

care. If you look at some of the handouts I have got for you, first off, there is one rather long article about long-term care another budget buster. Well there is no doubt about it, when you look at Medicaid, Medicaid is costing us a great deal of money. It has gone up significantly, the biggest part of the Medicaid budget is nursing homes. And for us, that's one of the leading reasons why our Medicaid budget has gotten so high, the cost of nursing homes and the increased use of nursing homes. So if you want to stop the budget busting part of Medicaid, you need to stop the budget busting part of long-term care. Now the other handout that I have talks about the Medicaid budget for '95. It's almost \$600 million and nursing home part of it is almost \$200 million. So it's almost a third of the expenditures of Medicaid go to nursing homes. Now out of the 16,000 nursing home residents in Nebraska, half of them, approximately half of them, 8,200 are Medicaid funded persons. And typically, and although the studies are not always clear about this, typically somebody goes into the nursing home. They usually don't immediately become, aren't immediately Medicaid eligible. They usually come in with some resources that they have to spend down. If you adopt the Bohlke amendment, what you do is you really nullify the effort to try and contain costs with nursing homes and try and contain costs of Medicaid because very few, I don't know what the percent is, but I think that it's a very few people comparatively that have absolutely no resources immediately qualify for Medicaid and thus get into a nursing home and are immediately Medicaid qualified. And if her amendment is adopted, that's the only people we're going to be screening. So the vast majority of people that are out there that have a few resources that aren't immediately Medicaid eligible, they have a need for a nursing home, we're not going to screen them. We'll let them come in. They're free to come in. There is some checking on that by the way, some medical necessities are required, but we're not really doing as careful a job as I think we need to. So they come into the nursing home and typically in my view, the studies range on this, but a year's time goes by and their money is spent. Now that means some it's a few weeks, some it's a few months, some it's a few years, but on average, you know typically you'll see somebody after a year or so and they're going to be Medicaid eligible. At \$25,000 a year, how many people do you know that have saved up that much amount or 50,000 or \$100,000? I don't know how much people end up saving and have available to put into Medicaid expenditures, but there's not a whole lot of folks that have that kind of money when they are elderly and have need of a