

September 30, 1992 LB 1

for what goes. And I'm a little hesitant to support on that basis and it has nothing to do with the validity of these programs, because they probably are. But if you want to make reductions, I tend to believe that you ought to give the maximum, and not identify them, then you ought to make the maximum flexibility to the department to be able to do it and redirect the money somewhere else.

SPEAKER BAACK: Thank you, Senator Warner. Senator Hefner, you're next.

SENATOR HEFNER: Mr. Speaker and members of the Legislature. I rise to support this amendment. As I understand it, this would include all the items that's in the handout, except number one, and that would leave out \$160,000. But state and federal government keeps mandating nursing homes to do more. They have to comply with all the rules and regulations and I know in my district, which I have a number of small nursing homes, had increased their cost and some of them were rather excessive, cost the patients a lot more money. In fact, some of them went up as high as four or five dollars a day which translates into a lot of money per month and a lot of money per year. So I don't know if we can go ahead with the reduction that the Governor has proposed, especially for these nursing homes. I feel if we do that, well, eventually some of these nursing homes will have to close. I feel that this is a reasonable compromise. I think it's only fair and just that these hearings be held and then let the department go from there. So I certainly support this amendment.

SPEAKER BAACK: Thank you, Senator Hefner. Senator Schellpeper.

SENATOR SCHELLPEPER: Thank you, Mr. Speaker, and members, what we're really attempting to do here, we're not saying that nursing homes shouldn't be cut, that health care shouldn't be cut. We're saying there's some hearings scheduled this fall, let's wait until after the hearings, let these groups try to work something out with Social Service. They're willing to cut some different areas and it may end up basically where we're at with...in LB 1. But what they're saying is, don't do it until we have our hearings and let us explain where we would like to go. I think it makes more sense to have these health care groups come in. They know where they can cut some expenses where there is probably duplication. So rather than to pass LB 1 as is and implement it right away, let's let them have the