

here on the floor of the Legislature is a good one. I think that there is no reason we can't adopt it today. Incidentally, I have visited with the five of the seven members of the committee who indicated support for this concept earlier, enough to sign the bill that we were going to introduce, and they had no objection to running it this way and they saw no reason for another hearing and to delay consideration of certificate of need until the Legislature was very, very busy. Well, the real issue that we want to consider, just to review what we are going to be voting on, the major changes that I see in the amendments I put before you are these: To reduce the number of projects under review so that a more efficient and effective review can be made on the projects which we do review. I was curious as to how effective the certificate of need process has been working and so I spent a lot of time this summer working on this proposal. I sent a lot of information requests to the Department of Health and one of the responses and the summaries that they sent back to me, they summarized the certificate of need applications that had been submitted in the period of November 25, 1979 to January 4, 1982, after it was updated. In that period of time of the ninety-two applications that were considered, two were turned down. Two, two of ninety-two applications that went through that long involved costly process were turned down and those two are on appeal in the courts today. Now I have heard this and I have read part of this, this information came from the Department of Health. It talks about \$10 million worth of savings but the two that have been turned down, one cost \$296,000 and the other one, \$1.25 million. Now where they can find \$10 million worth of savings is beyond me but I guess if you are a bureaucrat and you know people are looking at your program you want to make sure you can justify it to people. I don't believe \$10 million worth of money has been saved when only two of ninety-two applications have been turned down. The rest of them had to spend from I guess \$10,000 on up to go through that complicated process that you are seeing. They have had to hire the attorneys, the economists and the other people to make the presentations so that they could get what they are going to get anyway. It is silly. It is not a good use of resources. Fifty-three of those ninety-two projects cost \$600,000 or less and only one of those projects was turned down. So I think that by raising the threshold, Senator Marsh, you were concerned about that, by raising those thresholds our Department of Health should be able to spend a good deal more time...

SENATOR CLARK: You have one minute, Senator Cullan.

SENATOR CULLAN: ...on important and costly applications, not on trivial applications that are going to be approved