

March 29, 1990

LB 163, 163A, 164, 164A, 187, 536, 898
899, 1031, 1125, 1126, 1170, 1220

us. While the Legislature is in session and capable of transacting business, I propose to sign and I do sign LB 1031, LB 1125, LB 1170, LB 536, LB 1220, LB 1126, LB 898, LB 899, LB 163, LB 163A, LB 164 and LB 164A. (See page 1695 of the Legislative Journal.) Senator Wesely, further discussion on the motion to return the bill.

SENATOR WESELY: Yes, Mr. Speaker, members, just very briefly, I rise to indicate for the record why it is I'm going to change position today on this bill. I have supported the concept of the state participating in the cost of indigent care. I have worked and led task forces and introduced legislation to this effect, but I've had conversations with the Nebraska Hospital Association about the two-way street we live on and then that two-way street, when additional public tax dollars go into any particular area, it seems to me that an amount of accountability is in order and unfortunately we have had a desire on the part of the hospitals in particular to ask and request for Medicaid increases, for this legislation on indigent care reimbursement and additional public monies, but when requested to participate in different health care cost containment initiatives they object and block every effort we make practically. For instance, I remember last year on certificate of need their efforts blocked my concerns about certificate of need and that process to contain costs was weakened dramatically as a result of legislation promoted by the Hospital Association last year. This year we have a health care cost data bill that has got the support of a number of different organizations and interests with the exception of the Hospital Association and they are working very hard, as you all know, to block that piece of legislation. If we were able to pass that, if we were able to work with them on the cost containment side of things, I very much support the work of Senator Lynch and those in support of LB 187. The concept is valid. The state should take a responsibility in this area, but before further monies get spent in this field or any other field that go into the hospitals in particular in this state it seems to me appropriate to ask those hospitals to work with us, the public, the taxpayers, the Legislature, to try and deal with the cost issue, the cost containment problem that we have across the State of Nebraska and across this country. And as long as the hand is out to receive the money but there is no assistance whatsoever to help us deal with the cost of this, I, for one, feel unable to support further funding in this manner. I would want to add that in some of the data, in some of the information we have