and there are a little over a hundred I guess priority bills that are further down the road yet to be considered on General and Select Files so I appreciate very much the withdrawing of the numerous amendments to this bill and that of course made unnecessary a motion to suspend the rules. The one thing I would like to say and Senator Wesely and Senator Johnson have talked about health care costs and talked about them extensively, no one here including myself and I don't think anyone interested in this legislation is advocating higher health care costs. I think we want to see improved quality in the delivery of health care system and that doesn't always come inexpensively. An example of that improvements in quality and the expense relate to, just to digress for a second, would be the development of neonatal intensive care units today. Children born in recent days that are taken care of in those types of facilities can be born at a pound or so and can live productive lives whereas five years ago they may have been mentally retarded and ten years ago they would not have lived at all. And so I think in the debate on health care costs we have to recognize that we are not always talking about purchasing the same health care product that we did five years ago or ten years ago. The other point I would like to make is in response to Senator Johnson and his comments about the operation of the Department of Health. I think it is interesting that the Department of Health provided comments on LB 378 as it had been amended before this bill was first considered on Select File and that those amendments attacked LB 378 but they did more than that. They attacked the certificate of need system as it exists currently. Most of the criticisms that were contained in the memorandum written by the health care planners are a tax on the existing system of certificate of need, not just LB 378. The other point I would like to make is that these people who Senator Johnson claims so ably assisted the Legislature in 1979 have done quite a job of building an agency in the State of Nebraska. Recently before testimony before the Appropriations Committee I understand that the Department of Health testified that they have twenty-two individuals involved in certificate of need review or hospital reviews. That compares to nine people employed in similar capacities in the State of Missouri. The State of Missouri has 4,917,444 people as of the 1980 census. The State of Nebraska has 1.5 million, seventy thousand and six people, the same census. There is one health planner for every five hundred and forty-six thousand three hundred and eighty-three people in the State of Missouri and there is one health planner for every seventy-eight thousand five hundred people in the State of Nebraska.

PRESIDENT: Half a minute, Senator.