

TRANSCRIPT PREPARED BY THE CLERK OF THE LEGISLATURE
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FLOOR DEBATE

February 22, 2006 LB 833, 1066

not be dealing with so much paper. This was brought to me by the League of Municipalities, and I ask that you advance LB 1066.

SENATOR CUDABACK: Thank you, Senator Connealy. You've heard the opening on LB 1066. Open for discussion. Open for discussion on advancement of LB 1066. Senator Connealy, there are no lights on. Senator Connealy waives the opportunity to close. The question before the body is, shall LB 1066 advance to E & R Initial? All in favor of the motion vote aye; opposed, nay. We're voting on the advancement of LB 1066. Please record, Mr. Clerk.

ASSISTANT CLERK: 29 ayes, 0 nays to advance the bill, Mr. President.

SENATOR CUDABACK: LB 1066 does advance. We now go to LB 833. Mr. Clerk.

ASSISTANT CLERK: Mr. President, LB 833 was introduced by Senator Byars and others. (Read title.) The bill was read for the first time January 4 of this year, referred to the Health and Human Services Committee. The committee reports the bill to General File with committee amendments attached. (AM2000, Legislative Journal page 487.)

SENATOR CUDABACK: Thank you, Mr. Clerk. Senator Byars, you're recognized to open on LB 833.

SENATOR BYARS: Thank you, Mr. President. Currently, people in the state, particularly who live on the borders of the state, look to doctors, in many instances, in other states to address their healthcare needs. And these doctors might reside just across the border in Kansas, Iowa, South Dakota, Colorado. And people from this state might also travel to hospitals with national reputations, such as the Mayo Clinic and M.D. Anderson. And what we have found, that the existing law was difficult to interpret on how doctors could prescribe follow-up tests. And so LB 833, and as we've consulted with all of the medical professionals, amends existing statute to allow exceptions to the practice of medicine, but in a very narrow fashion. And