

April 18, 1979

LB 172

Omaha, which by the way is double the number of CAT scanners in the country of Sweden, were all a matter of a State Health Department appropriation. The hue and cry of the public about duplication of services would be tremendous. We know that duplication of services is a watchword among Nebraska politics, and if we allowed that to happen in state government, none of us would return year after year here if that kind of system had developed. In fact that system has developed outside the purview of state law and that is why I think the consensus amendments to LB 172 have great merit to them. I want to say finally two points, the idea represented by the argument of Senator Kelly is basically property rights of an individual are greater than the collective interests of lower medical care costs for Nebraska and, secondarily, lower tax payments for medicare and medicaid by a health care cost containment. I don't buy that value approach. I think the values have to fall in favor of the public good which happen to be a strong sound method of health care cost containment, a one that the benefits of which will fall to the public as a whole through its tax dollars and also through the utilization of those services. Finally, ask yourself as I have the comparative question between the committee amendments and the consensus amendments, which of those two documents is the better mechanism....

SPEAKER MARVEL: You have one minute.

SENATOR LANDIS: ...the best chance of containing health care costs? I hope you will conclude as I have that the consensus amendments represent a philosophy and a value choice that I can stand by and the one that I think my constituents and I hope your constituents dictate to you. Thank you.

SPEAKER MARVEL: Senator Cullan and then Senator Lamb and then Senator Goodrich and then we have got besides that four more.

SENATOR CULLAN: Mr. President and members of the Legislature, we have heard a lot of speeches this afternoon and a lot of very nice speeches about controlling health care costs and how LB 172 with the committee amendments is so weak it isn't going to do anything. But what do the committee amendments do and what are some of the differences between the committee amendments and the consensus amendments? Under the committee amendments some of these things would trigger a certificate of need review; construction, development or establishment of any new health care facility; any capital expenditure in excess of \$150,000, and that includes acquisitions by lease or donations; substantial bed change of ten percent or relo-