very difficult cases might seem to provide lower quality of care than those treating less severe cases. This would set up the wrong incentives for hospitals and other health care providers.

I agree that it would be helpful to standardize data reporting throughout the federal government, and to use that data appropriately to assess the quality of care provided by clinicians, hospitals, and other health care organizations. At the same time, I have serious concerns about how this bill is structured with respect to the disclosure and use of the data from federal health entitlement programs which are within the sole jurisdiction of the Finance Committee.

I welcome the opportunity to work with the sponsors of S. 1693, Senators KENNEDY, ENZI, CLINTON, and HATCH, along with members of the Health, Education, Labor, and Pensions Committee on this matter. I had hoped we could work out an agreement on legislative language that was acceptable to both the Finance Committee and the HELP Committee before the bill was on the floor. I appreciate the efforts that my colleagues, Senators ENZI and KENNEDY, have undertaken with us over the last month to resolve the concerns of the Finance Committee. However, I remain deeply troubled that, as currently drafted, the Wired for Health Care Quality Act could end up unintentionally delaying or frustrating the goal we all share of improving the quality of health care for all Americans.

REPORT OF SEC INVESTIGATION

Mr. GRASSLEY. Mr. President, today along with Senator SPECTER, I present the findings of a joint investigation by the minority staffs of the Committees on Finance and the Judiciary. It will be posted today on the Finance Committee Web site. I urge all my colleagues to read this important report.

Together, our committees conducted an extensive investigation of allegations raised by former Securities and Exchange Commission attorney Gary Aguirre concerning the SEC and insider trading at a major hedge fund.

During the course of this investigation, the staff reviewed roughly 10,000 pages of documents and conducted over 30 witness interviews. The Judiciary Committee held three related hearings. Our joint findings confirm a series of failures at the SEC: (1) Failures in its enforcement division, (2) failures in personnel practices, and (3) failures at the Office of Inspector General.

There was, however, one bright spot. The Chairman of the Securities and Exchange Commission cooperated fully with our inquiry. I would like to take a moment to thank Chairman Christopher Cox for recognizing the value of congressional oversight instead of resisting it like most other agencies do. In my years in the Senate, I have overseen many investigations of Federal agencies. I am happy to say that Chairman Cox—who inherited these problems in 2005—was a model of transparency and accountability.

I also thank Senator SPECTER for his hard work on this issue, and for the way our committees were able to work together so effectively.

Our investigation focused on three allegations: (1) The SEC mishandled its investigation of a major hedge fund, Pequot Capital Management. (2) The SEC fired Gary Aguirre, the lead attorney in the Pequot investigation, after he reported evidence of political influence corrupting the investigation. (3) The SEC’s Office of Inspector General failed to thoroughly investigate Aguirre’s allegations.

In 2001, Pequot made about \$18 million in just a few weeks of trading in advance of the public announcement that General Electric was acquiring Heller Financial. Pequot accomplished this by buying over a million shares of Heller Financial and shorting GE stock. The New York Stock Exchange highlighted these suspicious and highly profitable trades for the SEC.

When the SEC finally got around to investigating the matter 3 years later, the only full-time attorney working on it, Mr. Aguirre, was up against an army of lawyers from Pequot and Morgan Stanley.

Those lawyers could easily bypass the commission staff and go directly to the Director of Enforcement. In other words, attorneys from Wall Street law firms had better access to SEC management than the staff attorney working on the case, and they used it.

When Aguirre wanted to question Wall Street executive John Mack, his supervisors blocked his efforts and delayed the testimony as long as they could. Mack was about to be hired as the CEO of Morgan Stanley. This raised a critical question in our investigation: Did Mack get special treatment, and if so, why? Gary Aguirre was told by one of his supervisors that it was because of his “political connections.”

Our investigation uncovered no evidence that Mack’s special treatment was due to partisan politics. However, internal e-mails do show that SEC