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that's what we are talking about. And, yes, I guess at this point I'll rise from a financial standpoint. As outlined by Senator Wesely, the original intent behind the committee amendments was to grandfather all present recipients until point of birth, due to federal guidelines we simply cannot do that, because one of the things maybe the federal government does right is they say you have to treat everybody the same, you can't have some arbitrary cutoff point there. And so Senator Lindsay's amendment, I think, brings the bill into the proper form to at least, when possible, satisfy the intent and extend the program for a couple more months, then at that point in time terminate the payment to individuals prior to the date of birth. I support Senator Lindsay's amendment. I support the bill in its pristine form, as well as amended by committee. It was a bill that I, myself, introduced in previous times, last year in the Legislature. It's one of those things that when we come here this session, as I have said, it's not fair, just like it's not the actual straw itself that broke the camel's back, it's not exactly Medicaid that brought us here. I think Medicaid has certainly accelerated the reason that we're here, because in the last 16 months the Medicaid bill, so to speak, that the state has to pay has increased by \$147 million, over and above what we thought it would be a year and a half ago. But nevertheless, it's one of those things the Medicaid blob, as some people have called it, and certainly from a budgetary perspective that is a fair name because it just grows, and grows, and grows and there is very little we can do about it. And the reason I said there is very little we can do about it, because whether we like it or not, if we participate in the Medicaid program basically it's an all or nothing type situation with the federal government. Of that \$415 million total cost of Medicaid, and of that next year \$200 million cost of Medicaid, there is very, very little that is discretionary given the guidelines of the federal government. Actually, the things that are discretionary are basically this ADC program, the variety of optional services that I introduced to eliminate entirely last year, the Governor introduced a plan to send us down the path of some management care plan, I think that's something we need to do somehow. The mechanics of how we do that have to be determined. But there is very, very, very little that this state Legislature can do to decrease the cost, ever-increasing cost of Medicaid. There are few optional things that we can do. The way I look at it is there are want to's and there are have to's. And certainly, the ADC payment that the Legislature has given to these individuals is certainly a want to, it is certainly justified. But the fact is that now is...if