

just a couple of days ago we did discuss this for a couple of hours in the morning. We broke for lunch and when we came back it was voice voted, or there was a vote to advance it before we had any chance to resolve a couple of hanging issues, so I wanted to take just a moment to tell you that first off the amendment that would have required equal or better price of prescriptions to get the equal copay that is called for in the bill, that amendment was defeated. So the concept of equal copay now means that, as it stands with the bill, is the local pharmacy, there is no restriction on what price they charge, whatever price they charge is the price they charge as I understand it, but they'll still get the equal copay. So there is no direct incentive available if you pass this bill for a PPO in the State of Nebraska to encourage a consumer to utilize a lower cost provider of their prescriptions and that is a concern. We've taken away an incentive to contain cost. The bill was intended to help rural local pharmacies. As I indicated on Select File, 84 out of the 88 PPOs are in Lincoln or Omaha. So if you're talking about rural health, this bill doesn't address rural health. It's really going to affect Lincoln and Omaha primarily. Secondly, the idea that the local pharmacy can provide better counselling is true generally, I would agree, except in this case we're talking about long-term maintenance drugs. These are people that have chronic illnesses, long-term illnesses. The drugs they use under this mail order are drugs they've used and will use for a long time. There is not a need for counselling as you typically would have with short-term utilization of drugs. Third, as I indicated on Select File when I handed out some letters from businesses, the businesses that are aware of this bill oppose it because it restricts their ability to contain costs for the health insurance for their employees. They see this as a negative step in their efforts to provide health care and contain the cost of the health care for their business. Fourth, the concern about consumers paying a higher price because there isn't a price equalization amendment that was adopted, the consumer is most likely in my view to pay higher copays where today they have the option for a lower copay or a base, a lower cost base in which to have the copay assume. So in my view it is anticonsumer and the Parkinson's people and others have already contacted some of you about that. Lastly, the bill is opposed by the insurance industry who is trying to contain costs. They see this as a very negative effort in their efforts to manage health care and try and hold the line on insurance premiums and you're all aware of that I believe. So finally, my conclusion is the bill is