

want, to know what we have and to work together to accomplish that goal. Now this managed competition in the rural areas, they're looking at what's called managed cooperation and these regional based plans that I've got in mind for our state would likewise be managed cooperation. On the regions, in our rural areas we don't have that much competition, although we do have a little bit of it from, say, this hospital and that hospital, from this town to that town, but what really needs to happen isn't competition with our small town hospitals. It's got to be cooperation. We've got to get people working together. We've got to understand the common cause that we all share of saving money and reaching out and providing health services to our citizens and that comes in many forms. We have health access problems to those that are poor who don't have health insurance. Those are 155,000 Nebraskans. But you also have health access problems in our rural areas because there, again, the difficulty in getting a physician, the difficulty in getting a hospital, the difficulty in having the different providers of health care is there. The only way we can join forces and accomplish the common goals that we share is to, on a local basis, regionally plan together to accomplish what we want to achieve through our health care system. So the idea is to go to a regionally based board that would be of consumers and purchasers of health care and this is exactly what will eventually happen under this national plan. Then you have advisory committees of public officials, providers of health care, community groups that are out there, the insurance industry, have those people all involved in the planning process, but ultimately have the consumer and the employers out there, the purchasers of health care, making the plan. That's the dynamic change that has to occur. We've got to go away from a provider-based system to a consumer-based system that allows some of the market to compete and also to cooperate to achieve greater efficiency in our health care system. That's exactly the model that I have in mind. That's exactly what I think needs to happen and that's outlined in another chart that I've got for you. Then I've got two other things that came to us from a briefing by Sister Norita Cooney with the Blue Ribbon Coalition that's working on Nebraskare. Those are a definition of community care networks and goals of the vision. If you look at those two things, this is what the providers are looking at and hopefully accomplishing and that is in line completely with what I'm thinking these regionally based systems have to do as well. The providers need to work together to look at the overall health of their participants. They need to work together to accomplish the goal