

What we are saying here is that that is not good enough, if a project is going to cost a million, then it is going to cost a million dollars whether the architect you pay is going to say otherwise or not. The next part of it deals with financial impact, and this is very important. Right now when you have an addition or a new piece of equipment it affects the cost of that hospital or that nursing home. It is going to cost some sort of effect on that the rates that they charge, but it is also going to affect other hospitals and other nursing homes. If you add a new piece of equipment that another hospital has, they won't have as many patients using it so their rates will have to go up to cover the cost of that equipment. And so what we say in this amendment is, when you look at the cost factor in approving or disapproving a proposal, look at other hospitals and nursing homes impact. Look at the cost impact on them as well as the hospital requesting the piece of equipment or the addition that they are requesting, or the nursing home for that matter. We all know that that is going to have an impact, beyond a single applicant it is going to have an impact across the board on health care costs. And right now under the Cullan amendments in the bill that we have they'd look solely at the applicant, and so it narrows what they can look at in terms of costs and keeping costs down. And then finally the appropriate and significant criteria question is probably the most blatant need to correct in this bill at this point because not only has the federal government said that they should have authority to determine what criteria, after they establish their criteria, what criteria to follow, but also the Attorney General.

PRESIDENT: One minute, Senator.

SENATOR WESELY: Thank you, Mr. President. What we are talking about here is that the Health Department sits down and has standard criteria they review any project under. I don't know how many that would be, let's say a dozen criteria, and the hospital comes in and they get reviewed under this criteria. Well, under this language "appropriate and significant" the hospital that gets turned down can go to the courts and say, well they reviewed us on these twelve things and we admit that maybe four or five of them will apply but there is four or five or six that did not apply and so their turning us down should be thrown out by the courts because it wasn't appropriate or significant. Well, they can use this as another legal means to come in and contradict and attack a Health Department denial on a certificate of need application. It is not...maybe it isn't all that important but in the courts it could be very important.