

you care to proceed, Senator Moore, or....Fine. I'll leave your light on, Senator Moore. Yours is on first.

SENATOR MOORE: (Mike not activated immediately.) ...as far as I'm concerned, but....

SPEAKER BARRETT: Senator Warner, would you...Well, let's take them individually, Senator Moore, as you requested. Senator Moore, or Senator Warner, please, would you care to explain Section 1?

SENATOR WARNER: Sure. Section 1, it's still difficult not to...because there is a relationship, but I...we can work this out. Section 1 is the increase in Medicaid rates for noninstitutional medical providers, that's medical providers other than hospitals. As indicated earlier, this was a request by the...within the Social Services budget, was not included in the Governor's, but it is our belief that it would be appropriate that this section be adopted and available for the Legislature to enact...act upon in LB 525. I move its adoption. I don't think this one is argumentative.

SPEAKER BARRETT: Thank you. A priority motion on the desk.

CLERK: Mr. President, Senator Lynch would move to bracket the bill until Monday, May 15.

SPEAKER BARRETT: Senator Lynch.

SENATOR LYNCH: Mr. President, members, I reluctantly do what I have, just suggest that we do for a number of reasons. The first part of the bill does deal with Medicaid reimbursement. As you all know, I'm also the sponsor of LB 187, the indigent health care bill, which would also provide for some reimbursement to hospitals and also the doctors. My bill, I think, would especially address the serious problem in the greater Nebraska hospitals, where they have folks who aren't on Medicare and Medicaid and necessarily are falling through the cracks. Somebody, given the fact there are numbers in 525 that involve reimbursement to doctors and also the hospitals, somebody, I assume, must have some numbers about how that money, how that amount of money was established and how it would be distributed. As it applies to physicians, especially as it applies to Medicare, I think we should have some schedule of reimbursement, compared to what they're reimbursed for now.