

TRANSCRIPT PREPARED BY THE CLERK OF THE LEGISLATURE  
Transcriber's Office

April 11, 2000 LB 480

need to bring a lot of different medical people into. Many groups who wanted to be on this council we couldn't include. That was the issue, whether we could put more in instead of take some out. The third reason that you should vote for this override is that this really isn't an attempt to undo the reorganization of the Department of Health and Human Services, but even if it were, I mean, there have been other examples. We just did the separate office for the blind and visually impaired, we have a separate Rural Health Office which has a yearly budget of I don't know how much, the General Funds that go into it are about \$193,000, there's also a separate minority office, which I might mention to you was actually...staff was actually increased on that one recently, from within the department, and that is what I think can be done here. Recently, you probably read in the paper that the department has gotten an \$800,000 grant from the Robert Woods Foundation, Robert Woods Johnson Foundation for the purpose of setting up a Public Health Initiative. That is great, but that's only going to cover eight counties. I'm talking about a statewide initiative here, and I'm not asking you for a lot of money for doing it, I'm just asking you to put the policy in statute. It was very interesting when the medical officer, the Chief Medical Officer for the department was asked about this Public Health Office. And one of the news articles says that he acknowledged that the state has not paid as much attention to public health since the state's former Departments of Health, Social Services and Public Institutions were merged into a single system, in 1997. Raymond said he could not say how many employees within Health and Human Services are now involved in public health programs. He said, he went on to say, I don't think public health should vacillate up and down with each chief medical officer; establishing a separate office will assure year-to-year, decade-to-decade continuity of public health. And that's really one of the things that I think is very important is that continuity. I think also that the women's health agenda initiative would fit in with all these other offices and you would have that kind of cooperation between them. LB 480 was never meant to segment or usurp existing programs but to coordinate and cooperate with aspects of other health initiatives. In looking through the State Directory, under HHS, one can find a contact person for aging services, for child care, for veterans homes, and many more service needs, all of