

which nominations were received by the Senate and appeared in the Congressional Record on May 13, 2010.

Navy nomination of Axel L. Steiner, to be Lieutenant Commander.

Navy nomination of Clifford R. Shearer, to be Commander.

*Nomination was reported with recommendation that it be confirmed subject to the nominee's commitment to respond to requests to appear and testify before any duly constituted committee of the Senate.

(Nominations without an asterisk were reported with the recommendation that they be confirmed.)

INTRODUCTION OF BILLS AND JOINT RESOLUTIONS

The following bills and joint resolutions were introduced, read the first and second times by unanimous consent, and referred as indicated:

By Mrs. HAGAN (for herself and Mr. FRANKEN):

S. 3543. A bill to amend title XVIII of the Social Security Act to expand access to medication therapy management services under the Medicare prescription drug program; to the Committee on Finance.

By Ms. MIKULSKI:

S. 3544. A bill to amend the Immigration and Nationality Act to modify the requirements of the visa waiver program and for other purposes; to the Committee on the Judiciary.

By Ms. LANDRIEU:

S. 3545. A bill to require a study of the effect of a 6-month moratorium on new deep-water drilling in the Gulf of Mexico on small businesses; to the Committee on Small Business and Entrepreneurship.

By Mr. SCHUMER:

S. 3546. A bill to create a penalty for automobile insurance fraud, and for other purposes; to the Committee on the Judiciary.

By Mr. NELSON of Florida:

S. 3547. A bill to prohibit price gouging relating to gasoline and diesel fuels in areas affected by major disasters, and for other purposes; to the Committee on Commerce, Science, and Transportation.

By Mr. CASEY (for himself, Mr. BROWN of Ohio, Mr. KERRY, Mr. LEVIN, Mr. WHITEHOUSE, Ms. STABENOW, Mr. LEAHY, Mr. DODD, Mr. FRANKEN, Mr. BURRIS, and Mr. AKAKA):

S. 3548. A bill to provide for the extension of premium assistance for COBRA benefits; to the Committee on Finance.

By Mr. TESTER (for himself, Mr. BENNETT, Mr. BAYH, and Mr. VITTER):

S. 3549. A bill to amend the effective date of the gift card provisions of the Credit Card Accountability Responsibility and Disclosure Act of 2009; to the Committee on Banking, Housing, and Urban Affairs.

By Mr. MERKLEY (for himself, Mr. CRAPO, Mr. BAUCUS, Mr. TESTER, and Mr. WYDEN):

S. 3550. A bill to amend the Federal Water Pollution Control Act to establish within the Environmental Protection Agency a Columbia Basin Restoration Program; to the Committee on Environment and Public Works.

SUBMISSION OF CONCURRENT AND SENATE RESOLUTIONS

The following concurrent resolutions and Senate resolutions were read, and referred (or acted upon), as indicated:

By Mr. FEINGOLD (for himself, Ms. KLOBUCHAR, and Mr. FRANKEN):

S. Res. 573. A resolution urging the development of a comprehensive strategy to ensure stability in Somalia, and for other purposes; to the Committee on Foreign Relations.

By Mr. REID (for himself and Mr. MCCONNELL):

S. Res. 574. A resolution relative to the memorial observances of the Honorable Robert C. Byrd, late a Senator from the State of West Virginia; considered and agreed to.

By Mr. REID (for himself and Mr. MCCONNELL):

S. Con. Res. 65. A concurrent resolution providing for the use of the catafalque situated in the Exhibition Hall of the Capitol Visitor Center in connection with memorial services to be conducted in the United States Senate Chamber for the Honorable Robert C. Byrd, late a Senator from the State of West Virginia; considered and agreed to.

ADDITIONAL COSPONSORS

S. 311

At the request of Mrs. BOXER, the name of the Senator from Illinois (Mr. BURRIS) was added as a cosponsor of S. 311, a bill to prohibit the application of certain restrictive eligibility requirements to foreign nongovernmental organizations with respect to the provision of assistance under part I of the Foreign Assistance Act of 1961.

S. 941

At the request of Mr. CRAPO, the name of the Senator from New Hampshire (Mr. GREGG) was added as a cosponsor of S. 941, a bill to reform the Bureau of Alcohol, Tobacco, Firearms, and Explosives, modernize firearm laws and regulations, protect the community from criminals, and for other purposes.

S. 1450

At the request of Mr. ENSIGN, the name of the Senator from Maine (Ms. COLLINS) was added as a cosponsor of S. 1450, a bill to enable State homes to furnish nursing home care to parents any of whose children died while serving in the Armed Forces.

S. 1674

At the request of Mr. WYDEN, the name of the Senator from Minnesota (Ms. KLOBUCHAR) was added as a cosponsor of S. 1674, a bill to provide for an exclusion under the Supplemental Security Income program and the Medicaid program for compensation provided to individuals who participate in clinical trials for rare diseases or conditions.

S. 2816

At the request of Mr. BUNNING, the name of the Senator from Texas (Mrs. HUTCHISON) was added as a cosponsor of S. 2816, a bill to repeal the sunset of the Economic Growth and Tax Relief Reconciliation Act of 2001 with respect to the expansion of the adoption credit and adoption assistance programs and to allow the adoption credit to be claimed in the year expenses are incurred, regardless of when the adoption becomes final.

S. 3034

At the request of Mr. SCHUMER, the names of the Senator from Louisiana

(Ms. LANDRIEU) and the Senator from Delaware (Mr. KAUFMAN) were added as cosponsors of S. 3034, a bill to require the Secretary of the Treasury to strike medals in commemoration of the 10th anniversary of the September 11, 2001, terrorist attacks on the United States and the establishment of the National September 11 Memorial & Museum at the World Trade Center.

S. 3058

At the request of Mr. DORGAN, the name of the Senator from Rhode Island (Mr. REED) was added as a cosponsor of S. 3058, a bill to amend the Public Health Service Act to reauthorize the special diabetes programs for Type I diabetes and Indians under that Act.

S. 3227

At the request of Mr. HATCH, the name of the Senator from California (Mrs. BOXER) was added as a cosponsor of S. 3227, a bill to authorize the Archivist of the United States to make grants to States for the preservation and dissemination of historical records.

S. 3246

At the request of Mr. WYDEN, the name of the Senator from South Dakota (Mr. JOHNSON) was added as a cosponsor of S. 3246, a bill to exclude from consideration as income under the Native American Housing Assistance and Self-Determination Act of 1996 amounts received by a family from the Department of Veterans Affairs for service-related disabilities of a member of the family.

S. 3255

At the request of Mrs. LINCOLN, the name of the Senator from Massachusetts (Mr. KERRY) was added as a cosponsor of S. 3255, a bill to amend title XVIII of the Social Security Act to provide coverage for custom fabricated breast prostheses following a mastectomy.

S. 3329

At the request of Mr. LAUTENBERG, the name of the Senator from Colorado (Mr. BENNET) was added as a cosponsor of S. 3329, a bill to provide triple credits for renewable energy on brownfields, and for other purposes.

S. 3434

At the request of Mr. BINGAMAN, the name of the Senator from Maryland (Mr. CARDIN) was added as a cosponsor of S. 3434, a bill to provide for the establishment of a Home Star Retrofit Rebate Program, and for other purposes.

S. 3477

At the request of Mr. WEBB, the name of the Senator from Nebraska (Mr. JOHANNES) was added as a cosponsor of S. 3477, a bill to ensure that the right of an individual to display the Service Flag on residential property not be abridged.

S. 3479

At the request of Mrs. HAGAN, the names of the Senator from California (Mrs. FEINSTEIN) and the Senator from Ohio (Mr. BROWN) were added as cosponsors of S. 3479, a bill to authorize

the Secretary of Health and Human Services, acting through the Director of the Centers for Disease Control and Prevention, to establish and implement a birth defects prevention, risk reduction, and public awareness program.

S. 3541

At the request of Mrs. FEINSTEIN, the name of the Senator from Florida (Mr. NELSON) was added as a cosponsor of S. 3541, a bill to prohibit royalty incentives for deepwater drilling, and for other purposes.

S. RES. 554

At the request of Mr. ENZI, the name of the Senator from Utah (Mr. HATCH) was added as a cosponsor of S. Res. 554, a resolution designating July 24, 2010, as "National Day of the American Cowboy".

STATEMENTS ON INTRODUCED BILLS AND JOINT RESOLUTIONS

By Mrs. HAGAN (for herself and Mr. FRANKEN):

S. 3543. A bill to amend title XVIII of the Social Security Act to expand access to medication therapy management services under the Medicare prescription drug program; to the Committee on Finance.

Mrs. HAGAN. Mr. President, today, I am proud to introduce the Medication Therapy Management, MTM, Expanded Benefits Act of 2010, with my colleague from Minnesota, Senator FRANKEN.

A recent analysis conducted by the New England Healthcare Institute estimates that the overall cost of medication nonadherence is as much as \$290 billion per year. According to a recent article published in the *New England Journal of Medicine*, over \$100 billion is spent annually on avoidable hospitalizations because patients do not take their medications correctly.

Not only does nonadherence cost our system billions of dollars, nonadherence to medication regimens also affects the quality of life for seniors and may lead to early death. The elderly typically take many more prescription medicines than the general population and therefore are at greater risk for problems associated with improper use of medications. For example, the same *New England Journal of Medicine* article I just reference found that better adherence to antihypertensive treatment alone could prevent 89,000 premature deaths in the U.S. annually.

With as much as one half of all patients in the U.S. not following their doctors' orders regarding their medications, medication therapy management could help reduce some of the wasted health care costs in our system.

North Carolina has implemented some very successful MTM programs.

The Asheville Project, which focuses on diabetes, asthma, and cardiovascular disease, has seen improved health outcomes and significant savings among city employees since it began in 1997. For example, in the Asheville Project's diabetes MTM

Project, they have seen a decrease in medical costs of between \$1,622 to \$3,356 per patient per year; a decrease in insurance claims of \$2,704 per patient in year 1 and a \$6,502 decrease in year 5; a 50 percent decrease in use of sick days; and increased productivity gains estimated at \$18,000 annually.

In 2007, the North Carolina Health and Wellness Trust Fund Commission launched an innovative statewide program, Checkmeds NC, to provide MTM services to North Carolina seniors. During the program's first year, more than 15,000 North Carolina seniors and 285 pharmacists participated. The seniors bring all of their prescriptions, over-the-counter medicines, vitamins and supplements to the pharmacy to be thoroughly reviewed in a one-on-one session. The pharmacist follows up and educates the patient about his or her medication regimen. The program saved an estimated \$10 million, and countless health problems were avoided.

During consideration of health care reform, I was pleased to have successfully secured language in the bill that built off these North Carolina models and implemented MTM nationally for seniors suffering from two or more chronic conditions.

The bill I am introducing today takes MTM one step further. Specifically, this bill would expand MTM eligibility to seniors with any chronic condition that accounts for high spending in our health care system, such as heart failure and diabetes. Currently, only 12.9 percent of Part D beneficiaries are eligible under the MTM criteria for multiple chronic conditions. However, of those, more than 85 percent have chosen to participate in the benefit. Clearly this program is very popular and widely utilized by those who are already eligible. By expanding eligibility to more seniors, MTM will certainly result in Medicare savings.

The bill also ensures access to MTM for seniors at a pharmacy or with a qualified health care provider of their choice.

To ensure pharmacists and health care providers are able to provide MTM to seniors, this bill ensures they are appropriately reimbursed for their time and service. This provision will permit pharmacies and other health care providers to spend considerable time and resources evaluating a person's drug routine and educating them on proper usage—all critical components of a successful MTM program.

Finally, this bill would establish standards for data collection to evaluate and improve the Part D MTM benefit.

The value of MTM is widely known and discussed. I am proud that North Carolina is a leader in this arena. Expansion of MTM to more seniors will no doubt improve their overall health, while at the same time reducing waste in our health care system.

I urge my colleagues to support this bill.

Mr. FRANKEN. Mr. President, I am proud today to be joining Senator HAGAN in introducing the MTM Expanded Benefits Act.

We all know that prescription drugs are an essential part of health care. What a lot of people don't know is that only about 50 percent of Americans typically take their medicines as prescribed. This means that too often, the benefits of these important therapies aren't fully realized. According to a recent article in the *New England Journal of Medicine*, over \$100 billion is spent annually on avoidable hospitalizations because patients don't take their medications correctly.

The MTM Expanded Benefits Act would help improve the care for seniors by increasing access to the medication therapy management benefit—also known as MTM—in the Medicare Part D prescription drug program.

Medication therapy management is a proven set of services that helps patients get the best possible results from their medications. MTM services are provided by pharmacists who work with patients and their health care providers to make sure that seniors are taking medications as they should be. Through MTM, patients get focused education to make sure they understand their medications—what conditions the drugs treat and how to avoid drug interactions that can make medications less effective or even dangerous.

It is not uncommon for a Minnesota senior who has diabetes to be taking 10 or more medications that are prescribed by multiple providers. But right now under Medicare, you would have to have at least four chronic conditions before you would become eligible for MTM. That just doesn't make sense to me.

Under the MTM Expanded Benefits Act, seniors with any chronic condition could benefit from MTM. The bill would increase the number of people eligible for MTM, helping more seniors to access the life saving and money-saving services.

Congress recognized the value of MTM when it required Medicare Part D drug plans to offer the service as part of the Medicare Modernization Act of 2003. Furthermore, State Medicaid Programs, including ours in Minnesota, use MTM to maximize the value of their pharmacy benefits. As we reform our health care system and provide insurance coverage to more Americans, it makes sense to ensure that MTM becomes more widely adopted throughout our health care system.

And MTM isn't just good for patient health, it also saves money. A University of Minnesota study showed that when patients were able to consult with a pharmacist to determine their optimal medication regimen, total health expenditures decreased from \$11,965 to \$8,197 per patient. The reduction in total health expenditures exceeded the cost of providing MTM services by more than 12 to 1. That is huge.