

circuit court nomination. Following that vote, we will return to the immigration reform legislation. And if we are unable to reach a short time agreement, then it will be necessary to table the pending amendment. Senators can therefore expect at least one additional vote prior to the policy meetings.

I remind everyone, once again, to not make plans to be far from the Chamber as we proceed on the immigration bill; that is, stay close to the Chamber. We will vote each day this week and into each evening.

#### ORDER FOR ADJOURNMENT

Mr. FRIST. If there is no further business to come before the Senate, I ask unanimous consent that the Senate stand in adjournment under the previous order, following the remarks of Senator DURBIN.

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

The Senator from Illinois.

#### IMMIGRATION REFORM

Mr. DURBIN. Mr. President, I am glad we are returning to the immigration bill, as Senator FRIST has alluded. I am concerned, as he is, there will be so many amendments offered we may not be able to bring it to a satisfactory conclusion soon.

We tried to get a limitation on amendments on the Democratic side and were unsuccessful and decided, finally, in desperation really, to go forward and to have amendments offered on the floor in the hopes that Members who offer them would accept reasonable limitations on their debate time.

It was unusual that when we debated health insurance for small businesses last week, the Republican majority used a procedure called "filling the tree," and then, of course, the cloture motion to cut off amendments, to limit amendments. When it comes to immigration, there has been no effort by the majority to do that. So we are going to face quite a few amendments, and I hope we can handle them in a reasonable and expeditious way.

This is an important bill. Comprehensive immigration reform is necessary in America. Our system is broken, badly broken. It does not protect America as it should, and it is not fair to people who have come to this country. We have to find a reasonable way to come up with comprehensive, tough but fair law when it comes to the issue of immigration.

#### MEDICARE PRESCRIPTION DRUG COVERAGE

Mr. DURBIN. Mr. President, there is another law that has an important milestone today and that is Medicare prescription Part D. I remember this bill when it was debated about 2½ years ago—2½ years ago on the floor of the Senate—and was passed and enacted by the President.

So the administration had 2 years to get ready, 2 years to be prepared for the millions of people under Medicare who would become eligible for a prescription drug benefit.

This is an important benefit, one that was not included in the original Medicare legislation. In those days, there were not that many prescription drugs, and they were not that good. Now we have quite a variety of very good drugs available to help the elderly and others stay healthy and strong and independent. So adding a prescription drug benefit to Medicare made sense.

Keeping people healthy and at home rather than sick and in the hospital or in the nursing home is not only morally right, it makes sense financially. So we passed a bill 2½ years ago. But it was not a very good one. It was extremely complicated.

Imagine, if you will, a bill written by the pharmaceutical industry and the insurance industry. And that is what we ended up with, a bill that allows those two industries to capitalize on opportunities for profit-taking, which they are going to do and already have done. Unfortunately, it is at the expense of senior citizens.

In my State of Illinois, seniors who are trying to figure out which might be the best approach for their prescription drugs have 45 different choices. Forty-five choices may sound like a holiday for some, akin to going to shop at a department store, but for many seniors it became overwhelming and confusing.

They tried to get help. They called the Medicare hotline. That was supposed to be the 1-800 number that would answer their questions. If you could get through—after waiting for a long period of time—surveys of people who tried to get through found that many times they were giving out bad information.

They also put out brochures. Medicare put out some written information for seniors, and people looked at it closely and said: Well, this is wrong. It is written poorly. It does not describe the law as it currently exists.

So what was a senior to do? Many of them turned to family friends. I have had friends of mine whose moms and dads had to make this call. They sat down with them, worked through the paperwork. They went online. They helped them make the choice. But that was not always the case. Some people don't have a family member who is available or one who can understand the complexities of this choice. So they went to other places.

They would go to their pharmacist. So many pharmacists—I want to salute them this evening—so many pharmacists gave up their time. Frankly, that is what they have to sell, their time and professional advice. And they gave it up for their customers to try to help them through this immensely complicated legislation.

Where are we today? Well, today, as the enrollment deadline is reached on May 15, 6 million Medicare recipients

have yet to sign up for prescription drug benefits. If you say: Well, being out of 40 million or so, then you have done pretty well. It ignores the fact that over 25 million already had coverage. They were already covered with prescription drug protection. So we were setting out to sign up some 15 or 16 million, and we did not get it done and fell short—fell short by about 40 percent or maybe more. The final figures will come in, in the next few days.

Of the 6 million who have not signed up as of today, 3.2 million are low-income elderly and disabled. They are eligible for extra help in paying for their medicine.

In my home State, approximately 478,000 eligible beneficiaries have yet to sign up. That is about one-third of the eligible people in my home State of Illinois.

Despite the best efforts of all the senior citizen groups, all of the traveling by the President, and all of the information that has been given, a third of the eligible people have not signed up for Medicare prescription Part D in my State.

That is an indication of the tough choice that many have to make. According to the latest numbers available from Social Security, only 21 percent of seniors in Illinois eligible for extra help have been enrolled. Millions of beneficiaries need more time. Many beneficiaries are simply overwhelmed by the unnecessary complexity and confusion of a program that could have been so simple and straightforward.

Even if they take appropriate steps, they don't always get good information, and many of these people will not sign up by the deadline. The Government Accountability Office completed a study last week that found that Medicare's written promotional materials used too much technical jargon, that the call waiting times lasted from a few minutes to close to an hour, and the Government Web site was so confusing that many people gave up before completing the process.

Someone wrote in the New York Times today that this is clearly a situation where a program was designed and written by people who don't view Government as a solution to a problem, they view Government as a problem. So they created a program that is entirely too complicated and confusing.

Investigators at GAO posed as seniors or individuals helping seniors and they placed 500 calls to 1-800-MEDICARE and found that about a third of them resulted in bad information being given to seniors. These mistakes just added to the confusion. So what happens? If somebody fails to sign up today, when they were supposed to, unfortunately, there are going to be some dire consequences. First, they will not be able to enroll in a prescription drug plan under Part D until November 15 for coverage that starts in January of 2007. So for the remainder of this year, they will not have the protection of a