

services is not the direction we want to take. If you look at information from these cuts, you will find that over 40 states have almost all of these optional services, that one way or another we are not a Cadillac plan that has coverages that are not provided in other states. The exception is the chiropractors and they're under 804. We cut in half the amount of treatments that they can provide, so we are cutting back on chiropractic, but we maintain them as part of the Medicaid program. But, otherwise, as you go through the different cuts that are proposed here, my guess is, from information that we've looked at before, that we're in the mainstream. We're not out of line. What we're covering here is what most every other state is covering, with few exceptions. And why is that? Because these make sense. When you talk about cutting an optometrist, when you talk about cutting a psychologist, what you're talking about is cutting out the lower cost individual providing a service and forcing people into higher cost deliverers of that same service. You cut out an optometrist, then you can go to ophthalmologist because an ophthalmologist is a medical doctor, medical doctors have to be covered. They cost more, in many cases, than optometrists. They're higher trained and, you know, all those issues are involved there but if you want to save money, this isn't the cut you want to make, in my view. Psychologists are out there providing services. You don't go to psychologists any more under this cut, you can go to a psychiatrist, a doctor, has to be covered and a psychiatrist is going to cost you a lot more than a psychologist. You want to talk about dentists, you want to cut out the dentists, the dentures, that's fine, okay, so now these individuals are going to have dental problems that grow and eventually get to a point where maybe they will need to have hospitalization to deal with whatever might result because they haven't taken care of their denture problems or their dental problems. And you know, again, a doctor can be called in, they have to be covered to go into a hospital, a higher cost involved. Eyeglasses, are we going to cut out eyeglasses for individuals that need them? Or the liver and heart transplants, you know, those are tough issues but the actual savings on those, I think, is rather small. Prosthetic devices, durable medical equipment, medical supplies, these enable and empower individuals to live independent lives and be able to live outside of an institution where, again, if you don't provide the service, you have to cover them in an institution and the cost is going to be greater, much greater than what we're providing for under these optional services. Same thing about physical therapists, speech therapists, hearing