

SENATOR MOORE: Mr. Speaker and members, I think there has been a good deal of passion on this issue, and some lively discussion, as there well should be. First off, let's get back to what exactly the amendment does so everybody understands it, nothing in this amendment impacts children in the State of Nebraska. Those below the age of 21, the federal government mandates you cover. Secondly, I don't know if Senator Wesely mistakenly mentioned some things that are not in this amendment, I am not accusing him or anything. I am just saying that, you know, the mental health services are not included in this amendment. The psychological services are not included in this amendment. The prosthetic devices are not included in this amendment. I listed earlier the things that are, but those are all three things that Senator Wesely specifically mentioned in his plea to vote against it that were not included here, so everybody understands that. You know I am sure in 1950 or 1960 Senator Warner was probably here, when the first computer issue came before the State of Nebraska, and said...you weren't even here, that was before your time even? '62, whenever that was, the first computer, somebody came in and said if you invest money in this computer, you are going to save money. Well, we have been doing that for 30, 40 years, and I don't know how many "bzillion" dollars we spent on computers, but I don't know how much money we are saving. Likewise, all these optional services in the last 20 years of the Great Society programs, arguments have been made, primarily by professionals, the health care professionals who want these services, and three or four of these I have carried a lot of legislation for, so I am well aware of that, they came in here and said that you adopt this optional service, you are going to save money. And so the argument that we are talking about today they used back then, the only thing I can tell you, the proof is in the pudding, the Medicaid budget is going to cost \$240 million next year, \$240 million for the state's share of Medicaid. Are those things saving money? I don't know. I don't know. The frustration is, and I know we all feel it, there is a limit to what you can and can't do. And I am not going to sit here and wait for the federal government to simply solve our problem. I think we are going to be waiting a long, long time. That's not saying they don't want to, I am just saying I don't know if they can or will. You can talk about systemic change in the health care community, and that's where the real problem is. I don't know how long you are going to wait for that. I don't know how much you can do. As I say, oftentimes people come to my office,