

TRANSCRIPT PREPARED BY THE CLERK OF THE LEGISLATURE  
Transcriber's Office  
FLOOR DEBATE

March 28, 2006      LB 1107  
                            LR 380-388

LR 380, LR 381, all Dwite Pedersen; LR 382, Senator Synowiecki; LR 383, Dwite Pedersen; LR 384, Senator Louden; LR 385, Senator Smith; LR 386, Senator Stuthman; LR 387, LR 388, Senator Mines. (Legislative Journal pages 1251-1257.)

SENATOR CUDABACK: Thank you, Mr. Clerk. We now go to LB 1107.

CLERK: LB 1107, a bill by Senator Thompson. (Read title.) The bill was introduced on January 17 of this year, Mr. President, at that time referred to the Health and Human Services Committee for public hearing. The bill was advanced to General File. I do have committee amendments. (AM2615, Legislative Journal page 1097.)

SENATOR CUDABACK: Senator Thompson, you're recognized to open on LB 1107.

SENATOR THOMPSON: Thank you, Mr. President and members of the body. LB 1107 is a bill that's supported by a number of health agenc...organizations in Nebraska. And they include the American Diabetes Association, the Nebraska Board of Health, the Nebraska Board of Nursing, Nebraska Emergency Medical Services, and include the Nebraska State Education Association, and also the Omaha Public Schools had a person testifying in support of this. And the issue of this bill and the one that comes next is the importance of children being able to manage their chronic diseases, their conditions that they have, in a way that is best for them, their families, and those who attend school with them, and for the schools, to make sure that all the kids in Nebraska have the ability to be healthy and have very healthy futures. This bill deals with the issue of diabetes, which is a lifelong condition. And when it happens to children in childhood, probably the most important thing we can do is to make sure that they can self-manage this disease. And I've been told we should be calling it a condition, because it is a lifelong condition. When parents find out that their children have this disease, it's usually because of...it comes maybe at a very, very early age. Their pancreas stops producing insulin. And the way to manage this disease is really to create a balance in the child's life, and create consistency between regular meals, regular exercise, regular insulin. And part of that is testing that