

TRANSCRIPT PREPARED BY THE CLERK OF THE LEGISLATURE
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FLOOR DEBATE

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you is that the CHIP program is not in the position to do this kind of work. It is strapped as it is and transplants are essentially beyond the means of the CHIP program to provide and, if this work is going to be done, you can't say that there's another program waiting to do this work; that this would be somehow duplication. It's not duplication. I also support it because I think it represents an appropriate way of handling a healthcare issue for the public as opposed to the mandated benefits idea that happens a lot in our committee where you try to use the insurance program by changing people's insurance policies. Seems to me that public health and assistance from the government to people in need is a legitimate thing to do. LB 287 is a legitimate thing to do. I rise to support it and I intend to vote first for this amendment and then for the bill. Thank you.

PRESIDENT MAURSTAD: Thank you, Senator Landis. Senator Thompson, you're recognized to close. Senator Thompson waives closing. The question is the adoption of AM0737 to LB 287. Those in favor vote aye; those opposed vote nay. Mr. Clerk, please record.

CLERK: 27 ayes, 1 nay, Mr. President, on the adoption of Senator Thompson's amendment.

PRESIDENT MAURSTAD: The amendment is adopted.

CLERK: I have nothing further on the bill, Mr. President.

PRESIDENT MAURSTAD: Senator Thompson.

SENATOR THOMPSON: I was just going to recap where we are with the bill. It's a bill to set up a fund. It's capped at \$250,000 and its purpose is to be able to meet the public health issue that's probably been long overdue in the state. When we started the Nebraska renal program to help people with dialysis and transplants, it was set with a specific formulary. The formulary was never expanded to include the newer immunosuppressive drugs, nor was it expanded to cover additional transplant...transplanted organs. Essentially, what the bill does is allow it to be used for any transplanted organ, internal