

striking the enacting clause.

SPEAKER BARRETT: Chair recognizes Senator Moore.

SENATOR MOORE: I will save my dissertation on how unwise it would be for the Legislature to advance this bill for a later time and pull that at this point in time.

SPEAKER BARRETT: It is withdrawn.

CLERK: Mr. President, Senator Lynch would move to return the bill for specific amendment. Senator, I have your AM2000 that's printed on page 249 of the Journal.

SPEAKER BARRETT: Chair recognizes Senator Lynch.

SENATOR LYNCH: Mr. President, members, I think it's important for us to give you a briefing as to what happened and why we're doing this today. Back in May, about the 23rd, in 1989, when this bill was on Final Reading and could have been considered, it was obvious that at the same time LB 525, a trailer bill to the appropriations bill, was in fact in place. And, in fact, I supported that legislation. I supported it because it did, in effect, the same thing, to some degree, in a different way than 187, involved the reimbursement for hospitals, involved the reimbursement for doctors. LB 525 was good because it provided funds and reimbursement for physicians, especially in areas outside of Omaha and Lincoln. And, in the process of developing that reimbursement schedule, recognized the need for especially family practitioners reimbursements, which were too low, and at the same time adjusted some specialty costs downwards which were apparently too high. The physicians part of 525 was successful. However, it was obvious to me that it would also be unfair to suggest, by passing 187 to the Governor, that she would have to make a choice regarding 525 or portions of it, and 187 together. And, obviously, this Legislature would not consider those kinds of costs in total as well. So I moved, on May 23, 1989, to bracket 187 until January 3rd, and today, of course, we're discussing it now. What I would like to suggest we do is amend the bill with the amendment 2000, found on page 249, to that total that, in fact, is left after 525's success last year. Before I do that, though, let me explain just quickly that this is, in fact, a program of last resort for reimbursement to hospitals. Medically indigent are those individuals whose family's income fall below the federal poverty guidelines, who