

SENATOR DeCAMP: Okay, what the heck. Senator Cullan, good question. I repeat, we want to make sure these abuses that are existing are corrected. Therefore, the licensure department would now have the ability to investigate or do something to correct the abuse and if they needed additional information they would have the ability to subpoena but let us get one thing clear which maybe I did not make clear. The immunity only applies to Sections 2 and 3 of the act. It is not...I get the impression that you believe it is an immunity for anything criminal or anything else. It is a very limited and narrow thing, strictly dealing with this bill and the immunity only with relation to Sections 2 and 3 which hopefully will make sense then.

SENATOR CLARK: Senator Schmit.

SENATOR SCHMIT: Mr. President and members of the Legislature, I rise in support of the bill and I would just like to comment. I don't think that the insurance company as such, needs protection. What I am talking about here, what the bill purports to do is this. We all know what has happened to the cost of health care in the last ten or fifteen years. It continues to escalate much faster than even the rate of inflation. Part of that is due to improper practices. There are evidences...

SENATOR CLARK: (Gavel.) Pardon me, Senator Schmit. Could we have it a little quiet in here please. It is hard to hear him.

SENATOR SCHMIT: There have been evidence gathered as Senator DeCamp alluded to that pinpoints some of these abuses. The insurance company has one of two choices. They can either come to this Legislature and ask for the relief they have asked under this bill to inform the proper authorities of those abuses that they see or they can continue to pay them and to pass it on to the consumer. Now there isn't any way in the world we are ever going to get a handle on some of these costs unless we stop the obvious abuses. I want to say also that we have talked about a number of other abuses that ought to be reviewed and it may well be that at some time this Legislature will want to look at even a rate setting procedure. I know that is going to strike terror in the hearts of a lot of people but when the vast bulk of medical costs are being paid is to insurance, Medicare or Medicaid, it may well be that we are justified in looking at some kind of a rate setting procedure. I don't know what the answer is and I have worked on it for a number of years and I have cooperated with many of you on it but the plain facts are that today an individual citizen, if he has to pay his medical bill, cannot afford medical care and we are rapidly approaching the point where you can't even