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of Health in Georgia. And it is the opinion of at least some that it has no reference to Nebraska whatsoever. Justice Ginsburg, and I'm going to read now from a letter from an attorney who is also the chairman of the Madison County Mental Health Board: Justice Ginsburg has delivered the opinion of the court with respects to Part I, II, and III-A, concluding that under Title II of the ADA, quote, states are required to provide community-based treatment for persons with mental disabilities when the state's treatment professionals determine that such placement is appropriate, the affected persons do not oppose such treatment, and the placement may be reasonably accommodated, taking into account the resources available to the state and the needs of others with mental disability. This court emphasized that nothing in the ADA or its implementing regulations condones the termination of institutional settings for persons unable to handle or benefit from community settings, nor is there any federal requirement that community-based treatment be imposed on patients who do not desire it. The decision says nothing about length of stay as an indicator of the need for community care, only that it is the decision of the treatment professional. In a concurring opinion, Justice Kennedy noted it would be unreasonable. This is a quote. It would be unreasonable, it would be a tragic event then if the Americans with Disabilities Act of 1990 to be interpreted that states have some incentive for fear of litigation to drive those in need of medical care and supervision out of appropriate care and into settings with too little assistance and supervision. We also note that the...that's the end of the quote. We also note that the Olmstead decision deals with two people who were voluntary patients and, therefore, may have nothing to do with a large majority of patients who are legally committed to regional centers. You may be unaware that 42 states and the District of Columbia have task forces, commissions, or state agency work groups to assess current long-term care systems. Many, but not all task force, are developing plans. Eight states--Kansas, Michigan, Minnesota, Nebraska, Oregon, Rhode Island, South Dakota, and Tennessee--do not have a task force or similar group. Nebraska does not have an Olmstead plan, nor is there any reason to assume one is needed. HHSS response of approximately one year ago to a review conducted by the National Conference of State Legislatures has been to point out, quote,