

Dieks is talking about, we don't have designated shortage areas for currently, and allow for them in statute. That is not to say they aren't identified through information, but we don't actually specifically authorize a designation. So this sets that up, because we expanded these new areas those are included. And the periodic is a fact that...they aren't systematic in when they do these, and so it's not like every two years, every four years, so we give them a periodic so that when they get data updated and they can do a new targeting, that's when they should do it.

SENATOR BERNARD-STEVENS: Okay. Senator Wesely, how is shortage defined?

SENATOR WESELY: Well, currently,...I don't know the answer to that. I know currently they've got a formula that they set out in terms of population and availability of staffing. I think they'd have to set up a similar formula for these types of providers as well.

SENATOR BERNARD-STEVENS: Yeah. And the only reason I bring it up, and I'm not holding up the bill at all, but one of the things that concerns me always in this area is when we define shortage as, yeah, there's a formula. But when we get into shortages in geographic areas, traditionally what happens, well, not traditionally, in many cases what happens they will go into that regional center in the area and the shortage still exists out in the rural area. So it's great for the Interstate 80, and the North Platte's, Kearney, and Grand Island's, because they'll be declared shortage in certain areas, and then the people still have to come in. But we're not doing.... My sense is we're not necessarily still getting physicians out into the real shortage, rural areas. Would you concur with that, or are we beginning to change?

SENATOR WESELY: Well, I agree. Anymore the market has changed so much, and this is something we'll talk about when Senator Matzke's bill comes up and other things. But, yeah, right now I think we try and target pretty well, but we have not succeeded overall in getting people to the real shortage areas. We have ended up seeing them go to those regional areas. It helps, but it's not quite what we have in mind. This, I think, will address that. I think they are trying to target better; but, no, we still have a problem.