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FLOOR DEBATE

April 16, 2003      LB 146

the first component of the divided original committee amendments outside of Section 1. Have you all voted who care to? Record please, Mr. Clerk.

CLERK: 31 ayes, 0 nays, Mr. President, on the adoption of this component of the committee amendments.

SENATOR CUDABACK: The motion was successful. Mr. Clerk, next component.

CLERK: Second component, Mr. President, FA1316, involves Section 1 of the bill...of the original committee amendments, I should say. (Legislative Journal pages 1298-1299.)

SENATOR CUDABACK: Thank you, Mr. Clerk. Senator Brashear, to open on that component.

SENATOR BRASHEAR: Mr. President, members of the body, thank you for advancing or amending...adopting the other portion of the amendments. I want to urge you most seriously to adopt this portion also. I think we've had a division which I participated in and I understand, and while I have no problem with the division, I have a problem with overgeneralizing about what we're dealing with. So I'm going to have to take your time to go back and make certain that we aren't doing something here that we don't understand. Whatever you've heard about a medical malpractice insurance crisis across the nation, it does not apply in Nebraska. If you've gone to a seminar and you've heard about a crisis, then what you missed was the testimony before your Judiciary Committee in which the testimony was we do not have a crisis in Nebraska, and one of the reasons that we do not have a crisis in Nebraska is because we have the statutory scheme that this body adopted and has had in place for a number of years. Our premiums are not escalating dramatically, and the doctors and the hospitals wouldn't have come to your Judiciary Committee and testified in favor of increasing this cap had they not understood that. We have the underlying scheme, if you will, refer to Nebraska Revised Statutes 44-2827 and following. What you find is that we established in statute the basic insurance which a doctor is required to carry, and that's \$200,000 of coverage per occurrence. That's written in the