

to fundamentally a hospital, that contained a clinic, to get their health care records, in preparation to leaving that state to move to Nebraska, they were charged what they thought to be an exorbitant amount of money for those records. It's my recollection, from four or five years ago, that it ran into the hundreds of dollars for a relatively small amount of medical records. And the question was asked of me, what do we have in Nebraska that provides a defined charge for records, recognizing that health care facilities need some compensation for duplicating records, and we found that at that point in time we had none. So, three years ago, I introduced the original version of 442. And, as one might expect, and certainly Senator Wesely is far more knowledgeable in this area than I, but when you get into the health care field there are many competing factions, all with their own ideas in this field. And the net result of that, that the... I don't remember the LB number, but this idea was held in Health and Human Services two years ago. I was asked to reintroduce it. And over the interim, prior to the introduction of this bill last year, there was a rather significant amount of negotiation went on between my LA, the Nebraska Medical Association, the people who represent the psychiatrists and psychologists, the Hospital Association, and anyone we would identify that had an interest in this field. And the result of that was 442, as introduced. It still left some questions unanswered. And since this bill was heard last year there were additional consultations, conferences that went on during the interim of 1995. The net result was what you see in front of you, which is the committee amendment to 442. It still isn't quite perfect. I would share with you that down on the section, which is about line 21 or 22, in conversations within the week with the Nebraska Medical Association and within the Nebraska Hospital Association, there needs to still be a slight modification of language to adjust for different mechanisms of records storage and the recovery of those costs. So there quite probably will be a Select File amendment. But, with that, I would encourage the adoption of the committee amendment, which becomes the bill. And I think it puts Nebraska in pretty good shape with regard to the relationship between people who want to get their own personal medical records from a health care institution and a defined charge for those that is flexible enough to allow for inflationary creep in those costs, and yet still have some containment, and it's not going to be whatever the market will bear, but we will have a defined charge for those. So, with that, I would encourage adoption of the