

concern about getting adequate care, trying to make sure that patients are treated with concern and that their needs are met and, you know, we tend to leave them out of the equation more than we include them and that's one concern I have besides the fact that I worry a bit about the restrictions of the bill. But, Senator Landis, can you identify, I was looking and I see the one section on line 13, on page 12, is there anyplace else on the economic considerations that you're aware of that we've inserted into the bill?

SENATOR LANDIS: Don, would you give me that cite again, please?

SENATOR WESELY: Well, on page...well, the one amendment that I saw in the committee amendments is on page 12, line 13, and it added economic considerations when you have your policies in contracts and I wondered if that was...the bottom line of it is the intent on your part on these committee amendments and with the bill is if a PPO finds a provider is not economically competitive with others and decides not to contract, they still have the power under this bill (inaudible).

SENATOR LANDIS: Yes, my opinion is that they do. Let me tell you that what I think would happen is this. You would have a provider who was doing a body of practice beyond what was normal, charges, overtreatment or whatever. At that point, the PPO would be free to make the decision to cancel a contract or not to retain or renew a contract. Then this three-member panel would be able to hear the case and it's a nonbinding decision so the PPO doesn't have a method by which they can be forced to renew the contract and, lastly, that body would raise the question I think, and render the judgment, yes, you're, in fact, right, these kinds of costs and expenses are not normal or, no, these kinds of costs and expenses are normal, given the medical circumstances. The PPO would be free to weigh that, as would the provider should the provider later try to sue. I'm going to guess that that three-member panel would be helpful to both sides to identify what the normal practices are in the situation and if the doctor was within the normal practices, I think that would be persuasive to the insurance company to let them stay. If the doctor was not in the normal practices and overtreating, I think it would be very persuasive to the doctor not to pursue a lawsuit, trying to force the PPO, and yet understand that no matter what, it's a nonbinding decision on both parties.

SENATOR WESELY: Does that three-member panel, does that