

page 1243 but I believe you will find them in your bill books, Mr. President. Request #2008.

SPEAKER MARVEL: Senator Fowler.

SENATOR FOWLER: These amendments are worked out in discussions with representatives of the County Attorneys Association, Mr. Michael Whetstone and Dennis Rasmussen working on behalf of certain interests of medical groups and associations. If you will recall on General File we adopted basically the County Attorneys draft of LB 222 and advanced the bill. There are a few modifications that those of us who worked on the study committee that developed LB 222 felt should be done to clarify some things and define more of the structure. The amendments are basically incorporated as a redraft of the bill so that you can see how the whole thing fits together. If I could I would outline the differences between the original County Attorneys draft and the amendments that are here. The amendments, we believe, is a more workable approach to this. It is basically the concept though as developed by the County Attorneys. Board membership was broadened to include the Director of the State Health Department and the head of the State Patrol. We felt that both those agencies, the Health Department and the State Patrol should have representatives on this board. We did remove the requirement that a local law enforcement officer be on it. So, essentially, the board membership was increased by one person. We added two, took one off. There was concern expressed on General File about the per diems, whether or not they were too large. It was a hundred dollars for each board member. We cut it to fifty dollars and indicated that any other publicly paid official that may be on the board, such as the County Attorney, the Director of the Health Department, the head of the State Patrol, they would not be eligible for the per diem, only the citizen members, if you will, would be eligible for that and that would be fifty dollars. In the original County Attorneys draft there were certain powers that were given to the board that we felt administratively would be best left with the Chief Medical Examiner. We felt that maybe the board was involved too much in some administrative details so we shifted power from the board down to the Chief Medical Examiner, specifically in the area of training programs. The original draft said that the board would do training. We felt that the Chief Medical Examiner should be able to do the training programs obviously with the supervision of the board. Also, then the Chief Medical Examiner should have the power to recommend to the