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and do what would be right and fair on a pro rata basis for everyone involved. That would be the rational and I think equitable way to approach a resolution of the problem.

SENATOR COMBS: So it is possible then perhaps there could be a mutual decision for exceeding the cap given an unusual circumstance where someone's actual, substantiatable medical expenses would exceed that?

SENATOR BRASHEAR: No, Senator Combs. I probably wasn't clear. I apologize. No, what I'm indicating is there would need to be a negotiation to make all claims and portions thereof fit within the cap. There is no statutory authority for ever exceeding the cap.

SENATOR COMBS: Okay. Well, my concern was just like if you do get an expensive...like a head injury case or a "neuro" case, oftentimes if it's the lifetime medical, if it exceeds that cap, and I'm thinking from a patient advocacy point of view, you know, who would then sustain the cost for that care? And I'm probably asking a question that there is no answer to. I guess I just wanted to make sure that the body is aware that there are certain medical situations and, granted, they are probably outside the scope of the norm, but where there can be tremendous medical expenses involved that have to be incurred that may exceed the cap, and it's just something, I think, you know, we may not be able to provide for it with this legislation, but we need to be aware that they do exist. And it is actual medical. You know, it's not punitive or damages, that kind of thing. Actual medical can exceed that. So I just wanted to make the body aware of that and perhaps learn a little bit myself as to what else might be possible to help those people.

SENATOR BRASHEAR: Senator Combs, you just eloquently made the case for the increase in the cap, please.

SENATOR COMBS: All right. Thank you.

SENATOR CUDABACK: Thank you, Senator Combs. (Visitors introduced.) Senator Wehrbein, on the second component of the divided...