

have no public or private health insurance coverage, who are not eligible to receive health care benefits under any other public program, who are unable to pay for needed health care themselves. Many of the medically indigent are between jobs, or unemployed, or employed individuals who lack coverage simply because they work in service industries, agriculture, for example, and other seasonable and unstable vocations. They may be a farm wife in Greeley County, a temporary unemployed food processing worker in some other county, or a jail inmate and an accident victim. The demographics of the people who would be involved in this indicate that about 15.2 percent of all Americans are living below the federal poverty guidelines. The medically indigent population is interesting as well. About two-thirds are white, a little more than two-thirds, actually, less than one-third black, and less than one-tenth Hispanic. Traditionally hospitals and physicians, God bless them, have traditionally cared for these people, but they do it in the old Robin Hood fashion. They take care of them and get as much back as they can with reimbursement. Also want to point out to you, especially the senators who live outside the areas of Omaha and Lincoln, that 90 percent of the uncompensated care, which is what we use to describe the service provided by these hospitals, was provided by 20 percent of the Omaha and Lincoln area hospitals, but 75 percent of that care was provided by hospitals outside the State of...outside the Omaha and Lincoln area. The Department of Social Services estimated that there are about 3,450 medically indigent persons that would, in fact, need 10.6 million dollars to adequately reimburse for that indigent care. In addition to that, another 3 million dollars for about two point...about 2,600 people who are in jails and need care as well. That's fairly close, to be completely frank, to the estimates developed by the Department of Social Services and also the fiscal office. Eligibility criteria is pretty tough. For example a family of four, under the eligibility standards for poverty guidelines, cannot make more than \$970 a month. But they would have to spend down, from that 970, \$445 that month for medical services before they became eligible for these funds. So, in fact, it is, in effect, something difficult to do and fair, but it also means that people have to go to extraordinary lengths to provide for themselves before being eligible. The criteria for resources would be determined by the Department of Social Services who would administer the program, and there would be ongoing review, either quarterly, every six months, or annually to make sure that the families who would use this program would, in fact, qualify for it. The amendment,