

we have heard this morning is that the majority of the senators are in favor of the concept of what the legislation addresses. However, we have had many, many questions as to the actual mechanics of how it's going to work, what it's going to cost, who is it going to help and it's so broadly written that I don't feel those questions are going to go away. I feel that possibly if we IPP this bill today and then next year if Senator Lynch and Senator Wesely wish to come in with the same type of legislation, tighten it down considerably, show the steps that would be taken, and how things are to be happening, I, for one, would support the legislation. We have discussed here a remark made that if they don't do what their supposed to do, we will cut off their funding. I can see it now if they don't do what they're supposed to do, they're going to come back and say, you didn't give us enough money. Give us some more money and we can solve all these problems, because once you start giving money to someone, you all know that it's practically hell trying to take it away from them. So although the concept would help my district in western Nebraska, I cannot support legislation that is written so loose and broad and so nonspecific as LB 338. So I ask you to support the IPP motion. Thank you, Mr. President.

SPEAKER BARRETT: Thank you. Senator Wesely, you have the opportunity to respond.

SENATOR WESELY: Thank you. Mr. Speaker and members, if this wasn't such a sad situation, it would be very amusing to me, frankly, because before you stands the Chairman of the Health Committee and I have been Chairman now this is my fifth year. I'm from Lincoln, Nebraska. I have three people that live outside the city limits in my district. This bill does nothing for me. The Vice Chairman of the committee, Senator Dan Lynch from Omaha, was the one that Chaired this study and came back with a piece of legislation. This bill does nothing for him. We're both standing here trying to argue with you about, from our perspectives of long service on the Health Committee and we've studied in detail for a full year and have followed up with further research in the following years what is a big gap in the service area in public health in this state. We have come back with a proposal that emphasizes local control to allow local areas to determine what's in their own best interest to meet their public health needs and the very people you would assume would welcome this proposal, the rural, conservative, local control oriented individuals are now standing up and fighting us on this piece of legislation. I find it amazing and