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LB 709

SENATOR THOMPSON: ...studying this. But we need to have a broad perspective as we do it.

SENATOR SCHIMEK: Thank you, Senator Thompson. Senator Byars, you're recognized to speak.

SENATOR BYARS: Thank you, Senator Schimek. I have so many things to say, I'm not sure exactly where to start. And I think what Senator Jensen said is very appropriate, if we look at this as we talked about, in a broad way. I don't think this bill, LB 709, even in the amended version, talks about most of the things that Senator Jensen made as points that we need to consider. If you look at Medicaid on itself, the only other thing in this bill besides that that he discussed was long-term care. Well, as far as I'm concerned, you can take the first six sections out of this bill, start on Section 7, and talk about long-term care, and I can support that. I think it makes sense. But I don't think we can take Medicaid and start talking about it and making...even though we talk that we aren't making assumptions, I agree with Senator Chambers, I think there are assumptions made before we even start here about what's going to happen. And that's the fact that you're going to start eliminating people from services. You're going to start cutting provider rates. You're going to start, in effect, then closing the doors of those individuals. And I don't mean to be disrespectful in that at all. But you start talking about insurance, you have to bring the insurance industry into it. A whole different set of circumstances. A whole different set of rules and regs. But does it affect Medicaid? Absolutely. You talk about employers and their obligation to their employees. Or do we give them credits? Do we...what kind of systems do we set up so they will provide insurance? That, again, is another subject. But it's not part of Medicaid. But it's something that needs to be considered. But let's...I want these numbers. I want you to think about this again. Medicaid is more efficient than Medicare and private health insurance. Nationally, from 1999 to 2004, per person costs, per person costs in Medicaid, increased only 4.5 percent, as compared to Medicare, which increased 7.1. Private healthcare premiums in that same period of time increased 12.6 percent. This is on a per capita basis. Now, if we look about the state of Nebraska