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Transcriber's Office

Health and Human Services Committee
January 22, 2009

[LB68 LB84]

The Committee on Health and Human Services met at 1:30 p.m. on Thursday, January 22, 2009, in Room 1510 of the State Capitol, Lincoln, Nebraska, for the purpose of conducting a public hearing on LB84 and LB68. Senators present: Tim Gay, Chairperson; Dave Pankonin, Vice Chairperson; Kathy Campbell; Mike Gloor; Gwen Howard; Arnie Stuthman; and Norman Wallman. Senators absent: None. []

SENATOR GAY: All right, thank you. We'll get started. Welcome to the Health and Human Services Committee. Two bills up today that we're going to go over. I'd like to lay down just a few ground rules. One is if you have any cell phones, could you please silence those out of respect for everybody in the room. Another is we do have a sign-in sheet. If you're going to testify, there is a sign-in sheet if you could fill that out and actually place it with the clerk over here in the box, and that's so she can see your name and print it out. And also can you state your name when you come up and spell it out for transcribing purposes. We are...something new, we are on live streaming video feeds, too, so that's a great, great new addition to the Legislature, but I did want to let everyone know that. We'll start off a little bit. We'll introduce ourselves. I'm Chairman, Senator Tim Gay from Papillion, Nebraska, and we'll start right over here. []

SENATOR GLOOR: Senator Mike Gloor, District 35, Grand Island. []

SENATOR CAMPBELL: I'm Kathy Campbell, District 25, Lincoln. []

SENATOR PANKONIN: I'm Senator Dave Pankonin from District 2, Louisville, Nebraska. []

JEFF SANTEMA: Jeff Santema, legal counsel to the committee. []

SENATOR STUTHMAN: Arnie Stuthman from Platte Center, District 22. []

SENATOR HOWARD: Senator Gwen Howard, District 9 in Omaha. []

SENATOR WALLMAN: Norm Wallman, District 30. []

ERIN MACK: I'm Erin Mack, the committee clerk. []

SENATOR GAY: All right. Thank you. I would say, and this is very pertinent because I'm going to have to leave in about two seconds, but senators will be coming and going, introducing bills. We're just introducing our bills and we have other committees we'll be attending to. So if you see senators coming and going, we do...we'll receive all your information and have a good hearing, but I will be actually leaving now and turning this over to our Vice Chairman, Senator Pankonin, and we'll get started. []

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SENATOR PANKONIN: Thank you, Senator Gay. One other thing I might mention is that we do have the light system in this committee. And you may be aware of that from other experiences, but our committee clerk, Erin Mack, runs the light system. And how it works is if you've got the green light that's four minutes, right, Erin? Four minutes for the green light. [LB84]

ERIN MACK: Five. []

SENATOR PANKONIN: Five minutes, the yellow light comes on for one minute, and the red light comes on and you're done. No, we'll let you finish the sentence or a thought, but we do want you to kind of keep that in mind. And when the yellow light comes on if you can abide by that, we'd sure appreciate it. The reason why we have that system is like today we have many people in the room. Some of you may have driven some distance to be here. And we found from past practice in HHS that sometimes we'd get to 5:00, 5:30 and there is folks that maybe drove four or five hours and they don't get a chance to speak or have very little time because we're needing to go. So that's why we have that system in place, and we appreciate you coming. And, Senator McGill, why don't you come forward to introduce your bill. []

SENATOR MCGILL: (Exhibit 1) Vice Chairman Pankonin and members of the committee, I'm state Senator Amanda McGill, that's M-c-G-i-l-l. I represent the 26th District. LB84 repeals the sunset provision of the Women's Health Initiative that originally was passed in 1999 and was reauthorized in 2004. The sunset language would terminate the Women's Health Initiative Council, which is an advisory committee to Nebraska Health and Human Services, and particularly to the Office of Women's Health. Because of the fabulous work of the Office of Women's and Men's Health, it is imperative that the Women's Health Initiative continue. The purpose of the initiative is to improve the health of women and men in Nebraska by fostering the development of a comprehensive system of coordinated services, policy development, advocacy, and education. LB84 would allow this initiative to continue its great work of improving healthcare for the women and men of Nebraska. I'll be followed by supporters of LB84 who will be able to discuss the council's history and achievements in a bit more depth. And I also have a letter of support from DHHS that I'd like to have passed out. This has been a really great initiative with a lot of great positive outcomes, and most of their programs are done through grants. They spend less than \$300 a year of actual state dollars so I would urge your support of LB84. [LB84]

SENATOR PANKONIN: Thank you, Senator McGill. Are there any questions? Seeing none, we will have now proponent testimony. Those that would like to speak in favor, please come forward at your turn. Please state your name and spell it out for the transcribing purposes. [LB84]

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JOAN NEUHAUS: (Exhibit 2) Good afternoon. My name is Joan Neuhaus, N-e-u-h-a-u-s. I am vice president for women's and children's services at Alegent Health, and I'm currently the chair of the Women's Health Initiative of Nebraska Advisory Council, so I thank you very much for the opportunity to testify. And as you might expect, I'm here to urge your support of LB84, which would eliminate the termination provision for the council which is now currently set for the end of this calendar year. I've been a member of the council since 2002, and in that time I've been very impressed with the work that we've been able to accomplish. As Senator McGill said, we act as a resource to the Department of Health and Human Services, but more specifically to the Office of Women's Health, now the Office of Women's and Men's Health. But our advice and the council relates primarily to women's health issues. One of the strong advantages of our council I believe is that it is a very diverse group. We have representatives from all walks across Nebraska. We have consumers on our council, physicians, nurses, representatives from public health, payers, representatives from hospital systems. It's really a broad array, and I believe in that diversity we're able to bring a very strategic perspective to the Office of Women's Health as it sets its priorities for the year. We have a number of priorities that we work on and one of the first and foremost has been the promotion of health education and encouragement of healthy lifestyles and preventive behaviors in women. Toward that end, we've had numerous initiatives every year that have worked towards that goal. Some examples would be that we have distributed fast, easy guides for women on health screenings, what screenings you need to get when and where and how often and that type of thing. Those were distributed through physician offices to their patients. We have offered numerous screenings itself, just offered the actual screening to women in areas of breast health, colorectal health, heart health. And because the Office of Women's Health has been very effective in obtaining grant funds, many of these are able to be offered either free or at reduced rates. And we've also, at least up until this year, had an annual health symposium for women here in Lincoln that has attracted 300 to 400 people, women every year. These are consumers of healthcare and they're also practitioners in women's health, and they come together in a very informative and interactive environment to learn about the issues facing women and some possible solutions. Another priority of the council has been to raise awareness of the health risks facing women in our state. And to that end, we have published annually a report card that I'm sure many of you have seen which helps to highlight the issues that are prevalent here in Nebraska and then that helps direct us in terms of finding solutions for those issues. So I'll wrap it up by just saying that in short I believe the Women's Health Initiative Advisory Council is a very strategic partner to the Department of Health and Human Services at fairly minimal expense. I think as Senator McGill said, our expenses typically are around \$300, \$400 per year. So I urge you to support LB84 and allow us to continue to work in partnership with the state to advance women's health. Thank you. [LB84]

SENATOR PANKONIN: Thank you for your testimony. Might stay there for just a

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moment in case any of the members might have a question for Mrs. Neuhaus. Any questions? Senator Stuthman. [LB84]

SENATOR STUTHMAN: Thank you, Senator Pankonin. Joan, in your statement you say you provide health information to women and encourage preventive health behaviors. How do you do this? Do you just put leaflets out, pamphlets or can you explain the process? [LB84]

JOAN NEUHAUS: Sure. Well, there are a number of different initiatives that we use. For example, ones I referenced was these guides. We actually published guides, a little fast, easy thing you can put in your wallet, out through the physician offices that they gave to women that tell them when are the screenings that you have to have and how often should you have them and at what age. And so it's a quick and easy guide for women to access to say when do I need to get some preventive health screening. What's the right schedule? A lot of information goes out. There's a number of health fairs that are held every year, and we provide information that's available there to women as they come through about, you know, just healthy lifestyles and preventive health. Does that help? [LB84]

SENATOR STUTHMAN: Joan, do you put this information in the federally accredited health departments? [LB84]

JOAN NEUHAUS: You know, I don't know the answer to that. I would have to make sure that somebody gets back to you on that, Senator. I can't really answer that question directly. It would make sense. [LB84]

SENATOR STUTHMAN: Those health departments are very well utilized by the low and minority people. And, you know, I was just wondering if you have, you know, the same type of brochures or...in those. [LB84]

JOAN NEUHAUS: Oh, absolutely. There's a wealth of information that goes out there, and I couldn't say exactly whether that's one of the distribution sources or not. [LB84]

SENATOR STUTHMAN: Okay. Thank you. [LB84]

SENATOR PANKONIN: Any other questions of the committee? Seeing none, we'll let you go now but thanks for coming. Any other proponents that would like to speak? [LB84]

SUSAN FEYEN: (Exhibit 3) Hello. My name is Susan Feyen, last name is spelled F-e-y-e-n. I'm a licensed clinical social worker and an independent mental health practitioner. I'm employed at OMNI Behavioral Health, and I'm here representing OMNI Behavioral Health as well as the Women's Advisory Council. I was appointed to the

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Women's Advisory Council in February of 2008 by Governor Heineman, and I'm here today in support of this important legislation that Senator McGill and Senator Howard have sponsored. This bill will allow the council to continue its efforts to support Health and Human Services Office of Women's Health. The initiative began in 1999, not only to improve the health of women, but also as an opportunity to partner and support men's health improvement as well. Since its inception, the initiative has received federal grants, grants of over \$28 million, for projects such as screening thousands of Nebraskans for breast, cervical, and colon cancer. And it's sponsored trainings for women's health and has a very comprehensive Web site that is accessible to people all over Nebraska and nationally. We participate annually in the partnership with Blue Cross Blue Shield to support educational materials and pedometers are distributed to 6,000 people across the state to encourage walking and exercise. In my work as a therapist at OMNI Behavioral Health eating disorder program, I have distributed these materials on women's health initiatives, I've given pedometers to individuals struggling with obesity, and I provided educational materials to families that are struggling with a child diagnosed with anorexia. I've directed many low-income women to the Every Woman Matters program that has assisted them in getting free and low-cost medical testing and screening. These materials and resources are very much appreciated by these women, and it's helped them to meet goals and objectives they have for themselves and their families. It really is improving the lives of many Nebraskans. I want to highlight the diversity of the individuals on the council. Each of us volunteers our time and we bring to the table a very diverse outlook on healthcare. Because of our unique perspectives, we're able to work collaboratively and to seek funding from sources outside of the Nebraska Legislature. Each of us is very dedicated to the council and the programs supported by the initiative because we see the positive impact in many lives. With such an outstanding track record and achievements, I believe that this council should continue to carry out the goal of improving health. I strongly urge you to support this and to advance it to the General File. Thank you very much. And if you have any questions, I'd be happy to answer them. [LB84]

SENATOR PANKONIN: Thank you. Committee members, any questions? Senator Stuthman. [LB84]

SENATOR STUTHMAN: Thank you, Senator Pankonin. Susan, I just have a comment. [LB84]

SUSAN FEYEN: Sure. [LB84]

SENATOR STUTHMAN: And you and the other testifier, I want to thank you both because the amount of testimony you gave, one sheet and a little bit more, is just the right amount. (Laughter) Because it gets to the point, it gives us the facts, and I really appreciate that. And I know the members of the committee appreciate that, too, because, you know, we go over this stuff and it's not lengthy, but it's very important so I

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just want to thank the both of you. [LB84]

SUSAN FEYEN: Well, thank you, and I got some help on that so I'm glad I did. [LB84]

SENATOR STUTHMAN: Thank you. [LB84]

SENATOR PANKONIN: Susan, I might ask a follow-up question as well, and I appreciate Senator Stuthman's comments because it does help when we have a big crowd. But I just want to thank you, not only for coming, but your involvement in behavioral health. We know we have a work force issue there. This committee is interested in that, as you know, and so we thank you for your efforts. And we also know there's a close correlation between physical health and mental and behavioral health. So these sort of things kind of go together, don't you agree? [LB84]

SUSAN FEYEN: Absolutely. They definitely go together and you can't separate them out. I think that's one thing the health council does really well is involves people from all aspects of health so that we can all work together on these initiatives. [LB84]

SENATOR PANKONIN: Well, things like proper sleep and proper nutrition help us all so we think that's a good message and one that helps all Nebraskans. So thank you for your work in that. [LB84]

SUSAN FEYEN: Thank you. [LB84]

SENATOR PANKONIN: (Exhibits 4-8) Any other questions? Seeing none, you can go. Any other proponent testimony? Seeing none, I'm going to read we did get numerous letters in support of this bill. There was a letter from the Department of Health and Human Services from the State of Nebraska; there is a letter from the University of Nebraska Medical Center; there is a letter from the Nebraska Pharmacists Association; from the American Cancer Society; from Alegent Health Group; and the Nebraska Hospital Association. So there are six letters that will be part of the record in support. Is there any opponent testimony today on this bill? Any neutral testifiers? Senator McGill, would you like to close? [LB84]

SENATOR MCGILL: I'll waive. [LB84]

SENATOR PANKONIN: She waived so thanks for coming. [LB84]

SENATOR MCGILL: Thank you. [LB84]

SENATOR PANKONIN: And that closes the hearing on LB84. So now we will take up the next bill, which is LB68, from Senator Wallman. [LB84 LB68]

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SENATOR WALLMAN: (Exhibit 1) Good afternoon, Chairman Pankonin, members of the committee, fellow members. My name is Norm Wallman, W-a-l-l-m-a-n, and I represent the 30th Legislative District. LB68 simply states the Department of Health and Human Services shall not close any state-owned or state-operated facility that provides residential services to persons with developmental disabilities without specific legislation directing its closure. Currently this legislation would only apply to BSDC. Should the department choose to close BSDC, there are simple guidelines established in the bill that would provide information on their plans prior to the introduction of legislation to actually close the facility. This bill resulted from the work of the Developmental Disability Special Investigative Committee. The committee was made up of seven members, including Senators Gay, Stuthman, and myself. And we spent the interim examining the quality of care and related staffing issues at BSDC. During its investigation, the committee heard from many people who were concerned about a lack of commitment to the future of BSDC, including families and friends of the residents of BSDC and current and possible future employees. The report found that this lack of commitment is a contributing circumstance to the difficulties this institution faces in hiring workers in the Beatrice community, and that this uncertainty has led to a reluctance to make a commitment to work at BSDC. And I also believe it has led to a great deal of uncertainty for the families and residents at BSDC. The committee released its report on December 15, and its first recommendation was the state must make a commitment to keep BSDC open. And I have included the rest of that recommendation in my handouts along with other key parts of the report that show why we need to make a strong commitment to the future of BSDC. And after the report was released, the committee received a letter from the Governor, where he wrote, I share your commitment to keep BSDC open. The Governor has also demonstrated his support by committing additional funds to BSDC over the next three years to assist with hiring and retaining quality staff and fixing the problems identified by the federal government. So I am very pleased to have the support of the Governor and the Unicameral to keep BSDC open, and I see LB68 as a key piece of this partnership. LB68 would make it clear that we strongly support the continued existence of BSDC, as well as provide needed certainty for the residents of BSDC and their families and friends. In addition, this commitment will provide the department with a valuable tool in recruiting and retaining quality staff, as current and future employees will know that they have a future at BSDC. I also feel that LB68 will prove to the federal government, especially CMS, that our state is committed to providing quality care for a group who have been neglected far too long. We still face problems at BSDC, but I feel that if we work together, we can make BSDC a better place where residents and staff want to be. So LB68 is just one step in this process. It is an important one, and I ask for your support. Thank you very much, Chairman. [LB68]

SENATOR PANKONIN: Thank you, Senator Wallman. Does the committee have any questions for Senator Wallman? Senator Gloor. [LB68]

SENATOR GLOOR: Senator Wallman, Mr. Chairman. From what I have heard you say,

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we have, you have, the community has an awful lot of assurance from a lot of very significant people involved in making this decision that there do not seem to be any immediate plans to make changes here. Is that correct? [LB68]

SENATOR WALLMAN: Well, at this time we hope things are getting better, you know. We are working on this. The committee has recommendations and...and we'll see. [LB68]

SENATOR GLOOR: I mean, there's obviously a fear, but you have been getting assurances from the Governor's Office, from the department, from any number of people that they want to work to make the situation better as opposed to close the facility down as a solution. Is that a safe statement for me to make? [LB68]

SENATOR WALLMAN: We would hope so. [LB68]

SENATOR GLOOR: Okay. I'm trying to decide if this is a just-in-case piece of legislation as opposed to one with an imminent danger that's out there. Thank you. [LB68]

SENATOR WALLMAN: Thank you. [LB68]

SENATOR PANKONIN: Any other questions for the good Senator? If not, we'll have proponent testimony next. Just to remind you to state your name and spell it out. If you have a testifier sheet, sir... [LB68]

MIKE MARVIN: I do have a testifier sheet. [LB68]

SENATOR PANKONIN: All right. We'll get it. [LB68]

MIKE MARVIN: We have a box for them here? [LB68]

SENATOR PANKONIN: Well, we...the box is over there now. [LB68]

MIKE MARVIN: Okay. [LB68]

SENATOR PANKONIN: We'll have a page come get it. That will work fine. [LB68]

MIKE MARVIN: (Exhibit 2) All right, thank you. Page? Good afternoon, Vice Chairman Pankonin, members of the committee. My name is Mike Marvin, M-a-r-v-i-n. I am appearing on behalf of the Nebraska Association of Public Employees, which is affiliated with the American Federation of State, County, and Municipal Employees. Our organization is a labor organization that represents many of the staff at the BSDC and the other 24-hour facilities under your jurisdiction. The Nebraska Constitution clearly establishes the Nebraska Legislature as the ultimate decider with regard to the

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management, control, and governing of all state institutions. Article IV, Section 19 reads: State institutions; management, control, governance, and determination by the Legislature. "The general management, control, and government of all state charitable mental, reformatory, and penal institutions shall be vested as determined by the Legislature." Of the many problems at BSDC, has been the lack of oversight by the Legislature in the past. There is plenty of blame to go around, from the Governor's Office to the administration of DHHS and to the Legislature's previous lack of oversight. The time for placing blame is gone. It is time to fix the problems. The Legislature needs to exert their authority, and I believe passage of LB68 will be consistent with that constitutional authority, and I would urge you to support LB68. And I'll be happy to answer any questions. [LB68]

SENATOR PANKONIN: Thank you, Mr. Marvin. Does...any committee members have any questions? Seeing none... [LB68]

MIKE MARVIN: Thank you, Senator. [LB68]

SENATOR PANKONIN: Thank you. [LB68]

JOAN O'MEARA: It's down low. (Laughter) My name is Joan O'Meara, and it's spelled J-o-a-n O-'-M-e-a-r-a. Most importantly, I am the mother of Cindy O'Meara who resides at BSDC. I am also the president of the Beatrice Family and Friends Association. I am a member of the Mental Retardation Association of Nebraska, and I am a member of the VOR, which is our national organization. There we go to Washington to get bills passed. My daughter is not going to be your bag girl in a grocery store, nor is she going to be able to serve in McDonald's or to sweep a floor. She is severely and profoundly retarded. Most of the people at Beatrice are in that category. There are some that will go out into the communities, we do know that. But the majority of them are the case like Cindy. There she has a doctor, she has a nurse, she has a physical therapist, she has a dentist, she has a psychologist, and she has daily workers that keep her like family. She considers that place family. I have been in the field of mental retardation for 54 years. I taught special ed in the school system here. I know that there are different degrees of mental retardation, and we need to take care of all those degrees. One end of the pole is Beatrice, the other is independent living with someone as a helper. And in between you have community programs, and then you have those that live in homes, in their own homes with their family, and they need help too. It's a great field and an expensive field, and I'm not denying that. But BSDC needs to be part of that. I have seen the changes and they are great. You asked one of the gentlemen here, I'm down there every week to poke my nose in all over. They call me Miss Busybody. That's all right, I don't care. I want to get to the bottom of everything. We now have a new doctor. We have a dentist. We have a pharmacy. We have nurses on duty now, around the clock. Cindy gets insulin shots everyday, has a nurse come to take her blood counts. This would be a very difficult task in a community program. She would have to go out to find a doctor.

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She can't do that, she's in a wheelchair. And many of the children down...and I call them children, are like that. This bill that Senator Wallman has initiated is very important. We can't go through this every single time. I have been fighting this since 1996. This is a bill that will stop that foreclosure without going through the necessary steps. It is extremely important that it is passed. Many lives depend upon it, not only the children down there, but the families also. It was difficult to send our child out of our homes, but we sent them to a place that we thought that was well...they would be well taken care of. And for myself, that has been true. And with that I close. [LB68]

SENATOR PANKONIN: Thank you for your testimony. Any questions? Senator Howard. [LB68]

SENATOR HOWARD: Thank you, Senator Pankonin. Well, first off, thank you for being such a good and responsible parent that you're there every week and you're looking at how things are going for your daughter. I'm just... [LB68]

JOAN O'MEARA: But I'm not unusual. [LB68]

SENATOR HOWARD: I'm glad to hear that. That's a good thing. I'm wondering, in your opinion, why has it taken so long for the improvements to be put into place? Because this has been a...this is not a new problem and not an overnight problem. And I know the staffing shortages have been going on for over a year. But it...just from what you see and from being down there, why do you think it was such a lengthy process? [LB68]

JOAN O'MEARA: In 1996 when Mark Brown was around as the president, he's now deceased, we went to HHS to talk to them. HHS "yessed" us to death, and that was it. No action. And that's what would continue all the way down, until we finally talked to The Magnificent Seven senators, I will call them, and they finally looked into all of this. But we have been fighting it for that long a time. It's a shame, but that's what happened. [LB68]

SENATOR HOWARD: Well, I am very glad to hear that you feel that things are on the right path now. [LB68]

JOAN O'MEARA: Oh, they are. They are. [LB68]

SENATOR HOWARD: Good, good. [LB68]

JOAN O'MEARA: Yes. [LB68]

SENATOR HOWARD: Thank you. [LB68]

JOAN O'MEARA: Thank you. [LB68]

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SENATOR PANKONIN: Thank you, Senator Howard. Senator Stuthman, did you have a question? [LB68]

SENATOR STUTHMAN: Thank you, Senator Pankonin. At what age did your child go to Beatrice? [LB68]

JOAN O'MEARA: At nine and a half. [LB68]

SENATOR STUTHMAN: Nine and a half. [LB68]

JOAN O'MEARA: Yes. And she's 54. [LB68]

SENATOR STUTHMAN: And she was in your home the first nine years, right? [LB68]

JOAN O'MEARA: Oh, yes. [LB68]

SENATOR STUTHMAN: Yes, so. [LB68]

JOAN O'MEARA: Yes. In fact, Cindy had open heart surgery while she was home and clubfoot surgery, and then, after that, went to BSDC. [LB68]

SENATOR STUTHMAN: And like you had mentioned to Senator Howard, you're satisfied with the management at BS...at the Beatrice... [LB68]

JOAN O'MEARA: I couldn't be more pleased. Cindy calls some of the people there, two of them, Mom. But when she calls me Mom, there's a different inflection. She does know the difference. But for a child to go and say that, you know that she is being well taken care of. She just recently spent a...had a bout in the hospital. If it wasn't for the alertness of the staff, she could have died. And they rushed her down to the hospital. And we couldn't stay overnight, they shoo you out after visiting hours. But a staff worker could stay, and they stayed with her all night long. And that's without pay, people. [LB68]

SENATOR STUTHMAN: Uh-huh. [LB68]

JOAN O'MEARA: They do so many things, I just can't explain how well that they take care of the people there. We had some bad ones, but we got rid of them. (Laughter). [LB68]

SENATOR STUTHMAN: Thank you for your testimony. [LB68]

JOAN O'MEARA: Uh-huh. [LB68]

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SENATOR PANKONIN: Any other questions, committee? Thank you. [LB68]

SENATOR HOWARD: Thank you. [LB68]

JOAN O'MEARA: And I thank you. [LB68]

SENATOR PANKONIN: Additional proponent? [LB68]

PATRICIA CRAWFORD: (Exhibit 3) I'm Patricia Kelly Crawford, and I live in Omaha. My son Matthew is a resident at Beatrice State Developmental Center. He has an older brother and sister and a younger brother and sister and lived in our home until he was 14, and we were very much aware that he was not being served correctly. He didn't get the...what he needed. And I can remember one of the first times we went to Beatrice to see him, after he was placed there, after we took him down there, and, oh, maybe he had been there a few months or something like that, and we came to see him. And when we were ready to leave, he went and sat as far away from the door as he could get. Now he has no speech, he's profoundly retarded. But he sat as far away as he could get. And I said, come here, Matt, give us a kiss goodbye. Come here, Matt. And he sat there and he sat there and, you know, as...he can't say Mom, just leave me here, I'm happy here. But I always thought that was a message there, you know, that he gave us. So and he...another interesting fact about Matthew's stay there, the same two ladies who were on the first shift when we took him down there, are still on the first shift in his cottage in 416 Sheridan. Now, that...and there are many employees down there who, you know, just made a career of taking care of these folks, and they love their...they love them like...well, Joyce said to me, she said, you know, he's like my own son, I have had him so long. So that's the kind of care he's getting. But today I'm speaking for all the members of the Mental Retardation Association of Nebraska, in strong support of LB68, should any administration attempt to close BSDC. We are also concerned that Governor Heineman is exploring the idea of privatizing BSDC. The implications of privatization are frightening, as a private company could turn away or refuse to care for certain difficult-to-serve persons, perhaps those who have no promise of a healthy return on the private company's investment. Where will they go? We are unhappy that BSDC, once a model facility, has been allowed to decline in quality, but are hopeful that quality will soon be restored. The United States Supreme Court, in its Olmstead ruling, requires that some individuals must be served in institutions. Quoting from Olmstead, "Institutional settings are needed and must remain available," which was noted by a plurality of justices. A majority of justices in Olmstead recognized the need for private and public institutions. "We emphasize that nothing in the ADA..."--that would be the Americans with Disabilities Act--"...or its implementing regulations condones 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." There's no reason to believe that placement in the

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community is always cheaper as is so often touted. This belief has led to an underfunded community system that is not at all prepared for the complex needs of most of the people who now reside in large, specialized facilities like BSDC. History does repeat itself, and in the middle of the 1990s in California, 2,000 severely disabled residents at developmental centers were moved to community-based programs. The ensuing debacle merited news reports for 17 consecutive days on the front page of the San Francisco Chronicle. There were many hundred deaths. The whole sordid story is available through VOR. Please contact me for more information. We urge you to approve LB68 for further consideration by the Unicameral. [LB68]

SENATOR PANKONIN: Thank you for your testimony. I'm going to have you, we'll have a page pick up your testifying sheet, but I...if you could...I don't think we got your name spelled out. [LB68]

PATRICIA CRAWFORD: Oh, I'm sorry. I'm sorry. [LB68]

SENATOR PANKONIN: So we'll have you do that for our clerk and the transcriber, please. [LB68]

PATRICIA CRAWFORD: Sure. P-a-t-r-i-c-i-a K. C-r-a-w-f-o-r-d. [LB68]

SENATOR PANKONIN: Thank you, and Senator...Chairman Gay has returned to the committee and we are in proponent testimony on LB68, and I don't know if there are any other committee questions. Or are there any committee questions for this testifier? If not, you're done and Senator Gay, we're on proponent testimony. [LB68]

SENATOR GAY: Thank you. Thank you, Senator Pankonin. Thank you, Senator Pankonin. I just switched with Senator McGill in Judiciary. [LB68]

PATRICIA CRAWFORD: Thank you very much. [LB68]

SENATOR PANKONIN: Yeah. [LB68]

SENATOR GAY: All right, other proponents who would like to speak? How many proponents would like to speak today? Can you raise your hand that want to come up and speak. So...well, if you do, start making your way on up, and we will get to you. Go ahead, hello. [LB68]

MARGARET HUSS: (Exhibit 4) Hello, my name is Margaret Huss, H-u-s-s, and I live in Omaha. I grew up in the Florence area of Omaha with nine siblings, including my brother, Clete, who has been a resident of the developmental center for over 25 years. Cletus has a profound, lifelong disability. He has a seizure disorder, he is nonverbal, he is considered profoundly retarded and has been described as functioning at a preschool

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level, yet he is also a 6-foot-tall, physically robust man. He needs assistance with each and every activity of daily living. He has received that assistance with basic human needs and much more at Beatrice. My parents chose BSDC for Cletus when he became a young adult, as the best of all available options. I know from firsthand experience that this is still the case. I am here on behalf of Cletus and others like him who cannot speak for themselves. My goal is to urge you to support LB68. I have also supplemented my brief statement with an article which I urge each of you to read. I want to thank you for the opportunity to speak today. LB68 makes sense for Nebraska because it sends a message of support and provides for choice. LB68 will cost nothing to implement, yet it supports families struggling to help loved ones who have profound disabilities. It sends a message that we, as a state, have the collective will to provide for our most vulnerable citizens. It also sends a message to the beleaguered staff of BSDC that we recognize and support their efforts, and that their continued work is worth it and is valued by the decision makers in Lincoln. LB68 also engages elected representatives, and this is really the most important aspect of the bill: the requirement that any future closure of BSDC could only be accomplished through legislative action. A number of other states have passed or are considering similar laws. LB68 would provide increased protections for our most vulnerable Nebraskans because it would empower citizens, via elected representatives such as yourselves, to have a voice. An extreme measure like closure could not be implemented solely by the Governor's Office on the advice of outside consultants or appointed administrators. I urge you to support this portion of the bill in particular, because I believe that our state senators and the Unicameral are in the best position to decide what is right for Nebraska. If I had written the bill, I would have made it even stronger and asked that it not be just for closure but also for change and control, which would be a significant event for the Beatrice campus. As members of the Health and Human Services Committee, you're given the task of addressing many challenging matters, and you probably already know that the developmental disabilities area is a regular minefield of complexity. You're charged with making tough decisions and then defending them. I want to address just a couple of critical areas that will help you support a decision to act favorably in LB68. First, cost. Care is not cheaper in the community. There is a common misperception that facilities like BSDC are more costly to operate than their community-based counterparts. The reality is, that this is not true for people with the most severe disabilities. The profoundly disabled are the most needy, most vulnerable, and most costly, regardless of the service setting. The bottom line is, that when all factors are taken into account, large savings do not occur when states close institutions and shift residents to group homes. To support this, I have provided you with a 2003 article in a peer review journal which looks at cost comparisons and historical research over a 25-year period. It's 15 pages long, but as lawmakers I urge you to read it. It will help you understand the complexities involved and may also help avoid making decisions based on faulty assumptions that ultimately could result in lower quality of care for our most vulnerable citizens. The other thing to remember as you go forward, is that there is mainstream support, and much of it, for BSDC. Given the recent bad news about identified shortcomings, it's sometimes easy to

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lose sight of the fact that it still remains a good and needed facility. Those of us who are in it for the long haul know that community settings, which are subject to much less scrutiny and regulation, are no panacea. They suffer from the same problems that plague BSDC, including underfunding, lack of adequate staff, and other resources. Later on today, you'll no doubt hear from opponents of BSDC. Many of them are well-organized and well-funded, sometimes with taxpayer dollars, and they typically want nothing short of closure, even though that would spell disaster to those who call BSDC home. When you hear these dissenting voices clamoring for closure, remember that they represent an extreme view which is not supported by many Nebraska taxpayers. It is not the view of our Governor, who has stated that addressing the problems at BSDC is an important priority for his administration. It is not the view of the special investigative committee, which concluded, after much study, that BSDC must remain open to provide care for the most challenged of individuals. In conclusion, I want to thank you again for the opportunity to speak today. I urge you to support LB68 to help ensure the ongoing viability of BSDC. Where there are problems, let's fix them. The community is not for everyone. It comes with long wait lists, compromised care, and limited safeguards. I believe Nebraskans are sensible people. We know that a range of options are necessary. With your help, we can decide for ourselves what is best for Nebraska. LB68 makes sense, it's fiscally responsible, and it is supported by many Nebraska citizens. Thank you very much for your time and consideration. [LB68]

SENATOR GAY: Thank you. We'll see if there is any questions from the committee. I don't see any, thank you. Other proponents? [LB68]

JACK NICHOLS: (Exhibit 5) Good afternoon. My name is Jack Nichols, N-i-c-h-o-l-s, I live in Omaha. I have a son at BSDC. He's been there just a little over two years. And of course, heads up, I'm in favor of a little bit of checks and balances on what goes on in the state. I believe you people should have the authority to choose for us, we need that. Now I'll explain. I was talking to one of my grandsons who lives in Florida, telling him about our cold night, 16 below zero. His response was it was cold there, too, it got down to 30 or so. With that in mind, please believe me, it is just as hard to have someone that has not been there to understand the heartache, the stress, the up days, the bad days, yet we do not have it as bad as many others. In our family, we are very fortunate to have found a place like Beatrice State Developmental Center. I'm here today to share our family's experiences for 30 years in the quest for best care. The Omaha Public School System carried the load with special education by fantastic educators, but at graduation of high school that help left us. Many different day programs could not cope with the challenge of our son. Several visits to local mental facilities for temporary evaluations, residential at Douglas County Health Center thus evicted due to the incompatible to the needs, three residential stays at Norfolk Regional Center. They could not serve us; the center sent our son to Lincoln Regional Center and that was not the best structure for environment. With all of that, there was a group home in Kearney, Nebraska. Why Kearney? Because that was the only program closest to Omaha willing

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to try. Let it be known that most communities have neighbors, such as Omaha, to a proposed site, that go to their local governing body and complain about the decline of property value and the increased danger to them. So I see you have a community in Beatrice that, first, many people who live there wasn't even aware that it was there, but now they support the cause. So why is there such a rush to allow community-based programs to pick and choose the least challenged, to only take away the peers for the most challenged to befriend? As far as abuse charges, in my opinion, do we not have emergency rooms crowded with nonspecial needs people, so why do we expect staff to be super human? Our special needs person has a life now, with structure, employment on and off campus, with safety a first, with least restrictions, with super care that has not been available anywhere else. So with the fear of the cost factor being the sole reason to reduce the available facilities, you must be involved in an informed status and must be able to help make the decision in a fair, responsible, in touch with needs of all your constituents. The Von Maur incident hit the headlines for awhile, as many other cases of mental health legal problems go unaddressed. The wonderful safe haven law got everybody's attention only to get appealed right away, but still the pain of the families can be felt and hopefully is still in your thoughts. Thank you for all taking a look at the lack of programs for special needs people, as most are in position for the need due to health problems not in their control, not their fault. Please help. Thank you. [LB68]

SENATOR GAY: Thank you, Mr. Nichols. Any questions from the committee? I don't see any, thank you. [LB68]

JACK NICHOLS: Thank you. [LB68]

SENATOR GAY: Other proponents who would like to speak on this bill? No other proponents? All right, we'll go to opponents. Can I see a show of hands of how many people would like to speak opposing this bill? Okay. Come on up. [LB68]

JOHN WYVILL: (Exhibit 6) Good afternoon, Senator Gay and members of the Health and Human Services Committee. My name is John Wyvill, J-o-h-n W-y-v-i-l-l, the director of the Division of Developmental Disabilities, Department of Health and Human Services. I am here to testify in opposition to LB68. LB68 would effectively impair the ability of the department to make administrative decisions regarding the closure of a state-owned or operated facility that provides residential services to persons with developmental disabilities. There are a number of issues raised of concern to the department. First, the language of the bill could potentially affect a variety of other facilities under the department's purview that provide residential treatment to clients with developmental disabilities, including regional centers, the chemical dependency unit for youth on the Hastings campus, and others. This bill is unclear as to whether the scope is for all people that have any kind of identified developmental disability or only for individuals who qualify for developmental disability services within the Division of Developmental Disabilities. In regards to the Beatrice State Developmental Center, or

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BSDC, the Centers for Medicaid and Medicare Services has decertified BSDC. Currently, our federal funds continue to flow due to the fact that the state is in a formal process of appealing the decertification decision. Currently, the time line of our appeal projects a final decision on the status of BSDC to be reached by the federal government in June 2009. If the appeal fails, our state will lose federal funding within 30 days of the ruling. This amounts to approximately \$29.7 million in federal funds per year. As this bill is written, if the federal funds cease in July of this year, the department would have to wait to obtain legislative approval to initiate closure. This would equate to approximately \$29.7 million in state funds to operate the facility. The department has no intention of making any drastic changes regarding BSDC without notifying the Legislature, our residents, the guardians, families, and staff. The department continues to communicate with all interested parties on progress and challenges at BSDC. There are many factors that must be taken into account to best serve the residents currently at BSDC. The department needs to maintain the flexibility to make administrative decisions that are in the best interest of the Nebraskan taxpayers, and, more importantly, that are in the best interests of the people with developmental disabilities that we serve. I thank you for this opportunity to testify and I am happy to answer any questions the committee may have. [LB68]

SENATOR GAY: Thank you, Mr. Wyvill. Any questions from the committee members? Senator Campbell. [LB68]

SENATOR CAMPBELL: Director Wyvill, would you agree that there are some residents of BSDC that need that kind of facility, that probably would be very difficult for them to be in a community-based setting? [LB68]

JOHN WYVILL: There are residents, Senator, that currently are receiving services that need ICF/MR level of care, that's correct at some place in the state of Nebraska. [LB68]

SENATOR CAMPBELL: Would there be any other alternative to that than this facility right now? [LB68]

JOHN WYVILL: I believe, if I understood the question correctly, Senator, you asked if the residents need certain level of care. And the answer is there are residents that are there that need a certain level of care whether it be at BSDC or elsewhere. [LB68]

SENATOR CAMPBELL: I guess I'm trying to figure out where else, given some of the testimony that we have had today from the parents, what other facility there would be as an alternative in the state, if we close BSDC? [LB68]

JOHN WYVILL: There are a variety of options that are available to guardians to choose from. Depending on the level of care, it could be an ICF/MR facility, which is an intermediate care facility for the mentally retarded. There are three such facilities in

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existence at this time throughout the state. They are privately run, run by Mosaic. There are also community-based DD programs that are run throughout the state that provide a different level of services depending on the need, the behavioral needs or the medical needs. [LB68]

SENATOR GAY: Any other questions? Senator Howard. [LB68]

SENATOR HOWARD: Thank you, Chairman Gay. John, I know you haven't been up here with us and gone through this for decades. You're a more recent comer to the situation. But, having been on the Health Committee for the past four years, and more recently, the last two when the problems with Beatrice really began to surface, I'm just wondering why, in your opinion, did it take so long to get a handle on this? I just...we heard so many reports over a year's time that things were being corrected and getting better and improving and we were on the right track. But what do you see as the reason that that never really occurred? [LB68]

JOHN WYVILL: Senator, there is unfortunately no easy answer, but I think can be boiled down to a variety of factors. I think the problems at the facility were many years in the making, or the challenges that we have faced. Some of the challenges deal directly with the ability to attract professional and direct care staff to the facility. Some deal with the organizational changes that have been made in state government in the '90s. In terms of under the present organizational structure, that when we have problems or challenges to the facilities, now the senators know about it. And now the higher-ups in HHS because of the reporting requirements, so you have (inaudible), so some of the checks and balances that are identifying problems. So it's not a situation, Senator, where someone woke up and the problem was there when the federal surveyors came in, in 2006. Make no mistake, there were some serious challenges in there and it's a culmination of several challenges. As that the...we have taken several different tacks to address the variety of challenges, as we work through those, because ultimately now it boils down to addressing the staffing needs, making sure...but our first and foremost is we have to do our very best to make sure the clients are safe and free from harm, and that's the first and foremost goal. And there is a combination of factors that are built into that. Some, not necessarily the facility's fault but, you know, the situation, you know, the location where it is in Gage County creates some recruiting challenges, the roles of oversight had changed, and then it is very challenging to have to keep up with the consistent best practices of an ICF/MR. And, as you know, being in social work and when you're running a 24/7 facility, if you're not...it can change overnight fairly quickly, and those are the challenges that we have. [LB68]

SENATOR HOWARD: Do you feel it's on the right, for lack of a better term, on the right road right now? [LB68]

JOHN WYVILL: I think improvements are being made, Senator. The question has to be

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remained is whether that is going to satisfy the conditions of participation for CMS or with the United States Department of Justice. And those are the questions we always have to continue to strive and continue to improve, and that is a constant challenge. And that's a day-to-day event. [LB68]

SENATOR HOWARD: Thank you. [LB68]

SENATOR GAY: Senator Pankonin. He caught you before... [LB68]

SENATOR PANKONIN: Thank you, Senator Gay. Director Wyvill, what I think this boils down to, from your department, is there is maybe no immediate plans to do anything with Beatrice but you would hate to have a straightjacket of not having the flexibility on...well, you mentioned earlier about some of the other facilities in your testimony, but that could be changed by amendment to just be Beatrice if we...if they wanted to in LB68. But what's really the position here? Do you think...is it the intent of the department to keep Beatrice open but you just don't want this inflexibility? [LB68]

JOHN WYVILL: I think from the... [LB68]

SENATOR PANKONIN: Or what is kind of the plan? [LB68]

JOHN WYVILL: I think if the senators take anything away from my testimony today it's basically from a state perspective. We need to preserve every one of our options that are available to us administratively and we would ask you not to tie our hands in whatever we need to do with the facility. First and foremost, as you, as well as any parent in the state of Nebraska with a child with a developmental disability, our first and foremost goal is the health, safety, and welfare of our clients. And obviously any such decision to make concerning the facility must be done in consultation with the Legislature. [LB68]

SENATOR PANKONIN: Thank you. [LB68]

SENATOR GAY: Senator Gloor. [LB68]

SENATOR GLOOR: Thank you, Mr. Chairman, and I will, I think, repeat to a certain extent a question by Senator Pankonin. Director Wyvill, are you saying that you feel the definition of state-owned or state-operated facility, as is in the wording for the proposed addition, could relate to community programs or residential care programs? [LB68]

JOHN WYVILL: With all due respect to the sponsors that have written the bill, there is a possibility that it could be construed broader than BSDC. [LB68]

SENATOR GLOOR: Okay, thank you. [LB68]

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SENATOR GAY: (Exhibit 7) Any other questions for Mr. Wyvill? I don't see any. And I would say, Director Wyvill, that I think now is the time with...we got (inaudible)...Senator Wallman, Senator Stuthman, myself, and others this summer did put a report together that I would encourage you to read, and I think it has a lot of history of where it went, where we were, where we are. Now we need to decide where we are going, I guess. So, but anyway, there was a lot of hard work put into that and time and effort put into that report and hopefully you'll get a chance to review that as well. So, any other questions? I don't see any. Thank you. Any other opponents who would like to speak? Anybody neutral that would like to speak on this issue? Kathy. Kathy, before you get started, I just wanted...we did receive a letter of support for LB68 from the Nebraska Hospital Association so just for the record. Whenever you're ready. [LB68]

KATHY HOELL: (Exhibit 8) Okay. Chairman Gay and members of the committee, my name is Kathy Hoell, K-a-t-h-y H-o-e-l-l, and I am here testifying as the president of The Arc of Nebraska. And before I begin, because of my disability, I am requesting a reasonable accommodation regarding your little lights here. [LB68]

SENATOR GAY: Kathy, for you we will take care of it. [LB68]

KATHY HOELL: Because that thing won't work. So I will ignore them. Okay, The Arc of Nebraska is a support and advocacy organization working with and for people with intellectual and other developmental disabilities. We are a statewide organization with 17 local chapters and approximately 2,500 members across the state. Now, we are a state-affiliated chapter of The Arc of the United States. The Arc strongly believes that people with intellectual and other developmental disabilities have the right to live in communities of their choosing and be fully included with people who do not have disabilities. We appreciate Senator Wallman's introduction of LB68 to develop procedures for ensuring that closure of BSDC is done in a "planful" and deliberative way. LB68 recognizes the department is in the best position to determine closure of BSDC, as its operations are within the department's purview of responsibility. However, the findings of LR283, the special investigative committee you were referring to, has demonstrated the department may not be able to adequately carry out that responsibility on its own. Senator Wallman is to be commended for seeking to involve the Legislature in this regard. However, we offer the following recommendations. One, we see involving the entire Legislature as burdensome. The department's 60-day notice of closure should go to the Executive Committee for approval rather than the full Legislature in order for action to be taken between sessions. This would eliminate having to call a special session to convene the entire Unicameral. It would also eliminate the continuation of unnecessary expenditures at the facility until such time as the Unicameral reconvenes. Because the department--number two--because the department does not manage or have ownership of BSDC, it may not be able to provide information about the state's plan for transfer of ownership or reuse of the property. Any notice of intent to close

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should not be required to include such information. Therefore we are recommending that you delete on page 3, lines 5 and 6. The Legislature should appoint a Developmental Disabilities Reform Council to monitor the department's progress towards meeting basic safety criteria to ensure that closure occurs when appropriate community-based services and supports are available for persons currently receiving services at BSDC. The council should include people with developmental disabilities, family members, providers of developmental disability services, and legislators to ensure that everyone is at the table to enable quality services for people with developmental disabilities in Nebraska. The findings of LR283, the special investigative committee, demonstrated a need for extra monitoring and accountability in the quality of services provided to Nebraskans with disabilities. Community-based services must be adequately funded to ensure quality and capacity to serve individuals leaving BSDC. As center services are reduced or discontinued, the department should make appropriate corresponding reductions in the center expenditures. All funding related to the provision of center services that are reduced or discontinued should be reallocated and expended by the department for purposes related to the statewide development and provision of community-based services. Public funds should be shifted from institutions to the community to accommodate these moves. And this language is modeled after the Revised Statute 71-810 from the Behavioral Health Reform Act. We urge you to consider the proposed regulation and to move LB68 out of committee to General File. Are there any questions? [LB68]

SENATOR GAY: Thank you, Kathy. We'll see, any questions? Senator Pankonin. [LB68]

SENATOR PANKONIN: Kathy, you were worried about the lights. You did fine. [LB68]

KATHY HOELL: Yeah, I did because she didn't hit the button. (Laughter) [LB68]

SENATOR PANKONIN: Oh, she gave you a little cushion. All right. My real question--and thanks for coming by the way--from your testimony, you're almost, it sounds like, assuming it will close. [LB68]

KATHY HOELL: As a person who has lived in a nursing home, which is another form of institution, I believe people can live in the community. I know people who are living in the community who are nonverbal, who have seizures, who do all these things, and they still receive the care they need in the community. Now, the level of independence in the community varies from individual to individual. For example, in Omaha, ENCOR has a facility, it's a medical facility, but it's in the community. And they have a higher level of care need for the individuals that live there. If something like that could be replicated, that would be ideal. But I guess I do believe that everybody can live in the community, but they do require different levels of service and different levels of care. [LB68]

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SENATOR PANKONIN: Okay, thank you. [LB68]

SENATOR GAY: Okay, thank you. Any other questions? I don't see any at this time. [LB68]

KATHY HOELL: Okay. [LB68]

SENATOR GAY: Thank you, Kathy. [LB68]

KATHY HOELL: Okay. Bye. [LB68]

SENATOR GAY: All right, anyone else who would like to speak in a neutral capacity in this issue? If not, we'll turn it over to Senator Wallman if he'd like to close. [LB68]

SENATOR WALLMAN: First of all, I'd like to thank you, Chairman Gay and members of the committee. Fellow committee members, BSDC is, as you all know, is in my district. And I appreciate the testifiers, and also I have their concerns, I'm proud they are in my district, the caretakers. And I understand that the department would like to keep their options open and have some flexibility. I can understand that. But I feel it is much more important for us to make a strong commitment to the future of BSDC, which is a care facility, which, as we all know, we have a waiting list. So the private care providers, we don't have enough. So to me, this is a need for a commitment overrides their desire for flexibility. So our committee has heard time and time again about the need for a commitment, and LB68, I think, would make it a commitment from the Legislature to let the workers know, the frontline care workers, and I'm glad they're here, that we do care for the developmental disabled. And so I think I want to make that very clear, and I am proud to be a member of that community. Thank you. [LB68]

SENATOR GAY: Thank you, Senator Wallman. Is there any questions from the committee? Thank you, Senator Wallman. Senator, we have a...Senator Gloor. [LB68]

SENATOR GLOOR: Chairman, probably not a question to Senator Wallman as much as a comment to the workers. I can't imagine what you have been through. I have managed large numbers of employees in my life and I know the unsettledness that goes along with a situation like this. Your level of commitment to your clients, to the residents down there, I think I have heard from a number of senators is appreciated and recognized and you are to be applauded for what you have been able to do in spite of the cloud that has hung over all this. (Applause) [LB68]

SENATOR GAY: And that goes for Senator Wallman, too, you do a fine job representing all of them. You do...you are the go-to person. Senator Campbell. [LB68]

SENATOR CAMPBELL: Thank you, Senator Gay. Senator Wallman, I just want to make

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sure, because I picked up on one comment, and I'm sure you're going to know the number, but you indicated that BSDC has a waiting list. Did I hear that right? [LB68]

SENATOR WALLMAN: Yes. [LB68]

SENATOR CAMPBELL: Do you happen to know the number to that? [LB68]

SENATOR WALLMAN: I think it was 140 some. (Inaudible) [LB68]

_____ : To BSDC? (Inaudible) [LB68]

SENATOR PANKONIN: It's the whole system. [LB68]

SENATOR CAMPBELL: Oh, it's the whole system. [LB68]

SENATOR WALLMAN: It's the whole agency. [LB68]

_____ : (Inaudible) 2,000. The whole system has 2,000, for services. Now that services can be Beatrice, community programs, or in homes. [LB68]

SENATOR GAY: We'll get the Senator that information. [LB68]

SENATOR CAMPBELL: Thank you. [LB68]

SENATOR WALLMAN: Okay. [LB68]

SENATOR GAY: Okay, all right. Any other questions for Senator Wallman? Okay, I don't see any. Thank you. [LB68]

SENATOR WALLMAN: Thank you. [LB68]

SENATOR GAY: With that, it closes out our day. Thank you all for coming and attending. [LB68]

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Disposition of Bills:

LB84 - Placed on General File.

LB68 - Held in committee.

Chairperson

Committee Clerk