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You can help us do that by reducing infant mortality with this act. Over the past five years, we have gone from 21 laboratory newborn screenings down to just two. However, 47 states have a...many have a much higher birthrate than we do, Nebraska uses only a single laboratory to help assure quality and to keep costs at a minimum. However, our costs still are sometimes almost 50 percent higher than our adjoining states because of the system that we've been using. If we contract with one lab, one that has the capacity to do all five tests in the current screening plus MCAD for a single drop of blood, we have improved quality and reduced the chance of error. We currently are paying 53 to 54 dollars per newborn screen, plus oftentimes adding an additional \$25 just for this MCAD test, for a total of 78 to 79 dollars per baby. We feel that we can bid this process out for around \$25 per test, and that's what other states are doing. That's what it's costing based on other states' current rates. By adding a fee to cover all of the program administration cost, all of those costs and what you were talking about earlier, those costs that I added or that I spoke of with the tracking and all that, are still all part of the \$10 administrative cost. I did check that with the department. We feel that out of this bid process for around \$25 per test, based on other states' current rates, by adding a fee to cover the program administration costs, including follow-up, formula and other treatment costs currently covered, the total cost per test to customers is projected to be about \$45. That included the test, that includes administration costs, to be about \$45 per infant screen, a savings of from 8 to 33 dollars per infant. And that's where I think we are doing a service to all of the citizens of Nebraska and, not only that, we're providing a test that has not been covered in the past, and hopefully reducing Nebraska's higher than normal infant mortality rate. I really look at this as a win-win situation and I think we're going to get a better test faster and with less chance of error. Thank you, Mr. Speaker.

SPEAKER KRISTENSEN: Senator Byars.

SENATOR BYARS: Thank you, Mr. President. To continue the dialogue with Senator Beutler, I think his last question was the effect that this would have on the participation of the