

SENATOR CLARK: The Chair understands Senator Haberman had his light on all the time so I will let him respond here for a moment even though you were closing. Senator Haberman.

SENATOR HABERMAN: Mr. President, members of the Legislature, I have two points that I wish to make and I thank the Chair for letting me speak. The first point is I'm glad that the Kearney hospital is keeping a registry. I'm sure they would share it with anybody. I'm glad that Lincoln has been keeping it. I'm sure they would share it with anybody. It looks like we've got a pretty good system going now and it is awful easy for Senator Kahle to stand up here and say, "Boy, it doesn't make any difference what the cost is, we've got to have this sort of thing." I'm not built that way but my real point is and I can't verify it to you now, but I will verify it to you before this bill is passed is that testimony was given and I say, I can verify it now. In the State of Iowa this cancer registry is costing them 1.2 million dollars. That was testified in the committee hearing. So this isn't any little significant bill, Senator Kahle. This is a bill that can grow and grow and grow and in Iowa it has grown to 1.2 million. So I cannot support it. Let's take some of the \$500,000 that we gave additional to Eppley. Let them help gather this information. So I ask you to stop and think, fellow senators. This can be done on a voluntary basis because it has already been proven they are keeping the records. But let's don't get ourselves in a crack and behind something that is going to cost us 1.2 million dollars. Thank you very much, Mr. President, I appreciate your letting me talk.

SENATOR CLARK: The only reason I called you because your light was on and I missed it. Senator Johnson, you've got about two minutes to close.

SENATOR JOHNSON: I do want to respond to the 1.2 million dollar figure from the State of Iowa. Iowa's cancer registry program was a very special program funded by the National Institute for Cancer which is a federally funded program called the SEERS system. What happened very simply is that the Cancer Institute in Washington, D.C., said we're going to do a very special analytical study of the incidence of cancer in certain types of communities. We are going to pick some urban centers and a rural area and they chose Iowa as the rural area and they are going into every hospital in Iowa. They are going through records very tediously and they are looking at things very closely and they are doing intensive followup but what they are doing in Iowa is not the nature of the system here. This system here very simply is taking information that exists from