

health education, we've got local public health departments, state departments of health, area agents on aging, community action agencies, hospitals. Health associations, there are a number of them; American Cancer Society, diabetes, Heart Association, Lung Association, Arthritis Association, cystic fibrosis, Easter Seals, March of Dimes, muscular dystrophy, kidney, multiple sclerosis and prevention of blindness, myasthenia gravis, you know, the whole thing is listed there. We know who is out there, but, see, that's the beautiful thing about this. We know who is out there. We also know who is not being served. And, in fact, unfortunately for those that don't want to recognize the need, I can understand that. In Senator Haberman's district, he's already getting some state funds on a demonstration project in his county. I guess he doesn't have to worry about it anymore. He's being taken care of. There's a lot of the rest of you that don't have those counties in your regions that aren't. So maybe that's the reason he's not concerned, or maybe, hopefully, he knows the difference. I'm not sure. All I can say is that there is no overlapping or duplication and never was intended to be. There are people being left unserved. There is a public health need. At the present time, this state spends nothing, zero, zero on public health. And, as I told you when I opened, I'm not suggesting we spend it because we're not spending anything at all, I'm suggesting we spend it because there is an obvious unmet need. You know, this is yours, it's not mine. If you can go back home and justify the fact that there will be people left unserved, I guess that's your conscience, not mine. I'm not going to worry about that. But it would bother me, I guess. Just because we've got it in our areas and Don has it in his areas and some of the rest of you have some of it doesn't mean we shouldn't recognize...we shouldn't recognize it on that need and do something about it. I would just like to humbly suggest that because this is an important part of the whole, it's an important part of our next consideration on rural health, it will be part of our consideration on the nursing shortage and program, all of it ties together. They should all move. They all should be considered and a consensus should be developed and parts of this may go, parts of it may not and maybe none of it will go if, in fact, some of the other programs and recommendations can fit. But this is no different than a lot of other things where good ideas develop, important unmet needs are suggested to be met and unless you keep them on the floor so they can be discussed as part of the whole and understood so all of us can understand and support them in good faith, it really