

Now I know Senator Marsh is interested in this issue because this deals in part with the home health services and they want to be under review. They want to have a chance to go through the review process. Senator Cullan's version of the bill would virtually eliminate that chance, and let me tell you why. One of the things that could be done with the present language in the bill is they could come in and they could say, we are going to have this new home health care service or any service and we are going to probably spend about \$200,000 on it in the first year, and you say, well, I guess that is under the threshold, so you go ahead and you approve the project. Well, it doesn't get reviewed under that circumstance so it goes ahead and gets instituted. The next year or the following year at some point all of a sudden that \$200,000 project becomes a \$2 million project or a million dollar project, but since it has already been initiated it can not have to go through the same process of review that would be the case if they had to come in under what my amendment says, and my amendment says it has to be \$100,000 minimum and you have to look at it over a three year period so you know what the future costs are going to be. It's the same concept we have here with new expenditures or new appropriations. We always have an A bill so we know how much it is going to cost. And Senator Warner has tried to have projections up to four years in advance for a new expenditure, a new program in state government which I know that what starts out to be a small project can turn out to be a big project, and we are trying to say the same things applies in health care. You can have a small project the first year that balloons into a large project and costs a great deal of money in the future. So that is the first part of this loophole amendment that I think needs to be changed. The next one deals with the question that follows very closely with that item, that after a CON is approved right now if there is a deviation from the project as it has been approved, they can... the Health Department can pull them back in for an additional review to find out what changes are going about and to approve or deny those changes to the approval that was given earlier. So what this does is piggyback. And the last comment, if you go with these changes in 378, you could come in with a project and you could get approval or you could be exempted from approval and then you could change the whole darn thing after you get it all taken care of and there is no recourse for the Health Department to say, hey, wait a minute, that is not what we approved. Under this bill they would have a very large loophole to come in and go through that process and then change it whatever way they want without any sort of a reaction from the Health Department being available. That would lead to a great problem