

issue of CON. Right now, what would be included in this amendment would be neonatal care II and III. Those are higher levels of neonatal care, very difficult, important function. Secondly, it would include open heart surgery, cardiac catheterization and angioplasty but it would not include Bergan Mercy. There is a provision, a grandfather clause, so to speak, that would pre-empt Bergan from having to go through CON, so that would be taken care of in that fashion, but otherwise you would still have open heart surgery and cardiac catheterization and angioplasty still reviewed. Chronic renal dialysis would be reviewed, and, finally, transplants would be reviewed, and that would be of heart, kidney, pancreas, liver, bone, bone marrow. What we are trying to do is get down to those few items right now that certainly need some sort of review. They are very difficult operations and surgeries and procedures, and they deserve to have the kind of quality that people would want to have that use these, that we want to have only so many people utilizing these that they have the experience to do a good job, and that that should maintain quality and, hopefully, reduce cost. And it is that second part of the equation, the cost factor, that has me terribly concerned in this state. I passed out a number of different items, and I will just run through them rather quickly to point out just how serious the health care cost issue is in Nebraska. In one of the sheets I have passed out, we are looking at over the next two years, \$54 million in state taxes to be spent on Medicaid, 11 to 16 million more dollars to be spent on state employee health insurance, another \$2.5 million for the University of Nebraska health insurance, another million for state college health insurance, and another 2 to 4 million dollars for the health insurance provided from the CHIP pool. In addition, we are looking at the state taking over indigent care and that would be \$24 million. This is about 100 million more dollars that we are looking to spend over the next two years on health care in the State of Nebraska through state taxes, 100 million more dollars that in my estimation is money well spent when you are talking about health care if it isn't wasted, if it isn't spent on duplicated services or unnecessary and inefficient services and systems. And right now, you have to raise the question about whether or not that is the case. The \$100 million we are talking about spending, that could be \$100 million to fund the second year of the property tax relief package. It is the \$100 million that could be used to fund a lot of different activities that we are all concerned about, but, instead, it is going into the greater utilization and